

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Elise for Congress

ADDRESS (number and street)

PO Box 100

Check if different
than previously
reported. (ACC)

Guilderland Center

NY

12085

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00547893

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

NY

21

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
04 / 01 / 2026

through

M M / D D / Y Y Y Y
06 / 30 / 2026*I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.*

Type or Print Name of Treasurer

Hobbs, Cabell, , ,

Signature of Treasurer

Hobbs, Cabell, , ,

Date

M M / D D / Y Y Y Y
07 / 15 / 2026

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Elise for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	0.00	2792264.30
(b) Total Contribution Refunds (from Line 20(d))	8640.00	508557.77
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	- 8640.00	2283706.53
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	32469.69	2724445.51
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	75.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	32469.69	2724370.51
8. Cash on Hand at Close of Reporting Period (from Line 27)	10827384.24	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Elise for Congress

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2026

To:

MM / DD / YYYY
06 / 30 / 2026**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

0.00

993174.32

(ii) Unitemized

0.00

1489497.12

(iii) TOTAL of contributions
from individuals ▶

0.00

2482671.44

(b) Political Party Committees.....

0.00

20000.00

(c) Other Political Committees
(such as PACs)

0.00

289592.86

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

0.00

2792264.30

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

1.28

3150371.68

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)

0.00

75.00

15. OTHER RECEIPTS
(Dividends, Interest, etc.)

42681.37

44059.50

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

42682.65

5986770.48

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	32469.69	2724445.51
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	8640.00	442057.77
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	66500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	8640.00	508557.77
21. OTHER DISBURSEMENTS	0.00	30590.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	41109.69	3263593.28

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	10825811.28
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	42682.65
25. SUBTOTAL (add Line 23 and Line 24).....	10868493.93
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	41109.69
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	10827384.24

FOR LINE NUMBER:
(check only one)

	11a		11b		11c		11d		
X	12		13a		13b		14		15

Elise for Congress

TEAM ELISE

M M / D D / Y Y Y Y
05 18 2026

Transaction ID : SA12.2289218

C	C00830679
---	-----------

0.40

1847482.25

MM / DD / YYYY
12 / 31 / 2023

Transaction ID : SA.2286368.22.TE29

C

A horizontal number line with arrows at both ends. It has 11 tick marks. The 10th tick mark from the left is labeled -0.15 .

1028.27

TRANSFER FROM TEAM ELISE

MM / DD / YYYY

Transaction ID : SA.2286369.22.TE29

C

A horizontal number line with arrows at both ends. It has 11 tick marks. The 10th tick mark from the left is labeled -0.03 .

1028.27

TRANSFER FROM TEAM ELISE

0.40

The diagram shows a rectangular frame with 10 vertical members and 2 horizontal members. A cross-section of a member is shown, indicating a rectangular shape with a central void.

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 33

☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
☒ 12	☐ 13a	☐ 13b	☐ 14	☐ 15

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

A. Mailing Address PO BOX 621

City
MARSTONS MILLSState
MAZip Code
02648-0621FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	16	/	2024

Transaction ID : SA.2286370.22.TE29

Amount of Each Receipt this Period

- 0.05

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

B. Full Name (Last, First, Middle Initial)
GREINER, MICHAEL, , MR.,
Mailing Address PO BOX 621City
MARSTONS MILLSState
MAZip Code
02648-0621FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	18	/	2024

Transaction ID : SA.2286371.22.TE29

Amount of Each Receipt this Period

- 2.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

C. Full Name (Last, First, Middle Initial)
HOUSE GOP BATTLEGROUND FUND
Mailing Address PO BOX 500City
GLENS FALLSState
NYZip Code
12801-0500FEC ID number of contributing
federal political committee.

C C00837492

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8853.79

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	30	/	2026

Transaction ID : SA12.2298679

Amount of Each Receipt this Period

0.43

☐ Memo Item

TRANSFER

0.43

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
☒ 12	☐ 13a	☐ 13b	☐ 14	☐ 15

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

A.

Mailing Address PO BOX 621

City

MARSTONS MILLS

State

MA

Zip Code

02648-0621

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	2	4

Transaction ID : SA.2290620.26.BG26

Amount of Each Receipt this Period

- 4.75

☒ Memo Item

TRANSFER

TRANSFER FROM HOUSE BATTLEGROUND FUND

B.

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

Mailing Address PO BOX 621

City

MARSTONS MILLS

State

MA

Zip Code

02648-0621

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	9		2	0	2	4

Transaction ID : SA.2290624.26.BG26

Amount of Each Receipt this Period

- 2.48

☒ Memo Item

TRANSFER

TRANSFER FROM HOUSE BATTLEGROUND FUND

C.

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

Mailing Address PO BOX 621

City

MARSTONS MILLS

State

MA

Zip Code

02648-0621

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	2	4

Transaction ID : SA.2290625.26.BG26

Amount of Each Receipt this Period

- 2.48

☒ Memo Item

TRANSFER

TRANSFER FROM HOUSE BATTLEGROUND FUND

SUBTOTAL of Receipts This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
☒ 12	☐ 13a	☐ 13b	☐ 14	☐ 15

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

A. Mailing Address PO BOX 621

City
MARSTONS MILLSState
MAZip Code
02648-0621FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 25 2024

Transaction ID : SA.2290626.26.BG26

Amount of Each Receipt this Period

- 3.33

☒ Memo Item

TRANSFER

TRANSFER FROM HOUSE BATTLEGROUND FUND

B. Full Name (Last, First, Middle Initial)

TEAM ELISE

Mailing Address PO BOX 500

City
GLENS FALLSState
NYZip Code
12801-0500FEC ID number of contributing
federal political committee.

C C00830679

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1847482.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2026

Transaction ID : SA12.2298677

Amount of Each Receipt this Period

0.45

☐ Memo Item

TRANSFER

C. Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

Mailing Address PO BOX 621

City
MARSTONS MILLSState
MAZip Code
02648-0621FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 23 2024

Transaction ID : SA.2289981.22.TE30

Amount of Each Receipt this Period

- 24.75

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.45

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

A. Mailing Address PO BOX 621

City

MARSTONS MILLS

State

MA

Zip Code

02648-0621

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	2	4

Transaction ID : SA.2289989.22.TE30

Amount of Each Receipt this Period

- 19.80

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

B. Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

Mailing Address PO BOX 621

City

MARSTONS MILLS

State

MA

Zip Code

02648-0621

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	2	4

Transaction ID : SA.2289990.22.TE30

Amount of Each Receipt this Period

- 9.50

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

C. Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

Mailing Address PO BOX 621

City

MARSTONS MILLS

State

MA

Zip Code

02648-0621

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	2	4

Transaction ID : SA.2289991.22.TE30

Amount of Each Receipt this Period

- 11.40

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
☒ 12	☐ 13a	☐ 13b	☐ 14	☐ 15

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Elise for Congress

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

A. Mailing Address PO BOX 621

City

MARSTONS MILLS

State

MA

Zip Code

02648-0621

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	2	4

Transaction ID : SA.2289992.22.TE30

Amount of Each Receipt this Period

- 9.50

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

B. Full Name (Last, First, Middle Initial)
GREINER, MICHAEL, , MR.,
Mailing Address PO BOX 621

City

MARSTONS MILLS

State

MA

Zip Code

02648-0621

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	2	4

Transaction ID : SA.2289993.23.TE30

Amount of Each Receipt this Period

- 9.50

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

C. Full Name (Last, First, Middle Initial)
GREINER, MICHAEL, , MR.,
Mailing Address PO BOX 621

City

MARSTONS MILLS

State

MA

Zip Code

02648-0621

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	2	4

Transaction ID : SA.2289994.23.TE30

Amount of Each Receipt this Period

- 9.50

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 33

☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
☒ 12	☐ 13a	☐ 13b	☐ 14	☐ 15

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

Mailing Address PO BOX 621

City

MARSTONS MILLS

State

MA

Zip Code

02648-0621

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 06 2024

Transaction ID : SA.2289995.23.TE30

Amount of Each Receipt this Period

- 18.80

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

B.

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

Mailing Address PO BOX 621

City

MARSTONS MILLS

State

MA

Zip Code

02648-0621

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 06 2024

Transaction ID : SA.2289996.23.TE30

Amount of Each Receipt this Period

- 19.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

C.

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

Mailing Address PO BOX 621

City

MARSTONS MILLS

State

MA

Zip Code

02648-0621

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 16 2024

Transaction ID : SA.2290005.22.TE30

Amount of Each Receipt this Period

- 2.97

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
☒ 12	☐ 13a	☐ 13b	☐ 14	☐ 15

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

Mailing Address PO BOX 621

City

MARSTONS MILLS

State

MA

Zip Code

02648-0621

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	2	4

Transaction ID : SA.2290006.22.TE30

Amount of Each Receipt this Period

- 4.95

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

B.

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

Mailing Address PO BOX 621

City

MARSTONS MILLS

State

MA

Zip Code

02648-0621

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	2	4

Transaction ID : SA.2290007.22.TE30

Amount of Each Receipt this Period

- 2.97

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

C.

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

Mailing Address PO BOX 621

City

MARSTONS MILLS

State

MA

Zip Code

02648-0621

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federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	2	4

Transaction ID : SA.2290008.22.TE30

Amount of Each Receipt this Period

- 2.97

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
☒ 12	☐ 13a	☐ 13b	☐ 14	☐ 15

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

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federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	2	4

Transaction ID : SA.2290009.22.TE30

Amount of Each Receipt this Period

- 4.25



Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

B.

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

Mailing Address PO BOX 621

City

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Zip Code

02648-0621

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	2	4

Transaction ID : SA.2290010.22.TE30

Amount of Each Receipt this Period

- 2.85



Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

C.

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

Mailing Address PO BOX 621

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MARSTONS MILLS

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C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	2	4

Transaction ID : SA.2290011.22.TE30

Amount of Each Receipt this Period

- 4.75



Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 33

☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
☒ 12	☐ 13a	☐ 13b	☐ 14	

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GREINER, MICHAEL, , MR.,

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C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	2	4

Transaction ID : SA.2290012.22.TE30

Amount of Each Receipt this Period

- 6.65

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

B.

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

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C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	2	4

Transaction ID : SA.2290013.22.TE30

Amount of Each Receipt this Period

- 7.60

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

C.

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

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C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	2	4

Transaction ID : SA.2290014.22.TE30

Amount of Each Receipt this Period

- 7.60

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 33

☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
☒ 12	☐ 13a	☐ 13b	☐ 14	☐ 15

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C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	2	4

Transaction ID : SA.2290015.22.TE30

Amount of Each Receipt this Period

- 4.75

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

B.

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

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Name of Employer

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Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	2	4

Transaction ID : SA.2290016.22.TE30

Amount of Each Receipt this Period

- 4.75

☒ Memo Item

TRANSFER

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Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	2	4

Transaction ID : SA.2290017.22.TE30

Amount of Each Receipt this Period

- 6.65

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
☒ 12	☐ 13a	☐ 13b	☐ 14	☐ 15

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Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	2	4

Transaction ID : SA.2290018.22.TE30

Amount of Each Receipt this Period

- 7.60

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

B.

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

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Occupation

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Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	2	4

Transaction ID : SA.2290019.22.TE30

Amount of Each Receipt this Period

- 7.60

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

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Full Name (Last, First, Middle Initial)

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Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	2	4

Transaction ID : SA.2290020.22.TE30

Amount of Each Receipt this Period

- 7.60

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 33

☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
☒ 12	☐ 13a	☐ 13b	☐ 14	☐ 15

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NAME OF COMMITTEE (In Full)

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Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

Mailing Address PO BOX 621

City

MARSTONS MILLS

State

MA

Zip Code

02648-0621

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federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	2	4

Transaction ID : SA.2290021.22.TE30

Amount of Each Receipt this Period

- 7.60

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

B.

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

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02648-0621

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Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	2	4

Transaction ID : SA.2290022.22.TE30

Amount of Each Receipt this Period

- 6.65

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

C.

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

Mailing Address PO BOX 621

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Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	2	4

Transaction ID : SA.2290023.22.TE30

Amount of Each Receipt this Period

- 7.60

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
☒ 12	☐ 13a	☐ 13b	☐ 14	☐ 15

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C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	4

Transaction ID : SA.2290024.23.TE30

Amount of Each Receipt this Period

- 7.60

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

B.

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

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federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	1		2	0	2	4

Transaction ID : SA.2290025.23.TE30

Amount of Each Receipt this Period

- 7.60

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

C.

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

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Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	2	4

Transaction ID : SA.2290026.23.TE30

Amount of Each Receipt this Period

- 7.60

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
☒ 12	☐ 13a	☐ 13b	☐ 14	☐ 15

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Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	2	4

Transaction ID : SA.2290027.23.TE30

Amount of Each Receipt this Period

- 9.50

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

B.

Full Name (Last, First, Middle Initial)

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Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	2	4

Transaction ID : SA.2290028.23.TE30

Amount of Each Receipt this Period

- 9.50

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

C.

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

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Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	2	4

Transaction ID : SA.2290029.23.TE30

Amount of Each Receipt this Period

- 7.60

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
☒ 12	☐ 13a	☐ 13b	☐ 14	☐ 15

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NAME OF COMMITTEE (In Full)

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Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

A.

Mailing Address PO BOX 621

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State

MA

Zip Code

02648-0621

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federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	6		2	0	2	4

Transaction ID : SA.2290030.23.TE30

Amount of Each Receipt this Period

- 6.65

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

B.

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

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Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	3		2	0	2	4

Transaction ID : SA.2290031.23.TE30

Amount of Each Receipt this Period

- 6.65

☒ Memo Item

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Occupation

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Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	3		2	0	2	4

Transaction ID : SA.2290032.23.TE30

Amount of Each Receipt this Period

- 6.65

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

SUBTOTAL of Receipts This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 33

☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
☒ 12	☐ 13a	☐ 13b	☐ 14	☐ 15

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

GREINER, MICHAEL, , MR.,

A.

Mailing Address PO BOX 621

City

MARSTONS MILLS

State

MA

Zip Code

02648-0621

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1028.27

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 25 / 2024

Transaction ID : SA.2290037.22.TE30

Amount of Each Receipt this Period

- 0.05



Memo Item

TRANSFER

TRANSFER FROM TEAM ELISE

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period



Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period



Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

1.28

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 OF 33

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

TRUIST BANK

A.

Mailing Address 2200 WILSON BLVD SUITE 100

City

ARLINGTON

State

VA

Zip Code

22201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

44059.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2026

Transaction ID : SA.5678342

Amount of Each Receipt this Period

20571.20

☐ Memo Item

INTEREST EARNED

Full Name (Last, First, Middle Initial)

TRUIST BANK

B.

Mailing Address 2200 WILSON BLVD SUITE 100

City

ARLINGTON

State

VA

Zip Code

22201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

44059.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 29 / 2026

Transaction ID : SA.5678343

Amount of Each Receipt this Period

20480.27

☐ Memo Item

INTEREST EARNED

Full Name (Last, First, Middle Initial)

TRUIST BANK

C.

Mailing Address 2200 WILSON BLVD SUITE 100

City

ARLINGTON

State

VA

Zip Code

22201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

44059.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2026

Transaction ID : SA.5678344

Amount of Each Receipt this Period

1629.90

☐ Memo Item

INTEREST EARNED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

42681.37

42681.37

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 33

☒ 17	☐ 18	☐ 19a	☐ 19b
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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address PO BOX 842875

City
BOSTONState
MAZip Code
02284Purpose of Disbursement
PAYROLL SERVICE/TAXES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

84.23

Transaction ID : SB.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TRUIST

Mailing Address 2200 WILSON BLVD STE 100

City
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

35.00

Transaction ID : SB.1

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. THE HARTFORD

Mailing Address PO BOX 783690

City
PHILADELPHIAState
PAZip Code
19178Purpose of Disbursement
INSURANCE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

15.00

Transaction ID : SB.12

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

134.23

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. CAPITOL HILL CLUB

Mailing Address 300 FIRST ST, SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M	D D	Y Y Y Y
04	16	2026

FEC Identification Number

C

Amount of Each Disbursement this Period

44.20

Transaction ID : SB.9

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. COMPLIANCE CONSULTING CO OF VIRGINIA LLC

Mailing Address PO BOX 365

City
MCLEANState
VAZip Code
22101Purpose of Disbursement
COMPLIANCE CONSULTING/PRINTING/DELIVERY

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M	D D	Y Y Y Y
04	17	2026

FEC Identification Number

C

Amount of Each Disbursement this Period

3189.06

Transaction ID : SB.6

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WILEY REIN LLP

Mailing Address PO BOX 800

City
NEWARKState
NJZip Code
07101Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M	D D	Y Y Y Y
04	30	2026

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB.14

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

6233.26

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 33

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address PO BOX 842875

City
BOSTONState
MAZip Code
02284Purpose of Disbursement
PAYROLL SERVICE/TAXES

Candidate Name

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	☐ Primary	☐ General
	☐ Other (specify) ▼	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 01 / 2026

FEC Identification Number

C

Amount of Each Disbursement this Period

84.23

Transaction ID : SB.18

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address PO BOX 981532

City
EL PASOState
TXZip Code
79998Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	☐ Primary	☐ General
	☐ Other (specify) ▼	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 08 / 2026

FEC Identification Number

C

Amount of Each Disbursement this Period

95.00

Transaction ID : SB.7

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITOL HILL CLUB

Mailing Address 300 FIRST ST, SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	☐ Primary	☐ General
	☐ Other (specify) ▼	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 18 / 2026

FEC Identification Number

C

Amount of Each Disbursement this Period

680.00

Transaction ID : SB.10

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

859.23

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. COMPLIANCE CONSULTING CO OF VIRGINIA LLC

Mailing Address PO BOX 365

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	2	6

City
MCLEANState
VAZip Code
22101

FEC Identification Number

C

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2950.00

Transaction ID : SB.4

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. BEECHES MANOR

Mailing Address 7900 TURIN ROAD

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	2	6

City
ROMEState
NYZip Code
13440

FEC Identification Number

C

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

3634.37

Transaction ID : SB.11

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. TRUIST

Mailing Address 2200 WILSON BLVD STE 100

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	2	6

City
ARLINGTONState
VAZip Code
22209

FEC Identification Number

C

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

103.62

Transaction ID : SB.2

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

6687.99

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. REPUBLIC STRATEGIES

Mailing Address 220 W WINDSOR AVENUE

City
ALEXANDRIAState
VAZip Code
22301Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

9300.00

Transaction ID : SB.8

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WILEY REIN LLP

Mailing Address PO BOX 800

City
NEWARKState
NJZip Code
07101Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address PO BOX 842875

City
BOSTONState
MAZip Code
02284Purpose of Disbursement
PAYROLL SERVICE/TAXES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

84.23

Transaction ID : SB.19

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

12384.23

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. COMPLIANCE CONSULTING CO OF VIRGINIA LLC

Mailing Address PO BOX 365

City
MCLEANState
VAZip Code
22101Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

2950.00

Transaction ID : SB.5

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WILEY REIN LLP

Mailing Address PO BOX 800

City
NEWARKState
NJZip Code
07101Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TRUIST

Mailing Address 2200 WILSON BLVD STE 100

City
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

205.75

Transaction ID : SB.3

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6155.75

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. THE HARTFORD

Mailing Address PO BOX 783690

City
PHILADELPHIAState
PAZip Code
19178Purpose of Disbursement
INSURANCE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

15.00

Transaction ID : SB.13

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

15.00

TOTAL This Period (last page this line number only).....▶

32469.69

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 17	☐ 18	☐ 19a	☐ 19b
☒ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. COTE, DARLA, , ,

Mailing Address 91 PRIEST ROAD

City
NOTTINGHAMState
NHZip Code
03290Purpose of Disbursement
CONTRIBUTION REFUND PRIMARY 2026

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : SB.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Buchyn, David, , ,

Mailing Address ONE FLENSBURG DRIVE

City
PITTSBURYState
NYZip Code
12180Purpose of Disbursement
VOID CEHCK REISSUE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

- 3000.00

Transaction ID : SB.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Buchyn, David, , ,

Mailing Address ONE FLENSBURG DRIVE

City
PITTSBURYState
NYZip Code
12180Purpose of Disbursement
CONTRIBUTION REFUND GENERAL 2026

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB.23

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

50.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 17	☐ 18	☐ 19a	☐ 19b
☒ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. Low, Joseph, , ,

Mailing Address 5 Star Farm Rd

City
HarrisonState
NYZip Code
10577Purpose of Disbursement
CONTRIBUTION REFUND GENERAL 2024

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

3300.00

Transaction ID : SB.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Low, Joseph, , ,

Mailing Address 5 Star Farm Rd

City
HarrisonState
NYZip Code
10577Purpose of Disbursement
CONTRIBUTION REFUND PRIMARY 2024

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

3300.00

Transaction ID : SB.27

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WESTCOTT, MARK, , ,

Mailing Address 10 JERRY DRIVE

City
PLATTSBURGHState
NYZip Code
12901Purpose of Disbursement
CONTRIBUTION REFUND PRIMARY 2026

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

990.00

Transaction ID : SB.29

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

7590.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. FIDOPIASTIS, PETER, , ,

Mailing Address 148 RIDGE STREET

City
GLENS FALLSState
NYZip Code
12801Purpose of Disbursement
CONTRIBUTION REFUND OTHER PRIMARY 2022

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

OTHER PRIMARY

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

750.00

Transaction ID : SB.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FIDOPIASTIS, PETER, , ,

Mailing Address 148 RIDGE STREET

City
GLENS FALLSState
NYZip Code
12801Purpose of Disbursement
CONTRIBUTION REFUND PRIMARY 2022

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : SB.26

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DEPOLD, SHARLENE, , ,

Mailing Address 9 ALEXANDER WAY

City
HUDSON FALLSState
NYZip Code
12839Purpose of Disbursement
CONTRIBUTION REFUND GENERAL 2020

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : SB.21

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

900.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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☒ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. DEPOLD, SHARLENE, , ,

Mailing Address 9 ALEXANDER WAY

City
HUDSON FALLSState
NYZip Code
12839Purpose of Disbursement
CONTRIBUTION REFUND PRIMARY 2020

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		29		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : SB.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

100.00

TOTAL This Period (last page this line number only).....▶

8640.00