

**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

MIKE FLOOD FOR CONGRESS

ADDRESS (number and street)

PO BOX 81041



Check if different than previously reported. (ACC)

LINCOLN

NE

68501-1041

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00801241

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

NE

01

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  
10 01 2025

through

M M / D D / Y Y Y Y  
12 31 2025

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 PHILLIPS, ROBERT, , ,

Signature of Treasurer

PHILLIPS, ROBERT, , ,

Date

M M / D D / Y Y Y Y  
01 30 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

**MIKE FLOOD FOR CONGRESS**

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	2	5

	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))....	358555.26	1427345.69
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	5000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	358555.26	1422345.69
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	175626.46	582691.92
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	175626.46	582691.92
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1202590.75	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	6045.90	

For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov).

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**MIKE FLOOD FOR CONGRESS**

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
10 / 01 / 2025

To:

M M / D D / Y Y Y Y  
12 / 31 / 2025**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).....**

181575.00

762775.00

**(ii) Unitemized .....**

980.26

31570.69

**(iii) TOTAL of contributions  
from individuals .....**

182555.26

794345.69

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees  
(such as PACs) .....**

176000.00

633000.00

**(d) The Candidate .....**

0.00

0.00

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

358555.26

1427345.69

**12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES .....**

0.00

140420.00

**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

0.00

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

0.00

386.85

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

358555.26

1568152.54

# **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.....	175626.46	582691.92
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	65000.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	65000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	5000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	5000.00
21. OTHER DISBURSEMENTS .....	0.00	6000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	175626.46	658691.92

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1019661.95
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	358555.26
25. SUBTOTAL (add Line 23 and Line 24).....	1378217.21
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	175626.46
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1202590.75

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

PAGE 5 OF 95

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ASCHOFF, TIM, , ,

**A.**

Mailing Address 1950 SW 112TH ST

City

LINCOLN

State

NE

Zip Code

68532-9118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CRETE CARRIER CORP

Occupation

EXECUTIVE

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID : AF28637C503AA4D03BDB

Amount of Each Receipt this Period

2000.00



Memo Item

Full Name (Last, First, Middle Initial)

BAY, MOGENS, C, ,

**B.**

Mailing Address 11211 PIERCE PLZ

City

OMAHA

State

NE

Zip Code

68144-1863

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VALMONT INDUSTRIES, INC.

Occupation

FORMER CHAIRMAN

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	3		2	0	2	5

Transaction ID : A19572A88A99D44F994D

Amount of Each Receipt this Period

1500.00



Memo Item

Full Name (Last, First, Middle Initial)

BAY, MOGENS, C, ,

**C.**

Mailing Address 11211 PIERCE PLZ

City

OMAHA

State

NE

Zip Code

68144-1863

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VALMONT INDUSTRIES, INC.

Occupation

FORMER CHAIRMAN

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	3		2	0	2	5

Transaction ID : A3DD1FD168FB54F6FBF2

Amount of Each Receipt this Period

3500.00



Memo Item

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

7000.00

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

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

PAGE 6 OF 95

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BEIERMANN, MARY, , ,

**A.**

Mailing Address 3307 28TH ST

City

COLUMBUS

State

NE

Zip Code

68601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	9		2	0	2	5

Transaction ID : A7D40794C65774FD0828

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BODE, JOHN, , ,

**B.**

Mailing Address 28389 CATALPA POINT RD

City

EASTON

State

MD

Zip Code

21601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CORN REFINERS ASSOCIATION

Occupation

ASSOCIATION EXECUTIVE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	9		2	0	2	5

Transaction ID : ADE639B0998B84F63B9E

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**C.**Mailing Address 1776 WILSON BLVD  
STE 530

City

ARLINGTON

State

VA

Zip Code

22209-2517

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

18020.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	9		2	0	2	5

Transaction ID : AB1F98F27B7324152B77

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

1000.00

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

# **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)

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

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BRADY, JUSTIN, , ,

**A.**

Mailing Address 6715 SHADOW RIDGE RD

City  
LINCOLN

State  
NE

Zip Code  
68512-3635

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RADCLIFFE GILBERTSON & BRADY

Occupation  
LOBBYIST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 14 2025

Transaction ID : AB023B66514004F9CA96

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BROOKS, KARLENA, , ,

**B.**

Mailing Address 29 POVERTY POINT CIR

City  
ABILENE

State  
TX

Zip Code  
79601-8427

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KELLER WILLIAMS REALTY

Occupation  
REALTOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 01 2025

Transaction ID : AF02373C162404951B91

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BULFINCH, SCOTT, , ,

**C.**

Mailing Address 2128 B ST

City  
LINCOLN

State  
NE

Zip Code  
68502

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 27 2025

Transaction ID : A69547C5F752D4D5BA54

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

4500.00

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CANFIELD, ANNE, , ,

**A.**Mailing Address 820 S COLUMBUS ST  
UNIT 118

City

ALEXANDRIA

State

VA

Zip Code

22314-4293

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE MAJORITY GROUP

Occupation

CONSULTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 06 / 2025

Transaction ID : AC2F73F03E5D643E1A70

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CHADBOURNE, AARON, , ,

**B.**

Mailing Address 166 FORE ST

City

PORTLAND

State

ME

Zip Code

04101-5329

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DEMETRIA REAL ESTATE

Occupation

REALTOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 26 / 2025

Transaction ID : A058EC27997724D71A12

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CHAPIN, DAVID, , ,

**C.**

Mailing Address 4631 HIMARK CT

City

LINCOLN

State

NE

Zip Code

68526-1040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WILLMAR ELECTRIC SERVICE

Occupation

PRESIDENT

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 26 / 2025

Transaction ID : AD628312032D745CC90C

Amount of Each Receipt this Period

3500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

4500.00



# **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)

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

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CHAPIN, SUE, , ,

**A.**

Mailing Address 4631 HIMARK LN

City  
LINCOLN

State  
NE

Zip Code  
68526

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LINCOLN CHRISTIAN SCHOOL

Occupation  
MANAGER, BUSINESS & BOARD TREASURE

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 26 2025

Transaction ID : AFC3212F469614E04A22

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CHOCHON, RICK, , ,

**B.**

Mailing Address 27638 SANDSTONE DR

City  
COLUMBUS

State  
NE

Zip Code  
68601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GREAT PLAINS STATE BANK

Occupation  
BANKER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 29 2025

Transaction ID : A30F371D5FD7D4AADAFC

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

COLLINGSWORTH, BLAKE, , ,

**C.**

Mailing Address 8410 EXECUTIVE WOODS DRIVE

City  
LINCOLN

State  
NE

Zip Code  
68512

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TUSCANY TOWN HOMES

Occupation  
HOME BUILDER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 24 2025

Transaction ID : A4BB11569D190416BA3F

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

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

8000.00

# **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 10 OF 95

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

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

COLLINS, DENNIS W., , ,

**A.**

Mailing Address 105 SOUTH 2ND ST.

City

NORFOLK

State

NE

Zip Code

68701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JEWELL, COLLINS & FLOOD

Occupation

LAWYER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 07 / 2025

Transaction ID : AFC113802A34C4BE7AF9

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

COLLISON, ALAN, , ,

**B.**

Mailing Address 426 S 5TH ST

City

PIERCE

State

NE

Zip Code

68767-1508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MP GLOBAL PRODUCTS

Occupation

PRESIDENT

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2025

Transaction ID : ABDCFC562144D48BBA5B

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

COLLISON, JACQUE, , ,

**C.**

Mailing Address 426 S 5TH ST

City

PIERCE

State

NE

Zip Code

68767-1508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2025

Transaction ID : A74D712B1031A42A79BF

Amount of Each Receipt this Period

3500.00

☐ Memo Item

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

7500.00

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

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

PAGE 11 OF 95

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

COLLISON, JACQUE, , ,

**A.**

Mailing Address 426 S 5TH ST

City  
PIERCEState  
NEZip Code  
68767-1508FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKEROccupation  
HOMEMAKER

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 21 2025

Transaction ID : AEA6F9D2A28CA47B99CC

Amount of Each Receipt this Period

3500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

DINKEL, CINDY, M, ,

Mailing Address 4800 N DEER RUN DR

City  
NORFOLKState  
NEZip Code  
68701-9224FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 26 2025

Transaction ID : A8B52FEBFC141435F926

Amount of Each Receipt this Period

3500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

DINKEL, CINDY, M, ,

Mailing Address 4800 N DEER RUN DR

City  
NORFOLKState  
NEZip Code  
68701-9224FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 26 2025

Transaction ID : A27FE9C69E9464600954

Amount of Each Receipt this Period

3500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

10500.00

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DOVER, ROBERT, , ,

**A.**

Mailing Address 1000 W NORFOLK AVE

City  
NORFOLK

State  
NE

Zip Code  
68701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DOVER COMPANIES

Occupation  
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 19 2025

Transaction ID : A00D5F15220CE435BA45

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DOVER, ROBERT, , ,

**B.**

Mailing Address 1000 W NORFOLK AVE

City  
NORFOLK

State  
NE

Zip Code  
68701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DOVER COMPANIES

Occupation  
PRESIDENT

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 29 2025

Transaction ID : A1D628E292CB845F39E0

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

EMERSON, WILLIAM, , ,

**C.**

Mailing Address 4384 CHARING CROSS

City  
BLOOMFIELD HILLS

State  
MI

Zip Code  
48304

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ROCKET LLC

Occupation  
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 03 2025

Transaction ID : A503F80DEDB2447ACA81

Amount of Each Receipt this Period

3500.00

☐ Memo Item

10500.00

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

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

FAISON, JAY, W, ,

**A.**

Mailing Address 1355 GREENWOOD CLFS STE 301

City

CHARLOTTE

State

NC

Zip Code

28204-2981

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	4		2	0	5	

Transaction ID : A51A4A597ACB94A70813

Amount of Each Receipt this Period

3500.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

FAISON, JAY, W, ,

Mailing Address 1355 GREENWOOD CLFS STE 301

City

CHARLOTTE

State

NC

Zip Code

28204-2981

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	4		2	0	5	

Transaction ID : AF5F07A1D84DB4BE4AA1

Amount of Each Receipt this Period

3500.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

FOOTE, BRAD, , ,

Mailing Address 123 YUCCA DR

City

IMPERIAL

State

NE

Zip Code

69033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

IMPERIAL BEEF

Occupation

AGRICULTURE

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A6CD3C27953F341F0924

Amount of Each Receipt this Period

2500.00



Memo Item

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

9500.00

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

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

FREEMAN, PETER, , ,

**A.**

Mailing Address 1307 NEW YORK AVE NW

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FS VECTOR

Occupation

PARTNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 23 2025

Transaction ID : A7E65A66C7641418EBBB

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FREVERT, BRETT, , ,

**B.**

Mailing Address 1605 CRAWFORD ROAD

City

OMAHA

State

NE

Zip Code

68144

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CFO SYSTEMS

Occupation

CEO/ CFO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 14 2025

Transaction ID : A8BD13AC7CAA5460AAAF

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FRITZ, LANCE, , ,

**C.**

Mailing Address 433 ECHO SPUR

City

PARK CITY

State

UT

Zip Code

84060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 06 2025

Transaction ID : A944DAD8D14C94BE9BF6

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

3750.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

GALL, ROBERT, , ,

**A.**

Mailing Address 1924 S 25TH ST

City  
NORFOLKState  
NEZip Code  
68701FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AGRI-CITYOccupation  
OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
11		10		2025

Transaction ID : ABE66D6BABDE14A54A6B

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GEIST, ROD, , ,

**B.**

Mailing Address 15620 GRANT CIRCLE

City  
OMAHAState  
NEZip Code  
68116FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ADF ENGINEERING, INC.PROJECTOccupation  
PROJECT MANAGER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
11		24		2025

Transaction ID : A84C294CAC1E94EB8A34

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GILLICK, LYDIA, , ,

**C.**

Mailing Address 9220 TUSCAN CT

City  
LINCOLNState  
NEZip Code  
68520-1455FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKEROccupation  
HOMEMAKER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		09		2025

Transaction ID : AA4168B9414EE4C18AF2

Amount of Each Receipt this Period

3500.00

☐ Memo Item

7500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

GOETTE, JASON, , ,

**A.**

Mailing Address 13 9TH AVE SE

City

WATERTOWN

State

SD

Zip Code

57201-4841

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SODAK REALTY LLCOccupation  
BROKER/OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	2	5

Transaction ID : ABFD0304D30084CE1AA1

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GRINNEY, MATTHEW, , ,

**B.**

Mailing Address 3305 CLEVELAND AVE. NW

City

WASHINGTON

State

DC

Zip Code

20008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BROWNSTEIN HYATT FARBER SCHRECK, LIOccupation  
POLICY DIRECTOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A0F8DDE444873476E8A1

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HARPER, MARY, , ,

**C.**

Mailing Address 11802 N 178TH CIR

City

BENNINGTON

State

NE

Zip Code

68007-5714

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	4		2	0	2	5

Transaction ID : ADAB33222D153425EBEA

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

1250.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HAWKS, RHONDA, , ,

**A.**

Mailing Address 1446 N 142ND CIR

City

OMAHA

State

NE

Zip Code

68154-3876

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE HAWKS FOUNDATION

Occupation

TRUSTEE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	8		2	0	2	5

Transaction ID : A214D300C5D874C11BA7

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HELLBUSCH, JAMES, , ,

**B.**

Mailing Address 2106 MAPLE RD

City

COLUMBUS

State

NE

Zip Code

68601-8181

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DUO LIFT MANUFACTURING COMPANY, INC

Occupation

PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	2	5

Transaction ID : A0A41B8BEA65D4CC0AE7

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HESSER, MARK, , ,

**C.**

Mailing Address 2111 THE KNLS

City

LINCOLN

State

NE

Zip Code

68512-1928

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PINNACLE BANCORP, INC.

Occupation

CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	2	5

Transaction ID : AEAE66B0C95BA4664B2C

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

3500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HILGERS, MIKE, , ,

**A.**

Mailing Address 3770 W VINE ST

City

LINCOLN

State

NE

Zip Code

68528

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NEBRASKA

Occupation

ATTORNEY GENERAL

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		31		2025

Transaction ID : A9FB80B1871664B5E887

Amount of Each Receipt this Period

3500.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

HILGERS, MIKE, , ,

Mailing Address 3770 W VINE ST

City

LINCOLN

State

NE

Zip Code

68528

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NEBRASKA

Occupation

ATTORNEY GENERAL

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		31		2025

Transaction ID : A162E257AA8244BC58CC

Amount of Each Receipt this Period

3500.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

HOEGEMEYER, ERIK, , ,

Mailing Address 4827 N 183RD ST

City

OMAHA

State

NE

Zip Code

68022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COMMODITY SOLUTIONS, INC.

Occupation

BROKER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		15		2025

Transaction ID : A3C356E8AB3414F7BB54

Amount of Each Receipt this Period

3500.00



Memo Item

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

10500.00

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

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

Use separate schedule(s)  
for each category of the  
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HOPPE, JAKE, , ,

**A.**

Mailing Address 840 FAIRACRES RD

City

OMAHA

State

NE

Zip Code

68132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOPPE DEVELOPMENT

Occupation

CEO

Receipt For: 2026

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 10 2025

10

2025

Transaction ID : A3A6D71ACBE834E0BB0A

Amount of Each Receipt this Period

2500.00

☐

Memo Item

Full Name (Last, First, Middle Initial)

HUNT, HUGH, W, ,

**B.**

Mailing Address 333 S 18TH ST

City

BLAIR

State

NE

Zip Code

68008-1956

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 24 2025

24

2025

Transaction ID : A74ADEA71757E4C1381B

Amount of Each Receipt this Period

3500.00

☐

Memo Item

Full Name (Last, First, Middle Initial)

HUNT, HUGH, W, ,

**C.**

Mailing Address 333 S 18TH ST

City

BLAIR

State

NE

Zip Code

68008-1956

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☐

Primary

☒

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 24 2025

24

2025

Transaction ID : AE8A4E85CCBF94F65A38

Amount of Each Receipt this Period

3500.00

☐

Memo Item

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

9500.00

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

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

KAMLER, ERIC, , ,

**A.**

Mailing Address 1344 F ST

City  
GENEVAState  
NEZip Code  
68361-2603FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEBRASKA PUBLIC SERVICE COMMISSIONOccupation  
COMMISSIONER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 27 2025

Transaction ID : A121B996764774641BF4

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KIRCHHOFF, JUSTIN, , ,

**B.**

Mailing Address 17869 US HIGHWAY 69

City  
GILBERTState  
IAZip Code  
50105FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SUMMIT AGRICULTURAL GROUPOccupation  
CEO

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 30 2025

Transaction ID : A18B583915D834E5B8A3

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KIRCHHOFF, JUSTIN, , ,

**C.**

Mailing Address 17869 US HIGHWAY 69

City  
GILBERTState  
IAZip Code  
50105FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SUMMIT AGRICULTURAL GROUPOccupation  
CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 30 2025

Transaction ID : ACC7A3E6DA3B14D968EF

Amount of Each Receipt this Period

3500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

7250.00

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

KIRKWOOD, DAVID, , ,

**A.**

Mailing Address 3919 SO 175TH AVENUE

City

OMAHA

State

NE

Zip Code

68130

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TENASKA

Occupation

EXECUTIVE

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : ACE9A857972784AAAB4C

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

KORALESKI, JACK, , ,

**B.**

Mailing Address 9983 HASCALL ST

City

OMAHA

State

NE

Zip Code

68124-2652

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : A87B39C9BC7684938B8C

Amount of Each Receipt this Period

3500.00



Memo Item

Full Name (Last, First, Middle Initial)

KORALESKI, STEPHANIE, , ,

**C.**

Mailing Address 9983 HASCALL ST

City

OMAHA

State

NE

Zip Code

68124

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : AC225016431E54C1A90D

Amount of Each Receipt this Period

3500.00



Memo Item

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

8000.00

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

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

LANOHA, JASON, , ,

**A.**

Mailing Address 8402 LOVELAND DRIVE

City

OMAHA

State

NE

Zip Code

68124

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LANOHA

Occupation

CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

14000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 31 2025

Transaction ID : A112AE6477EDF4E2CA23

Amount of Each Receipt this Period

14000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LAWLESS, JONATHAN, , ,

**B.**

Mailing Address 4943 BUTTERWORTH PL NW

City

WASHINGTON

State

DC

Zip Code

20016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BILT REWARDS

Occupation

EXECUTIVE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 04 2025

Transaction ID : A1A8BB4CF9D7B4E5D838

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LEE, PENNY, , ,

**C.**

Mailing Address 3325 N ST NW

City

WASHINGTON

State

DC

Zip Code

20007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FINANCIAL TECHNOLOGY ASSOCIATION

Occupation

CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 16 2025

Transaction ID : A4AC631582016438FB95

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

15500.00

# **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)

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

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

LOMBARDO, SPENCER, , ,

**A.**

Mailing Address 5801 N 295TH CIR

City

VALLEY

State

NE

Zip Code

68064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PURE PROPERTY MANAGEMENT, LLC

Occupation

REAL ESTATE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 04 2025

Transaction ID : AFEDF1C93789847DE901

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LUCKASEN, COLLEEN, , ,

**B.**

Mailing Address PO BOX 540910

City

OMAHA

State

NE

Zip Code

68154-8910

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MID-WEST

Occupation

DERMATOLOGY/NURSE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 09 2025

Transaction ID : AA0E1B82FFA56450880F

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LUCKASEN, JOHN, R., ,

**C.**

Mailing Address 1724 S 105TH ST

City

OMAHA

State

NE

Zip Code

68124-1015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MIDWEST DERMATOLOGY

Occupation

DERMATOLOGIST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 09 2025

Transaction ID : A2FFF05B524B043218B9

Amount of Each Receipt this Period

3500.00

☐ Memo Item

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

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

9000.00

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

LUMADUE, JUSTIN, , ,

**A.**

Mailing Address 508 12TH ST NE

City

WASHINGTON

State

DC

Zip Code

20002-6310

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BOCKORNY GROUPOccupation  
PARTNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A871A54E1B2564B638F7

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MAMMEL, CARL, , ,

**B.**Mailing Address 12910 PIERCE ST  
STE 320

City

OMAHA

State

NE

Zip Code

68144-1106

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A0068115B3D6340018B7

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MAMULA, SARAH, , ,

**C.**Mailing Address 915 L ST NW  
614

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FINANCIAL TECHNOLOGY ASSOCIATIONOccupation  
HEAD OF GOVERNMENT AFFAIRS

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	7		2	0	2	5

Transaction ID : A39ABDD84077D4382904

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

1000.00



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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MAMULA, SARAH, , ,

**A.**

Mailing Address 915 L ST NW

614

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FINANCIAL TECHNOLOGY ASSOCIATION

Occupation

HEAD OF GOVERNMENT AFFAIRS

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		16		2025

Transaction ID : A7DE16583161C4901988

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MARQUIS, JASON, , ,

**B.**

Mailing Address 16298 1400 N AVE

City

PRINCETON

State

IL

Zip Code

61356-6827

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		22		2025

Transaction ID : AFEF1C8F2CB1E4567B50

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MASER, MATTHEW, , ,

**C.**

Mailing Address 1504 STAGECOACH ROAD

City

GRAND ISLAND

State

NE

Zip Code

68801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KOLEY JESSEN

Occupation

ATTORNEY

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		02		2025

Transaction ID : A8D11CEC6B9BC485C9D2

Amount of Each Receipt this Period

3500.00

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

5000.00

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

# **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)

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

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MASER, MATTHEW, , ,

**A.**

Mailing Address 1504 STAGECOACH ROAD

City

GRAND ISLAND

State

NE

Zip Code

68801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KOLEY JESSEN

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 02 2025

Transaction ID : AAA58BC32DFBE4022910

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MCBRIDE, LISA, , ,

**B.**

Mailing Address 1950 NEEDMORE RD

City

WHITESBURG

State

TN

Zip Code

37891-9211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UNITED COUNTRY CLINCH MOUNTAIN REAL

Occupation

REALTOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 01 2025

Transaction ID : A7AE9ED0AAC774DA3A4F

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATION, THE CHICKASAW

**C.**

Mailing Address 2020 LONNIE ABBOTT BLVD

City

ADA

State

OK

Zip Code

74820-9255

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 19 2025

Transaction ID : A5231950AF73E4AD5899

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

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

6000.00

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

NEUNER, PAUL, , ,

**A.**

Mailing Address 11600 DUNSTAN WAY

414

City

LOS ANGELES

State

CA

Zip Code

90049

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TELCOIN

Occupation

CEO

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

12000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 26 / 2025D D / Y Y Y Y Y  
26 / 2025Y Y Y Y Y  
2025

Transaction ID : A3E7AD16430034EF6A65

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

OSWALD, JOEL, , ,

**B.**

Mailing Address 1908 PETERSEN DR

City

PAPILLION

State

NE

Zip Code

68046-8060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WILLIAMS &amp; JENSEN, PLLC

Occupation

GOVERNMENT AFFAIRS

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 28 / 2025D D / Y Y Y Y Y  
28 / 2025Y Y Y Y Y  
2025

Transaction ID : A25251BECC2EB406CB1B

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

OWEN, TYLER, , ,

**C.**

Mailing Address 200 N 55TH ST

City

OMAHA

State

NE

Zip Code

68132-2817

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OWEN INDUSTRIES

Occupation

CHAIRMAN

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 03 / 2025D D / Y Y Y Y Y  
03 / 2025Y Y Y Y Y  
2025

Transaction ID : AE7264C88BB244FE59BA

Amount of Each Receipt this Period

500.00

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

6000.00

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

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

RASTETTER, BRUCE, , ,

**A.** Mailing Address PO BOX 2523City  
AMESState  
IAZip Code  
50010FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SUMMIT AGRICULTURAL GROUPOccupation  
CHAIRMAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 29 2025

Transaction ID : A7B7620E18E34489BB83

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RASTETTER, BRUCE, , ,

**B.** Mailing Address 10640 COUNTY HIGHWAY D20City  
ALDENState  
IAZip Code  
50006FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SUMMIT AGRICULTURAL GROUPOccupation  
EXECUTIVE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 29 2025

Transaction ID : A5F93AE2DF66F4A97822

Amount of Each Receipt this Period

7000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RASTETTER, BRUCE, , ,

**C.** Mailing Address PO BOX 2523City  
AMESState  
IAZip Code  
50010FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SUMMIT AGRICULTURAL GROUPOccupation  
CHAIRMAN

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 29 2025

Transaction ID : A8D8852324A694E798CA

Amount of Each Receipt this Period

3500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

14000.00

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

PAGE 29 OF 95

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

RYAN, NICK, , ,

**A.**

Mailing Address 80 HIDDEN MEADOW DR.

City

WAUKEE

State

IA

Zip Code

50263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CONCORDIA GROUPOccupation  
CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		16		2025

Transaction ID : AE73C29407D4D45B79F2

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SEATON, SCOTT, , ,

**B.**

Mailing Address 14349 HAMILTON ST

City

OMAHA

State

NE

Zip Code

68154

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
11		14		2025

Transaction ID : A1AD3DCCAE2034189BC7

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SHILLER, SCOTT, , ,

**C.**

Mailing Address 1068 SUGAR MAPLE DR

City

DAVIDSONVILLE

State

MD

Zip Code

21035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TOPSOE A/SOccupation  
GOVERNMENT RELATIONS

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		31		2025

Transaction ID : A08C36D79038E43AC921

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

3000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SOHM, CHUCK, , ,

**A.**

Mailing Address 13505 SOUTH 22ND STREET

City  
BELLEVUEState  
NEZip Code  
68123FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 04 2025

Transaction ID : A6AA0EEFD4E1542E5A7E

Amount of Each Receipt this Period

25.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

SOHM, CHUCK, , ,

Mailing Address 13505 SOUTH 22ND STREET

City  
BELLEVUEState  
NEZip Code  
68123FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 04 2025

Transaction ID : A4544BA645F5041FBA51

Amount of Each Receipt this Period

25.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

SOHM, CHUCK, , ,

Mailing Address 13505 SOUTH 22ND STREET

City  
BELLEVUEState  
NEZip Code  
68123FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 04 2025

Transaction ID : AF03BD08CE1E649EB857

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

75.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

STYCH, JASON, D, ,

**A.**

Mailing Address 17663 N 97TH PL

City

SCOTTSDALE

State

AZ

Zip Code

85255-2551

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
A&C VENTURES LLC

Occupation  
GENERAL COUNSEL

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 02 2025

Transaction ID : AEB0DA26BD41A4F208A2

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STYCH, SHANNON, , ,

**B.**

Mailing Address 17663 N 97TH PL

City

SCOTTSDALE

State

AZ

Zip Code

85255-2551

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
HOMEMAKER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 02 2025

Transaction ID : A49DEFF798B8B4DC8875

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TIMM, JAMES, R, ,

**C.**

Mailing Address 21105 MARINDA ST

City

ELKHORN

State

NE

Zip Code

68022-2744

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KBBX FM

Occupation  
BROADCASTER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 15 2025

Transaction ID : AC18911D024784AA080B

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

7250.00

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

TRYON, WARREN, , ,

**A.**

Mailing Address 225 12TH ST NE

City

WASHINGTON

State

DC

Zip Code

20002-6315

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PARTNER

Occupation  
PARTNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 18 2025

Transaction ID : A454CA16A28394EAA956

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

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 Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

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 Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

500.00

181575.00



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

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AFLAC POLITICAL ACTION COMMITTEE**

Mailing Address 1932 WYNNTON RD

City  
COLUMBUS

State  
GA

Zip Code  
31999-0001

FEC ID number of contributing  
federal political committee.

**C** C00034157

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 04 2025

Transaction ID : AE75BA10E2AB74677BE5

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AGC PAC - ASSOCIATED GENERAL CONTRACTORS OF AMERICA**

Mailing Address 2300 WILSON BLVD

City  
ARLINGTON

State  
VA

Zip Code  
22201-5424

FEC ID number of contributing  
federal political committee.

**C** C00082917

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 31 2025

Transaction ID : A9193943AA77B4C88BE2

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ALABAMA FIRST PAC**

Mailing Address PO BOX 3723

City  
MONTGOMERY

State  
AL

Zip Code  
36109-0723

FEC ID number of contributing  
federal political committee.

**C** C00821058

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 31 2025

Transaction ID : A828D203FE79B42F6A12

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

8500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ALABAMA FIRST PAC

**A.**

Mailing Address PO BOX 3723

City  
MONTGOMERYState  
ALZip Code  
36109-0723FEC ID number of contributing  
federal political committee.**C** C00821058

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		31		2025

Transaction ID : A74F86C5751534FB99A9

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ALLIANZ OF AMERICA PAC

**B.**Mailing Address 1101 CONNECTICUT AVE NW  
STE 950City  
WASHINGTONState  
DCZip Code  
20036-4377FEC ID number of contributing  
federal political committee.**C** C00095109

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		22		2025

Transaction ID : A2D79E079EFFE4348BEC

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ALLY FINANCIAL INC ADVOCACY PAC

**C.**

Mailing Address 801 PENNSYLVANIA AVE., N.W. SUITE

City  
WASHINGTONState  
DCZip Code  
20004FEC ID number of contributing  
federal political committee.**C** C00579540

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		31		2025

Transaction ID : A34A0EA444A3247C187B

Amount of Each Receipt this Period

2000.00

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

8000.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ALLY FINANCIAL INC ADVOCACY PAC

**A.** Mailing Address 801 PENNSYLVANIA AVE., N.W. SUITE

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.**C** C00579540

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 31 2025

Transaction ID : A972303FB6B6A4CD5B4C

Amount of Each Receipt this Period

3000.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)

AMERICAN AIRLINES PAC

Mailing Address 1200 17TH ST NW  
STE 400

City

WASHINGTON

State

DC

Zip Code

20036-3012

FEC ID number of contributing  
federal political committee.**C** C00107300

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 31 2025

Transaction ID : A437F7924D4DC45F58BD

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)

AMERICAN EXPRESS COMPANY POLITICAL ACTION COMMITTEE (AXPPAC)

Mailing Address 801 PENNSYLVANIA AVE NW, STE 650

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.**C** C00040535

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 25 2025

Transaction ID : A6C8C08EBE19946219A0

Amount of Each Receipt this Period

1000.00

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

5000.00

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

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

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN HEALTH CARE ASSOCIATION (AHCA-PAC)**

**A.**

Mailing Address 1201 L STREET N.W.

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00006080

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 09 2025

Transaction ID : A711F52AAB27E4A82925

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN HOSPITAL ASSOCIATION PAC**

**B.**

Mailing Address 800 10TH ST NW

City

WASHINGTON

State

DC

Zip Code

20001-5188

FEC ID number of contributing  
federal political committee.

**C** C00106146

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 22 2025

Transaction ID : AB3CC3E4703AD44C9A7E

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE**

**C.**

Mailing Address 1505 PRINCE ST  
STE 300

City

ALEXANDRIA

State

VA

Zip Code

22314-2874

FEC ID number of contributing  
federal political committee.

**C** C00024968

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 24 2025

Transaction ID : A199715F2A2B24B5D87C

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

8500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN PROPERTY CASUALTY INSURANCE ASSOCIATION POLITICAL ACTION COMMITTEE

**A.**Mailing Address 8700 W BRYN MAWR AVE  
STE 1200SCity  
CHICAGOState  
ILZip Code  
60631-3512FEC ID number of contributing  
federal political committee.**C** C00066472

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
11		24		2025

Transaction ID : A1B4528C2B1314240944

Amount of Each Receipt this Period

2500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

AMERICA'S MOUNTAIN PAC C/O RED CURVE SOLUTIONS

Mailing Address 138 CONANT ST  
STE 401City  
BEVERLYState  
MAZip Code  
01915-1678FEC ID number of contributing  
federal political committee.**C** C00883413

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		31		2025

Transaction ID : A50FADBDB2D194F359A8

Amount of Each Receipt this Period

3500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

ARENTFOX SCHIFF CIVIC PARTICIPATION FUND

Mailing Address 1717 K ST NW

City  
WASHINGTONState  
DCZip Code  
20006-5343FEC ID number of contributing  
federal political committee.**C** C00241380

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		15		2025

Transaction ID : AE97CC46F368247B2B5A

Amount of Each Receipt this Period

1000.00

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

7000.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
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			15

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ASSOCIATION OF EQUIPMENT PAC

Mailing Address 1300 I ST NW  
STE 520City  
WASHINGTONState  
DCZip Code  
20005-3314FEC ID number of contributing  
federal political committee.

C C00442996

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		31		2025

Transaction ID : AEB0591466FA74AD89C6

Amount of Each Receipt this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ATLAS AIR WORLDWIDE HOLDINGS, INC PAC

Mailing Address 1 N LEXINGTON AVE

City  
WHITE PLAINSState  
NYZip Code  
10601-1706FEC ID number of contributing  
federal political committee.

C C00478099

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		31		2025

Transaction ID : A0C5DB12E827F435E84F

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BECTON, DICKINSON AND COMPANY PAC

Mailing Address 1 BECTON DR  
# MC085City  
FRANKLIN LAKESState  
NJZip Code  
07417-1815FEC ID number of contributing  
federal political committee.

C C00376582

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
10		03		2025

Transaction ID : A524AA9300D584AF992F

Amount of Each Receipt this Period

1000.00

☐ Memo Item

6000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BMO FINANCIAL CORP GOOD GOVERNANCE FUND****A.**

Mailing Address 320 S CANAL ST

City  
CHICAGOState  
ILZip Code  
60606-5707FEC ID number of contributing  
federal political committee.**C** C00611871

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y
12		15		2025

Transaction ID : AE3BB703EC2F04F62909

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**BUNGE NORTH AMERICA INC****B.**Mailing Address 25 MASSACHUSETTS AVE NW  
STE 340City  
WASHINGTONState  
DCZip Code  
20001-7404FEC ID number of contributing  
federal political committee.**C** C00401687

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y
12		31		2025

Transaction ID : A3D709A2641D8417FADB

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**CAPITAL ONE FINANCIAL CORPORATION ASSOCIATES POLITICAL FUND****C.**

Mailing Address 1680 CAPITAL ONE DR

City  
MCLEANState  
VAZip Code  
22102-3407FEC ID number of contributing  
federal political committee.**C** C00326595

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y
11		17		2025

Transaction ID : A19D537FB15B94896A87

Amount of Each Receipt this Period

1000.00

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

3000.00

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

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

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CHAMBER OF DIGITAL COMMERCE

A.

Mailing Address 1667 K ST NW

City

WASHINGTON

State

DC

Zip Code

20006-1650

FEC ID number of contributing  
federal political committee.

C C00567412

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 07 / 2025

Transaction ID : A987B76312CFA40ACBD4

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CHIROPRACTORS OF NEBRASKA STATE PAC

B.

Mailing Address 13215 BIRCH DR

City

OMAHA

State

NE

Zip Code

68164-5431

FEC ID number of contributing  
federal political committee.

C C00043471

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 15 / 2025

Transaction ID : A7DB724479A234F29A11

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CNA CITIZENS FOR GOOD GOVERNMENT

C.

Mailing Address 151 N FRANKLIN ST

City

CHICAGO

State

IL

Zip Code

60606-1821

FEC ID number of contributing  
federal political committee.

C C00078287

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 15 / 2025

Transaction ID : A8036F3E555E145BF9B5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

4500.00

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



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**COUNCIL OF INSURANCE AGENTS & BROKERS PAC****A.**Mailing Address 701 PENNSYLVANIA AVE NW  
STE 750City  
WASHINGTONState  
DCZip Code  
20004-2661FEC ID number of contributing  
federal political committee.**C** C00039578

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		15		2025

Transaction ID : A9AAB1104A01A4DB9A76

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**DARLING INGREDIENTS PAC****B.**

Mailing Address 5601 N MACARTHUR BLVD

City  
IRVINGState  
TXZip Code  
75038-2616FEC ID number of contributing  
federal political committee.**C** C00777458

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		31		2025

Transaction ID : A009506A8EA35480D80D

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**ERNST & YOUNG POLITICAL ACTION COMMITTEE****C.**

Mailing Address 1101 NEW YORK AVE NW

City  
WASHINGTONState  
DCZip Code  
20005-4269FEC ID number of contributing  
federal political committee.**C** C00227744

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2025

Transaction ID : AD4CB5673D92846C1B16

Amount of Each Receipt this Period

2500.00

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

6000.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**FEDERAL HOME LOAN BANK OF TOPEKA****A.** Mailing Address PO BOX 176City  
TOPEKAState  
KSZip Code  
66601FEC ID number of contributing  
federal political committee.**C** C00410720

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		15		2025

Transaction ID : A2EDC655C97EF409D9A8

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**FIDELITY NATIONAL FINANCIAL PAC 2001****B.** Mailing Address 601 RIVERSIDE AVE  
BLDG 6City  
JACKSONVILLEState  
FLZip Code  
32204-2901FEC ID number of contributing  
federal political committee.**C** C00364455

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
11		04		2025

Transaction ID : A59E2F50A36274DA2A76

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**FIELD OF DREAMS PAC****C.** Mailing Address PO BOX 153City  
LITCHFIELDState  
MNZip Code  
55355-0153FEC ID number of contributing  
federal political committee.**C** C00818542

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		26		2025

Transaction ID : A0AF6672C77614F798F0

Amount of Each Receipt this Period

2500.00

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

10000.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

FINSECA PAC

**A.**

Mailing Address 600 13TH ST NW

STE 550

City

WASHINGTON

State

DC

Zip Code

20005-3029

FEC ID number of contributing  
federal political committee.**C**

C00447565

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	9		2	0	2	5

Transaction ID : A1FD835F851174F8B9E1

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

FRANKLIN TEMPLETON PAC

**B.**

Mailing Address 1133 CONNECTICUT AVE NW

STE 320

City

WASHINGTON

State

DC

Zip Code

20036-4388

FEC ID number of contributing  
federal political committee.**C**

C00874982

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	2	5

Transaction ID : A05A0ACD1AADC4F648A2

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

FUEL FOR THE FUTURE PAC

**C.**

Mailing Address PO BOX 30844

City

BETHESDA

State

MD

Zip Code

20824-0844

FEC ID number of contributing  
federal political committee.**C**

C00855296

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	7		2	0	2	5

Transaction ID : AEB4EC147BB744859901

Amount of Each Receipt this Period

5000.00



Memo Item

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

7000.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

GEICO PAC

**A.**

Mailing Address 1 GEICO PLZ

City

WASHINGTON

State

DC

Zip Code

20076-0003

FEC ID number of contributing  
federal political committee.**C** C00343749

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		15		2025

Transaction ID : A15E13F0520584968A89

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GEVO PAC

**B.**

Mailing Address 345 INVERNESS DR S

City

ENGLEWOOD

State

CO

Zip Code

80112-5882

FEC ID number of contributing  
federal political committee.**C** C00849307

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		24		2025

Transaction ID : A0B1CD23A2D6E44E1BFA

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GROWTH ENERGY PAC

**C.**

Mailing Address 1401 I STREET NW, SUITE 1220

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.**C** C00475665

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		31		2025

Transaction ID : A0CD95820C0CC44E28FE

Amount of Each Receipt this Period

2000.00

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

5000.00

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

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

Use separate schedule(s)  
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**HDR, INC. EMPLOYEE OWNERS PAC**

Mailing Address 1917 S 67TH ST

City  
OMAHA

State  
NE

Zip Code  
68106-2973

FEC ID number of contributing  
federal political committee.

**C** C00103903

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 31 2025

Transaction ID : A9F64BA1E977E4B239BB

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**HSBC NORTH AMERICA PAC**

Mailing Address 2700 SANDERS RD.

City  
PROSPECT HEIGHTS

State  
IL

Zip Code  
60070

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 31 2025

Transaction ID : AA9D7E6E64DD34A1EADA

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**HUNTINGTON BANCSHARES INC. POLITICAL ACTION COMMITTEE (HBI-PAC)**

Mailing Address 41 S HIGHT STREET

City  
COLUMBUS

State  
OH

Zip Code  
43215

FEC ID number of contributing  
federal political committee.

**C** C00165589

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 25 2025

Transaction ID : A9C495C45E8B04FA2AC0

Amount of Each Receipt this Period

1500.00

☐ Memo Item

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

3500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**INDEPENDENT COMMUNITY BANKERS OF AMERICA PAC****A.**

Mailing Address 1615 L ST NW

STE 900

City

WASHINGTON

State

DC

Zip Code

20036-5623

FEC ID number of contributing  
federal political committee.**C** C00032698

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		16		2025

**Transaction ID : A52A556A013474AC7ADC**

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

**INTERNATIONAL UNION OF OPERATING ENGINEERS ENGINEERS POLITICAL EDUCATION COMMITTEE****B.**

Mailing Address 1125 17TH ST NW

City

WASHINGTON

State

DC

Zip Code

20036-4709

FEC ID number of contributing  
federal political committee.**C** C00029504

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		31		2025

**Transaction ID : A2CBF1483F91942D689F**

Amount of Each Receipt this Period

5000.00



Memo Item

Full Name (Last, First, Middle Initial)

**INVESCO HOLDING COMPANY (US), INC. EMPLOYEE POLITICAL ACTION COMMITTEE****C.**

Mailing Address 1555 PEACHTREE ST, NE STE 1800

City

ATLANTA

State

GA

Zip Code

30309

FEC ID number of contributing  
federal political committee.**C** C00253369

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
10		03		2025

**Transaction ID : A53644EE6D3EB4F83AE3**

Amount of Each Receipt this Period

1000.00



Memo Item

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

7000.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

KEYCORP ADVOCATES FUND

**A.**

Mailing Address 127 PUBLIC SQ

City  
CLEVELANDState  
OHZip Code  
44114-1308FEC ID number of contributing  
federal political committee.**C** C00399063

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		15		2025

Transaction ID : A447DDD22A3604E209E4

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KPMG PAC

**B.**Mailing Address 1801 K ST NW  
STE 12000City  
WASHINGTONState  
DCZip Code  
20006-1301FEC ID number of contributing  
federal political committee.**C** C00280222

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		22		2025

Transaction ID : A674641A167F448639CF

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LIBERTY MUTUAL INSURANCE CO. PAC

**C.**

Mailing Address 175 BERKELEY ST

City  
BOSTONState  
MAZip Code  
02116-5066FEC ID number of contributing  
federal political committee.**C** C00171843

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		22		2025

Transaction ID : AA73EDB4667A1461FA30

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

3000.00

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

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

**A.**

Mailing Address 2121 CRYSTAL DRIVE SUITE 100

City  
ARLINGTON

State  
VA

Zip Code  
22202

FEC ID number of contributing  
federal political committee.

**C** C00303024

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 15 2025

Transaction ID : AEC80E8DD5F5C446184B

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MARSH & MCLENNAN COMPANIES, INC. POLITICAL ACTION COMMITTEE (MMCPAC)

**B.**

Mailing Address 1166 AVENUE OF THE AMERICAS

City  
NEW YORK

State  
NY

Zip Code  
10036-2708

FEC ID number of contributing  
federal political committee.

**C** C00457234

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 09 2025

Transaction ID : AFCAACB5B73DD48E9A27

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MORPAC

**C.**

Mailing Address 1919 M ST NW

City  
WASHINGTON

State  
DC

Zip Code  
20036-3521

FEC ID number of contributing  
federal political committee.

**C** C00004812

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 12 2025

Transaction ID : A3EB5F13D830D4B2DB98

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

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

6000.00



# **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)

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMMITTEE

**A.**

Mailing Address 1000 WILSON BLVD.

City

ARLINGTON

State

VA

Zip Code

22209

FEC ID number of contributing  
federal political committee.

**C** C00005249

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 11 2025

Transaction ID : A48838A8CDA944B5DBF9

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF REAL ESTATE INVESTMENT TRUST, INC PAC

**B.**

Mailing Address 1875 I ST NW  
STE 600

City

WASHINGTON

State

DC

Zip Code

20006-5413

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 31 2025

Transaction ID : AC9AF09C872D04982ACA

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL CORN GROWERS ASSOCIATION PAC (CORNPAC)

**C.**

Mailing Address 20 F ST NW  
STE 900

City

WASHINGTON

State

DC

Zip Code

20001-6707

FEC ID number of contributing  
federal political committee.

**C** C00376343

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 03 2025

Transaction ID : A4D918755A15F4557A57

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

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

7000.00

# **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)

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

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL CORN GROWERS ASSOCIATION PAC (CORNPAC)**

**A.**

Mailing Address 20 F ST NW  
STE 900

City  
WASHINGTON

State  
DC

Zip Code  
20001-6707

FEC ID number of contributing  
federal political committee.

**C** C00376343

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 22 2025

**Transaction ID : AF6779C1B0C684E8F9CC**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NATIONWIDE MUTUAL INSURANCE COMPANY FINANCIAL & INVESTMENTS PAC**

**B.**

Mailing Address 1 NATIONWIDE PLZ

City  
COLUMBUS

State  
OH

Zip Code  
43215-2226

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 04 2025

**Transaction ID : A811C425F85414950980**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NMI HOLDINGS INC**

**C.**

Mailing Address 2100 POWELL ST  
FL 12

City  
EMERYVILLE

State  
CA

Zip Code  
94608-1826

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 31 2025

**Transaction ID : AD70FF1E301744AC297F**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

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

6000.00

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

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NOMURA HOLDING AMERICA INC**Mailing Address 801 PENNSYLVANIA AVE NW  
STE 625City  
WASHINGTONState  
DCZip Code  
20004-2615FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 31 2025

Transaction ID : A4CB5C5562B754F8A952

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**OLSSON INC PAC**

Mailing Address 601 P ST STE 200

City  
LINCOLNState  
NEZip Code  
68508FEC ID number of contributing  
federal political committee.

C C00833707

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 17 2025

Transaction ID : AA19167068724466FAD5

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**OLSSON INC PAC**

Mailing Address 601 P ST STE 200

City  
LINCOLNState  
NEZip Code  
68508FEC ID number of contributing  
federal political committee.

C C00833707

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 17 2025

Transaction ID : ACD1FC57D58F64AA4911

Amount of Each Receipt this Period

1500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

7500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**Full Name (Last, First, Middle Initial)  
PINNACLE BANCORP INC PAC**A.** Mailing Address 1401 N STCity  
LINCOLNState  
NEZip Code  
68508-1816FEC ID number of contributing  
federal political committee.**C** C00427427

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
11		17		2025

Transaction ID : A8E9CB7BF2CA54E3CAFF

Amount of Each Receipt this Period

2500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
PRUDENTIAL FINANCIAL, INC**B.** Mailing Address 751 BROAD STREETCity  
NEWARKState  
NJZip Code  
07102FEC ID number of contributing  
federal political committee.**C** C00127779

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		31		2025

Transaction ID : A7199FE59D86C45EAA30

Amount of Each Receipt this Period

2500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
RAPTOR PAC**C.** Mailing Address PO BOX 4864City  
MIDLANDState  
TXZip Code  
79704-4864FEC ID number of contributing  
federal political committee.**C** C00749481

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		22		2025

Transaction ID : ABBE563532DFC47DC807

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

6000.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**RENEWABLE FUELS NEBRASKA****A.**Mailing Address 601 PENNSYLVANIA AVE NW  
STE 200City  
WASHINGTONState  
DCZip Code  
20004-2601FEC ID number of contributing  
federal political committee.**C** C00518910

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	7		2	0	2	5

Transaction ID : A679321527E2543BAB80

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**REPUBLICAN MAIN STREET PARTNERSHIP PAC****B.**

Mailing Address 410 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1819FEC ID number of contributing  
federal political committee.**C** C00165159

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	7		2	0	2	5

Transaction ID : AA9481A0F94E84118864

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**RGA REINSURANCE COMPANY FEDERAL PAC****C.**

Mailing Address 16600 SWINGLEY RIDGE RD

City  
CHESTERFIELDState  
MOZip Code  
63017-1706FEC ID number of contributing  
federal political committee.**C** C00461129

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID : AC01EAD86669B49BDA52

Amount of Each Receipt this Period

1000.00

☐ Memo Item

4500.00

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
ROBINHOOD MARKETS INC PAC

Mailing Address 85 WILLOW RD

City  
MENLO PARK

State  
CA

Zip Code  
94025-3656

FEC ID number of contributing  
federal political committee.

C C00780304

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 08 2025

Transaction ID : AD40EFB00CEA345FAB45

Amount of Each Receipt this Period

2000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 08 2025

Transaction ID : A07BBAA95DB56484CA55

Amount of Each Receipt this Period

2000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)  
SCIENCE APPLICATIONS INTERNATIONAL CORPORATION VOLUNTARY PAC

Mailing Address 151 LAFAYETTE DR

City  
OAK RIDGE

State  
TN

Zip Code  
37830-6865

FEC ID number of contributing  
federal political committee.

C C00300418

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 04 2025

Transaction ID : A0A506A1A77734D7FA36

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

3000.00

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

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

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SECURITIES INDUSTRY AND FINANCIAL MARKETS ASSOCIATION POLITICAL ACTION COMMITTEE

**A.** Mailing Address 1099 NEW YORK AVE NW 6TH FLOOR

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00431312

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		15		2025

Transaction ID : A92C4FE897BFC4F028A4

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
SENIORS HOUSING PACMailing Address 5225 WISCONSIN AVE NW  
STE 500

City

WASHINGTON

State

DC

Zip Code

20015-2034

FEC ID number of contributing  
federal political committee.**C** C00325332

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		09		2025

Transaction ID : A8BE357C89CF8433CB73

Amount of Each Receipt this Period

1500.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
SENTRY INSURANCE A MUTUAL CO

Mailing Address 1800 N POINT DR

City

STEVENS POINT

State

WI

Zip Code

54481-1253

FEC ID number of contributing  
federal political committee.**C** C00545194

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
11		17		2025

Transaction ID : A33CA5CE87AA441589DF

Amount of Each Receipt this Period

2500.00

☐ Memo Item

5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

TD BANK, N.A.

**A.**

Mailing Address ONE VANDERBILT AVENUE, 14TH FLOOR

City  
NEW YORKState  
NYZip Code  
10017FEC ID number of contributing  
federal political committee.**C** C00501429

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 22 2025

Transaction ID : A56316A4485D5456F8B0

Amount of Each Receipt this Period

2000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

THE GOLDMAN SACHS GROUP, INC PAC

Mailing Address 101 CONSTITUTION AVE NW  
STE 1000ECity  
WASHINGTONState  
DCZip Code  
20001-2171FEC ID number of contributing  
federal political committee.**C** C00350744

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 04 2025

Transaction ID : AF4E159C752E94F96A92

Amount of Each Receipt this Period

2500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

THE GOLDMAN SACHS GROUP, INC PAC

Mailing Address 101 CONSTITUTION AVE NW  
STE 1000ECity  
WASHINGTONState  
DCZip Code  
20001-2171FEC ID number of contributing  
federal political committee.**C** C00350744

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 15 2025

Transaction ID : AAE67D8FBB1EF4613921

Amount of Each Receipt this Period

2500.00

☐ Memo Item

7000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**THE HARTFORD INSURANCE GROUP, INC****A.**

Mailing Address 1 HARTFORD PLZ

City  
HARTFORDState  
CTZip Code  
06115-1701FEC ID number of contributing  
federal political committee.**C** C00168864

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		15		2025

Transaction ID : ABC9A15902B3D49C280C

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**THE REAL ESTATE ROUNDTABLE****B.**Mailing Address 801 PENNSYLVANIA AVE NW  
STE 720City  
WASHINGTONState  
DCZip Code  
20004-2686FEC ID number of contributing  
federal political committee.**C** C00033779

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		15		2025

Transaction ID : AF54819ABDB524DDE808

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**THE REAL ESTATE ROUNDTABLE****C.**Mailing Address 801 PENNSYLVANIA AVE NW  
STE 720City  
WASHINGTONState  
DCZip Code  
20004-2686FEC ID number of contributing  
federal political committee.**C** C00033779

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		15		2025

Transaction ID : A0D6AD2744B3C4A83992

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

5000.00

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

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

PAGE 58 OF 95

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**THE SURETY AND FIDELITY ASSOCIATION OF AMERICA PAC****A.**Mailing Address 1140 19TH ST NW  
STE 500City  
WASHINGTONState  
DCZip Code  
20036-6617FEC ID number of contributing  
federal political committee.**C** C00691618

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	5	

Transaction ID : A6BE7A6EF74224DD5958

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**TIAA PAC****B.**Mailing Address 1300 I ST NW  
STE 300City  
WASHINGTONState  
DCZip Code  
20005-3314FEC ID number of contributing  
federal political committee.**C** C00431361

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	5	

Transaction ID : A8CE362ED64034DB6834

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**TITLE INDUSTRY POLITICAL ACTION COMMITTEE****C.**Mailing Address 601 PENNSYLVANIA AVE NW  
STE 750City  
WASHINGTONState  
DCZip Code  
20004-2601FEC ID number of contributing  
federal political committee.**C** C00012914

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	5	

Transaction ID : A3B6B29BBCB74462797C

Amount of Each Receipt this Period

2500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

6000.00

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

PAGE 59 OF 95

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

TRANSUNION POLITICAL ACTION COMMITTEE (TU PAC)

**A.**

Mailing Address 555 W ADAMS ST

City  
CHICAGOState  
ILZip Code  
60661-3601FEC ID number of contributing  
federal political committee.**C** C00313700

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
11		13		2025

Transaction ID : A8C9C3C2DDFF648D08A8

Amount of Each Receipt this Period

5000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

TRANSUNION POLITICAL ACTION COMMITTEE (TU PAC)

Mailing Address 555 W ADAMS ST

City  
CHICAGOState  
ILZip Code  
60661-3601FEC ID number of contributing  
federal political committee.**C** C00313700

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
11		13		2025

Transaction ID : AFEF6295A8A484A9AAA2

Amount of Each Receipt this Period

5000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

TRUIST FINANCIAL CORPORATION FEDERAL PAC

Mailing Address 1001 SEMMES AVE  
FL 5City  
RICHMONDState  
VAZip Code  
23224-2245FEC ID number of contributing  
federal political committee.**C** C00386524

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		09		2025

Transaction ID : A083CADD8E15B4E859F8

Amount of Each Receipt this Period

2500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

12500.00

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

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

PAGE 60 OF 95

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

UNITED AIRLINES, INC PAC

**A.**

Mailing Address 233 S WACKER DR

FL 15

City

CHICAGO

State

IL

Zip Code

60606-6408

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		31		2025

Transaction ID : AC757D487396742D0B77

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WELLS FARGO &amp; CO EMPLOYEE PAC

**B.**

Mailing Address 1700 K STREET NW -8TH FLOOR

City

WASHINGTON

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.

C C00034595

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		31		2025

Transaction ID : A197E0F64218F491281C

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WERNER ENTERPRISES PAC

**C.**

Mailing Address PO BOX 45308

City

OMAHA

State

NE

Zip Code

68145-0308

FEC ID number of contributing  
federal political committee.

C C00236034

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		12		2025

Transaction ID : ADB3030BC59844F558D0

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

6000.00

# **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 61 OF 95

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

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ZURICH HOLDING CO. OF AMERICA COMMITTEE FOR GOOD GOVERNMENT (Z-PAC)

**A.**

Mailing Address 1201 F ST NW  
STE 950

City  
WASHINGTON

State  
DC

Zip Code  
20004-1254

FEC ID number of contributing  
federal political committee.

C C00235036

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 04 2025

Transaction ID : A0F894F59F942417CA37

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

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 Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

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 Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

2500.00

176000.00

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. AMERICAN AIRLINES**

Mailing Address 1 SKYVIEW DR

City  
FORT WORTHState  
TXZip Code  
76155-1801Purpose of Disbursement  
TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

388.49

Transaction ID : B38E7E2ACE74D4733A18

☐ Memo Item**B. AMERICAN AIRLINES**

Mailing Address 1 SKYVIEW DR

City  
FORT WORTHState  
TXZip Code  
76155-1801Purpose of Disbursement  
TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		20		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

508.48

Transaction ID : B78B8EED93E444B6788C

☐ Memo Item**C. AMERICAN AIRLINES**

Mailing Address 1 SKYVIEW DR

City  
FORT WORTHState  
TXZip Code  
76155-1801Purpose of Disbursement  
TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		27		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

- 388.49

Transaction ID : BF1CE0967BBAB48E1B35

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

508.48

**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 63 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. AMERICAN AIRLINES**

Mailing Address 1 SKYVIEW DR

City  
FORT WORTHState  
TXZip Code  
76155-1801Purpose of Disbursement  
TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

483.48

Transaction ID : BD15179454DEA41299D9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 1 SKYVIEW DR

City  
FORT WORTHState  
TXZip Code  
76155-1801Purpose of Disbursement  
TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

453.48

Transaction ID : B33ADC2750EB24466B16

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN AIRLINES**

Mailing Address 1 SKYVIEW DR

City  
FORT WORTHState  
TXZip Code  
76155-1801Purpose of Disbursement  
TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

94.70

Transaction ID : B99920A9A51884FE582C

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

1031.66

**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 64 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. AMERICAN AIRLINES**

Mailing Address 1 SKYVIEW DR

Date of Disbursement

M M	D D	Y Y Y Y
11	24	2025

City  
FORT WORTHState  
TXZip Code  
76155-1801

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL FLIGHT EXPENSE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

64.70

Transaction ID : BA263A7C27FC74410B93

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address 5555 HILTON AVE

Date of Disbursement

M M	D D	Y Y Y Y
12	31	2025

City  
BATON ROUGEState  
LAZip Code  
70808-2572

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

4631.30

Transaction ID : BA03632CE02A3401AB03

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. ANNAPOLIS PILLOW COMPANY**

Mailing Address

Date of Disbursement

M M	D D	Y Y Y Y
12	02	2025

City  
ANNAPOLISState  
MDZip Code  
21401

FEC Identification Number

C

Purpose of Disbursement  
GIFTS

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

7515.00

Transaction ID : BD2E00C07A2D34E7EA09

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

12211.00

**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 65 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ANNAPOLIS PILLOW COMPANY**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2025

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
GIFTS

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

1280.00

Transaction ID : BE6034BC655B94B8C94F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ARISTOTLE INTERNATIONAL, INC.**

Mailing Address 205 PENNSYLVANIA AVE SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		29		2025

City  
WASHINGTONState  
DCZip Code  
20003-1164Purpose of Disbursement  
DATABASE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

2400.00

Transaction ID : B6113CFBFD8EE4D5398B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ARISTOTLE INTERNATIONAL, INC.**

Mailing Address 205 PENNSYLVANIA AVE SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2025

City  
WASHINGTONState  
DCZip Code  
20003-1164Purpose of Disbursement  
DATABASE

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

2400.00

Transaction ID : B9B7EC486D03A437A87B

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

6080.00

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. AXCAPITAL**Mailing Address 555 METRO PL N  
STE 525City  
DUBLINState  
OHZip Code  
43017-1342Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

130.55

Transaction ID : B4C6C6ACB893743879FC

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AXCAPITAL**Mailing Address 555 METRO PL N  
STE 525City  
DUBLINState  
OHZip Code  
43017-1342Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

130.55

Transaction ID : BD8A6E31E0ADB411C892

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AXCAPITAL**Mailing Address 555 METRO PL N  
STE 525City  
DUBLINState  
OHZip Code  
43017-1342Purpose of Disbursement  
ACCOUNTING & COMPLIANCE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2055.00

Transaction ID : B8E8E51B6637F4A258F0

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

2316.10

**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 67 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. AXIOM STRATEGIES**Mailing Address 800 W 47TH ST  
STE 200City  
KANSAS CITYState  
MOZip Code  
64112-1244Purpose of Disbursement  
TRAVEL COST

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

66.55

Transaction ID : B5254EB46B7B547C18F1

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BLACK CAR**

Mailing Address

City

State

Zip Code

Purpose of Disbursement  
TRAVEL CAR EXPENSE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

280.00

Transaction ID : B100AEA0EB3BC40B8BC5

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BOBBY GADOURY MUSIC**

Mailing Address 4344 N 62ND ST

City  
LINCOLNState  
NEZip Code  
68507-1215Purpose of Disbursement  
ENTERTAINMENT

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

400.00

Transaction ID : B57A5341A4F3A4A23ADA

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

746.55

**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 68 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1801Purpose of Disbursement  
MEALS

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

273.47

Transaction ID : BADEE38A4372B400F8C2

☐ Memo Item**B. COURTYARD**

Mailing Address 7750 WISCONSIN AVE

City  
BETHESDAState  
MDZip Code  
20814-3522Purpose of Disbursement  
TRAVEL ROOM EXPENSE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

138.22

Transaction ID : B5A54480436B2485B80B

☐ Memo Item**C. DIVOTS CONFERENCE CENTER**

Mailing Address 4200 W NORFOLK AVE

City  
NORFOLKState  
NEZip Code  
68701-9202Purpose of Disbursement  
EVENT FOOD & DRINK

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

159.60

Transaction ID : B355707719E934B2BB53

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

571.29

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. DIVOTS CONFERENCE CENTER**

Mailing Address 4200 W NORFOLK AVE

City  
NORFOLKState  
NEZip Code  
68701-9202Purpose of Disbursement  
EVENT FOOD & DRINK

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	9		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

169.35

Transaction ID : B20FB47EA045F4498807

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DIVOTS CONFERENCE CENTER**

Mailing Address 4200 W NORFOLK AVE

City  
NORFOLKState  
NEZip Code  
68701-9202Purpose of Disbursement  
EVENT FOOD & DRINK

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	3		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

200.00

Transaction ID : B02C3250824E54A3FBA0

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DIVOTS CONFERENCE CENTER**

Mailing Address 4200 W NORFOLK AVE

City  
NORFOLKState  
NEZip Code  
68701-9202Purpose of Disbursement  
EVENT FOOD & DRINK

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

149.35

Transaction ID : B572D8229E111483CB35

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

518.70

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ENTERPRISE RENTAL**

Mailing Address 600 CORPORATE PARK DR

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	3		2	0	2	5

City  
SAINT LOUISState  
MOZip Code  
63105-4204

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL CAR EXPENSE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

189.96

Transaction ID : B6F4A784AC48A443CADC

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 942 S SHADY GROVE RD

Date of Disbursement

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

City  
MEMPHISState  
TNZip Code  
38120-4117

FEC Identification Number

C

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

36.48

Transaction ID : BEEAC4BA7D2A249D6BC8

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. FEDEX**

Mailing Address 942 S SHADY GROVE RD

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	2	5

City  
MEMPHISState  
TNZip Code  
38120-4117

FEC Identification Number

C

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

23.45

Transaction ID : B0D9A086DD1B043AA907

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

249.89

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. FLIGHT CLUB**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		22		2025

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL FLIGHT EXPENSE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1328.78

Transaction ID : B087C0070A2C3464BB00

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. FLIGHT CLUB**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		27		2025

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement  
EVENT FEES

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

33.21

Transaction ID : BBC35188C636149ADA61

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. FUNDRAISING, INC.**

Mailing Address 411 1ST ST SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2025

City

State

Zip Code  
WASHINGTON  
DC  
20003-1827

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING SREVICES

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

450.00

Transaction ID : BA8A21B9F85E64148A84

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

1811.99

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. FUNDRAISING, INC.**

Mailing Address 411 1ST ST SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2025

City  
WASHINGTONState  
DCZip Code  
20003-1827

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING SREVICES

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

17602.50

Transaction ID : BC7D5861539CA4FB1988

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. FUNDRAISING, INC.**

Mailing Address 411 1ST ST SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2025

City  
WASHINGTONState  
DCZip Code  
20003-1827

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING SREVICES

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

991.28

Transaction ID : BDFF4323C25BB47DBAF7

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. FUNDRAISING, INC.**

Mailing Address 411 1ST ST SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2025

City  
WASHINGTONState  
DCZip Code  
20003-1827

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING SREVICES

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

10506.50

Transaction ID : B6FA5C18282504584A3D

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

29100.28

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. FUNDRAISING, INC.**

Mailing Address 411 1ST ST SE

Date of Disbursement

M M	D D	Y Y Y Y
11	06	2025

City  
WASHINGTONState  
DCZip Code  
20003-1827

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING SREVICES

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

32110.00

Transaction ID : B476E387F09544D969E1

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. FUNDRAISING, INC.**

Mailing Address 411 1ST ST SE

Date of Disbursement

M M	D D	Y Y Y Y
11	06	2025

City  
WASHINGTONState  
DCZip Code  
20003-1827

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING SREVICES

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

16685.75

Transaction ID : BEE76BA7D67354C6AA05

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. FUNDRAISING, INC.**

Mailing Address 411 1ST ST SE

Date of Disbursement

M M	D D	Y Y Y Y
11	06	2025

City  
WASHINGTONState  
DCZip Code  
20003-1827

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING SREVICES

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

103.93

Transaction ID : BC2400A88677F4DDAA01

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

48899.68

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PRKY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2025

City  
MOUNTAIN VIEWState  
CAZip Code  
94043

FEC Identification Number

**C**Purpose of Disbursement  
COMPUTER SERVICES

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

15.35

Transaction ID : B987EA6BFE00A4782B91

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PRKY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2025

City  
MOUNTAIN VIEWState  
CAZip Code  
94043

FEC Identification Number

**C**Purpose of Disbursement  
COMPUTER SERVICES

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

50.40

Transaction ID : BAE33E34FA127435DA94

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PRKY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2025

City  
MOUNTAIN VIEWState  
CAZip Code  
94043

FEC Identification Number

**C**Purpose of Disbursement  
COMPUTER SERVICES

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

15.43

Transaction ID : B49B150E8678148359AE

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

81.18

**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 75 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PRKY

Date of Disbursement

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

City  
MOUNTAIN VIEWState  
CAZip Code  
94043

FEC Identification Number

C

Purpose of Disbursement  
COMPUTER SERVICES

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

50.40

Transaction ID : B87F47367ED214C54983

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PRKY

Date of Disbursement

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

City  
MOUNTAIN VIEWState  
CAZip Code  
94043

FEC Identification Number

C

Purpose of Disbursement  
COMPUTER SERVICES

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

50.40

Transaction ID : BE2CF0BCD6CDB4D8BB03

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PRKY

Date of Disbursement

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

City  
MOUNTAIN VIEWState  
CAZip Code  
94043

FEC Identification Number

C

Purpose of Disbursement  
COMPUTER SERVICES

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

15.43

Transaction ID : BF1AE623F059E4B8786E

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

116.23

**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)

PAGE 76 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. GORAT'S STEAKHOUSE**

Mailing Address 4917 CENTER ST

City  
OMAHAState  
NEZip Code  
68106-3218Purpose of Disbursement  
EVENT FOOD & BEV

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	9	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1296.57

Transaction ID : B885669ECCF3448D1B0A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HUNTER, JEREMY, , ,**

Mailing Address PO BOX 81041

City  
LINCOLNState  
NEZip Code  
68501-1041Purpose of Disbursement  
FIELD STRATEGY RETAINER

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B5C1EF973EB4649DE91D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HUNTER, JEREMY, , ,**

Mailing Address PO BOX 81041

City  
LINCOLNState  
NEZip Code  
68501-1041Purpose of Disbursement  
FIELD STRATEGY RETAINER

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : BD4482FD6208D4274A04

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

2296.57

**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 77 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. HUNTER, JEREMY, , ,**

Mailing Address PO BOX 81041

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		22		2025

City  
LINCOLNState  
NEZip Code  
68501-1041

FEC Identification Number

**C**Purpose of Disbursement  
FIELD STRATEGY RETAINER

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

**500.00**

Transaction ID : B7ECA47ADFD9E4585AAD

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. HY-VEE**

Mailing Address 2107 TAYLOR AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		03		2025

City  
NORFOLKState  
NEZip Code  
68701-4618

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL FUEL EXPENSE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

**721.00**

Transaction ID : BD6B805E7981F4C228AD

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. INSPIRMEDIA PRODUCTIONS**

Mailing Address 461 N 66TH ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2025

City  
LINCOLNState  
NEZip Code  
68505-2429

FEC Identification Number

**C**Purpose of Disbursement  
MEDIA PRODUCTION

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

**20626.50**

Transaction ID : B084E947EC2384654B9F

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶**21847.50****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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. JBEST & COMPANY**Mailing Address 11235 DAVENPORT ST  
STE 107City  
OMAHAState  
NEZip Code  
68154-2613Purpose of Disbursement  
FUNDRAISING SREVICES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : B12784DBCD9E541FFAA9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JBEST & COMPANY**Mailing Address 11235 DAVENPORT ST  
STE 107City  
OMAHAState  
NEZip Code  
68154-2613Purpose of Disbursement  
FUNDRAISING SREVICES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4722.00

Transaction ID : BE4A15A07EDD0472C94A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JBEST & COMPANY**Mailing Address 11235 DAVENPORT ST  
STE 107City  
OMAHAState  
NEZip Code  
68154-2613Purpose of Disbursement  
FUNDRAISING SREVICES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : BCCA8B8D71FC4C60AC2

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

14722.00

**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 79 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. JBEST & COMPANY**Mailing Address 11235 DAVENPORT ST  
STE 107City  
OMAHAState  
NEZip Code  
68154-2613Purpose of Disbursement  
FUNDRAISING SREVICES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

523.50

Transaction ID : B365B41548A944AB7B6C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JBEST & COMPANY**Mailing Address 11235 DAVENPORT ST  
STE 107City  
OMAHAState  
NEZip Code  
68154-2613Purpose of Disbursement  
FUNDRAISING SREVICES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : B5BDF61C7AB2342D1A63

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JBEST & COMPANY**Mailing Address 11235 DAVENPORT ST  
STE 107City  
OMAHAState  
NEZip Code  
68154-2613Purpose of Disbursement  
FUNDRAISING SREVICES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3510.50

Transaction ID : B749AEB5BABB24D6B998

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

4134.00

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. JBEST & COMPANY**Mailing Address 11235 DAVENPORT ST  
STE 107City  
OMAHAState  
NEZip Code  
68154-2613Purpose of Disbursement  
FUNDRAISING SREVICES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

525.00

Transaction ID : B7C0E10D23B684030B7C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JBEST & COMPANY**Mailing Address 11235 DAVENPORT ST  
STE 107City  
OMAHAState  
NEZip Code  
68154-2613Purpose of Disbursement  
FUNDRAISING SREVICES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

255.96

Transaction ID : B1D0CA67786B84FF994F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JBEST & COMPANY**Mailing Address 11235 DAVENPORT ST  
STE 107City  
OMAHAState  
NEZip Code  
68154-2613Purpose of Disbursement  
FUNDRAISING SREVICES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : B0B7EBFEFCF2E4E4AAD1

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

5780.96

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. LANCASTER GOP**

Mailing Address 151 N 8TH ST

City  
LINCOLNState  
NEZip Code  
68508-1314Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

2500.00

Transaction ID : B245ACD9766224F76897

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LEX POLITICA**

Mailing Address 7415 SOUTHWEST PKWY

City  
AUSTINState  
TXZip Code  
78735-8997Purpose of Disbursement  
LEGAL SERVICES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

1912.50

Transaction ID : B85F52DBD7EEF494C805

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LEX POLITICA**

Mailing Address 7415 SOUTHWEST PKWY

City  
AUSTINState  
TXZip Code  
78735-8997Purpose of Disbursement  
LEGAL SERVICES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

1912.50

Transaction ID : B5C21CCADC81A47EFAAE

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

6325.00

**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 82 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. MARRIOTT HOTEL**

Mailing Address 10220 REGENCY CIR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		17		2025

City  
OMAHAState  
NEZip Code  
68114-3706

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL ROOM EXPENSE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

780.57

Transaction ID : B92DF4B6707204C1682C

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. MARRIOTT HOTEL**

Mailing Address 10220 REGENCY CIR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		17		2025

City  
OMAHAState  
NEZip Code  
68114-3706

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL ROOM EXPENSE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

780.57

Transaction ID : B73904D731C99451F951

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. MARRIOTT HOTEL**

Mailing Address 10220 REGENCY CIR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		25		2025

City  
OMAHAState  
NEZip Code  
68114-3706

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL ROOM EXPENSE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

233.69

Transaction ID : BE060B40046274D6591D

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

1794.83

**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 83 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MARRIOTT HOTEL**

Mailing Address 10220 REGENCY CIR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		17		2025

City  
OMAHAState  
NEZip Code  
68114-3706

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL ROOM EXPENSE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

138.25

Transaction ID : BC28D2D6239C84160B5F

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. MARRIOTT HOTEL**

Mailing Address 10220 REGENCY CIR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		17		2025

City  
OMAHAState  
NEZip Code  
68114-3706

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL ROOM EXPENSE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

138.25

Transaction ID : BC48356B6B2B644AD961

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. MIKE FLOOD**

Mailing Address 2910 PINNACLE DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2025

City  
NORFOLKState  
NEZip Code  
68701-6504

FEC Identification Number

**C**Purpose of Disbursement  
EVENT CATERING REIMBURSEMENT

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3048.78

Transaction ID : B082D12B1F6BB4103806

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

3325.28

**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 84 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MIKE FLOOD**

Mailing Address 2910 PINNACLE DR

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	3		2	0	2	5

City  
NORFOLKState  
NEZip Code  
68701-6504

FEC Identification Number

**C**Purpose of Disbursement  
EVENT CATERING REIMBURSEMENT

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1995.85

Transaction ID : B74F66BEA7B89483DA2B

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. MIKE FLOOD**

Mailing Address 2910 PINNACLE DR

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	2	5

City  
NORFOLKState  
NEZip Code  
68701-6504

FEC Identification Number

**C**Purpose of Disbursement  
EVENT CATERING REIMBURSEMENT

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2387.14

Transaction ID : B0C177606B0854FDDAF1

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. RESIDENCE INN**

Mailing Address 333 E ST SW

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20024-3221

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL ROOM EXPENSE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

131.04

Transaction ID : B9BC3669337184CFF95D

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

4514.03

**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 85 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RESIDENCE INN**

Mailing Address 333 E ST SW

Date of Disbursement

M M	D D	Y Y Y Y
11	26	2025

City  
WASHINGTONState  
DCZip Code  
20024-3221

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL ROOM EXPENSE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

134.04

Transaction ID : BA6018FBF83F841E38B3

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. SCARLET HOTEL**

Mailing Address 2101 TRANSFORMATION DR

Date of Disbursement

M M	D D	Y Y Y Y
12	08	2025

City  
LINCOLNState  
NEZip Code  
68508-1605

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL ROOM EXPENSE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

- 500.00

Transaction ID : BCA0F71645DFE45C5B66

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. SDP CREATIVE**

Mailing Address 510 UNION ST

Date of Disbursement

M M	D D	Y Y Y Y
10	24	2025

City  
MILLERSBURGState  
PAZip Code  
17061-1470

FEC Identification Number

**C**Purpose of Disbursement  
PRINT EXPENSE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

678.40

Transaction ID : BF79944E616AB402EAC9

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

312.44

**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 86 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. SDP CREATIVE**

Mailing Address 510 UNION ST

City  
MILLERSBURGState  
PAZip Code  
17061-1470Purpose of Disbursement  
PRINT EXPENSE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

185.50

Transaction ID : BC54A8C0B96D9488DBF0

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SDP CREATIVE**

Mailing Address 510 UNION ST

City  
MILLERSBURGState  
PAZip Code  
17061-1470Purpose of Disbursement  
PRINT EXPENSE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

68.90

Transaction ID : B6ADAC0DDA24144E786E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SDP CREATIVE**

Mailing Address 510 UNION ST

City  
MILLERSBURGState  
PAZip Code  
17061-1470Purpose of Disbursement  
PRINT EXPENSE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

68.90

Transaction ID : B2EB28E7E4F0E4D8EBE2

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

323.30

**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 87 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. SOUTHWEST**

Mailing Address 2702 LOVE FIELD DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		21		2025

City  
DALLASState  
TXZip Code  
75235-1908

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL FLIGHT EXPENSE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

368.48

Transaction ID : B64B63B86E4A54BA9829

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. TE SAN FRANCISCO**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		27		2025

City

State

Zip Code

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL ROOM EXPENSE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

230.67

Transaction ID : B2CF95F4D858546A9B7F

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. TRATTORIA**

Mailing Address 508 8TH ST SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		21		2025

City  
WASHINGTONState  
DCZip Code  
20003-2834

FEC Identification Number

**C**Purpose of Disbursement  
EVENT FOOD & BEV

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1099.32

Transaction ID : B0C15E64921394E669AC

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

1698.47

**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 88 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. UBER**

Mailing Address 1725 3RD ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	3		2	0	2	5

City  
SAN FRANCISCOState  
CAZip Code  
94158-2203

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL CAR EXPENSE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

**- 8.93**

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

**Transaction ID : BF92B8C33FEDA468E98B**☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**B. UNITED AIRLINES**

Mailing Address 233 S WACKER DR

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	7		2	0	2	5

City  
CHICAGOState  
ILZip Code  
60606-7147

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL FLIGHT EXPENSE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

**363.48**

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

**Transaction ID : B87775A4EB29240C29D4**☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**C. UNITED AIRLINES**

Mailing Address 233 S WACKER DR

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	7		2	0	2	5

City  
CHICAGOState  
ILZip Code  
60606-7147

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL FLIGHT EXPENSE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

**363.48**

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

**Transaction ID : B94739B3FDBAC43DFBDA**☐ Memo Item

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶**718.03****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 89 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. UNITED AIRLINES**

Mailing Address 233 S WACKER DR

City  
CHICAGOState  
ILZip Code  
60606-7147Purpose of Disbursement  
TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

733.82

Transaction ID : BB017034F5B7C4493A05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. UNITED AIRLINES**

Mailing Address 233 S WACKER DR

City  
CHICAGOState  
ILZip Code  
60606-7147Purpose of Disbursement  
TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

17.19

Transaction ID : BE81F4F65209C40E4B8A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. UNITED AIRLINES**

Mailing Address 233 S WACKER DR

City  
CHICAGOState  
ILZip Code  
60606-7147Purpose of Disbursement  
TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

509.48

Transaction ID : B8E7131E0E99B49AF8A8

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

1260.49

**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 90 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. USPS**Mailing Address 1124 PACIFIC ST  
RM 107City  
OMAHAState  
NEZip Code  
68108-3200Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

156.00

Transaction ID : BD8E710711ACA4B5AA01

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. USPS**Mailing Address 1124 PACIFIC ST  
RM 107City  
OMAHAState  
NEZip Code  
68108-3200Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

19.45

Transaction ID : BB2AF21F3C5CD45D5998

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. USPS**Mailing Address 1124 PACIFIC ST  
RM 107City  
OMAHAState  
NEZip Code  
68108-3200Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

11.35

Transaction ID : B912F7157542D4FC0801

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

186.80

**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 91 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. USPS**Mailing Address 1124 PACIFIC ST  
RM 107City  
OMAHAState  
NEZip Code  
68108-3200Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	3		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

16.90

Transaction ID : B70A6E24DF5F042A7A9E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. USPS**Mailing Address 1124 PACIFIC ST  
RM 107City  
OMAHAState  
NEZip Code  
68108-3200Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	4		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

12.40

Transaction ID : B0A5F2F8C232C4E42822

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. USPS**Mailing Address 1124 PACIFIC ST  
RM 107City  
OMAHAState  
NEZip Code  
68108-3200Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

23.95

Transaction ID : B3A2102CAEFD54D878BB

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

53.25

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. USPS**Mailing Address 1124 PACIFIC ST  
RM 107City  
OMAHAState  
NEZip Code  
68108-3200Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

9.45

Transaction ID : B3897A7A9C83E4DE89B1

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. USPS**Mailing Address 1124 PACIFIC ST  
RM 107City  
OMAHAState  
NEZip Code  
68108-3200Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

18.49

Transaction ID : BA5818EAED18945FEAFF

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. VENETIAN PALAZZO**

Mailing Address 3325 S LAS VEGAS BLVD

City  
LAS VEGASState  
NVZip Code  
89109-1414Purpose of Disbursement  
TRAVEL ROOM EXPENSE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

403.63

Transaction ID : BBA4428D95A214BC0896

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

431.57

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. VENETIAN PALAZZO**

Mailing Address 3325 S LAS VEGAS BLVD

City  
LAS VEGASState  
NVZip Code  
89109-1414Purpose of Disbursement  
TRAVEL ROOM EXPENSE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

403.63

Transaction ID : B8A051623318F46C5B4E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CREDIT CARD PROCESSING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

98.50

Transaction ID : B62DACDD2AB7E4DEC9E1

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ZOOM**

Mailing Address 55 ALMADEN BLVD

City  
SAN JOSEState  
CAZip Code  
95113-1608Purpose of Disbursement  
COMPUTER SERVICES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

18.22

Transaction ID : B97C24061056B46E1970

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

520.35

**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 94 OF 95

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ZOOM**

Mailing Address 55 ALMADEN BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		19		2025

City  
SAN JOSEState  
CAZip Code  
95113-1608

FEC Identification Number

**C**Purpose of Disbursement  
COMPUTER SERVICES

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

18.22

Transaction ID : B66484738F3D74F8C858

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. ZOOM**

Mailing Address 55 ALMADEN BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		19		2025

City  
SAN JOSEState  
CAZip Code  
95113-1608

FEC Identification Number

**C**Purpose of Disbursement  
COMPUTER SERVICES

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

18.22

Transaction ID : B22C230D3CF75404688E

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

**C**

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

36.44

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

174524.34

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 95 OF 95

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**MIKE FLOOD FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**DESIGN 4 INC**

Nature of Debt (Purpose):

PRINTING: BANNERS/SIGNS

Mailing Address 3232 H ST

City  
OMAHAState  
NEZip Code  
68107-1449

Outstanding Balance Beginning This Period

5745.90

Transaction ID : D2ADF7C8965F04C789BF

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5745.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**NEBRASKA REPUBLICAN PARTY**

Nature of Debt (Purpose):

OPERATIONS: OFFICE RENT

Mailing Address 1610 N ST

City  
LINCOLNState  
NEZip Code  
68508-1871

Outstanding Balance Beginning This Period

300.00

Transaction ID : D92A6760C33164041B80

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

300.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ▶

6045.90

2) **TOTALS** This Period (last page this line number only) ▶

6045.90

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

6045.90