

**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 CRAPO FOR U.S. SENATE

ADDRESS (number and street)

P.O. BOX 1948

Check if different  
than previously  
reported. (ACC)

BOISE

ID

83701

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00330886

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

ID

00

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

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
04 01 2025

through

M M / D D / Y Y Y Y  
06 30 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 KILGORE, PAUL, , ,

Signature of Treasurer

KILGORE, PAUL, , ,

Date

M M / D D / Y Y Y Y  
07 14 2025

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 CRAPO FOR U.S. SENATE**

Report Covering the Period:

From:

MM / DD / YYYY  
04 / 01 / 2025

To:

MM / DD / YYYY  
06 / 30 / 2025

	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)) ....	202690.62	1240347.32
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	26298.68
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	202690.62	1214048.64
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	73025.66	1272219.19
(b) Total Offsets to Operating Expenditures (from Line 14) .....	19.29	95674.39
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	73006.37	1176544.80
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	2798425.08	
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) .....	0.00	

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 CRAPO FOR U.S. SENATE

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

**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).....

85398.50

433550.60

(ii) Unitemized.....

292.12

41271.72

(iii) TOTAL of contributions from individuals ▶

85690.62

474822.32

(b) Political Party Committees.....

0.00

0.00

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

117000.00

765525.00

(d) The Candidate.....

0.00

0.00

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

202690.62

1240347.32

## 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....

0.00

226765.23

## 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.) .....

19.29

95674.39

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

5705.77

69267.15

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

208415.68

1632054.09

# **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.....	73025.66	1272219.19
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	19298.68
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	7000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	26298.68
21. OTHER DISBURSEMENTS .....	0.00	3250.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	73025.66	1301767.87

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2663035.06
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	208415.68
25. SUBTOTAL (add Line 23 and Line 24).....	2871450.74
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	73025.66
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2798425.08

# **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 5 OF 86

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

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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

ANDREWS, KELLI, , ,

**A.**

Mailing Address 6605 RIMROCK DRIVE

City

IDAHO FALLS

State

ID

Zip Code

83401-8001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : A80C4796624B044CEA89

Amount of Each Receipt this Period

10.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

159416.07

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 14 2025

Transaction ID : A222E4685546D4A40B22

Amount of Each Receipt this Period

10.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

ANDREWS, KELLI, , ,

**C.**

Mailing Address 6605 RIMROCK DRIVE

City

IDAHO FALLS

State

ID

Zip Code

83401-8001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 10 2025

Transaction ID : A653CA374F2804171A12

Amount of Each Receipt this Period

10.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

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

20.00

**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 6 OF 86

<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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2028

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

159416.07

Date of Receipt

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

Transaction ID : A4F7FD89B539C4FB0843

Amount of Each Receipt this Period

10.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

B.

Full Name (Last, First, Middle Initial)

ANDREWS, KELLI, , ,

Mailing Address 6605 RIMROCK DRIVE

City

IDAHO FALLS

State

ID

Zip Code

83401-8001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NONE

RETIRED

Receipt For: 2028

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

320.00

Date of Receipt

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

Transaction ID : ABAD8E5AC13414490BC7

Amount of Each Receipt this Period

10.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

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 C00694323

Name of Employer

Occupation

Receipt For: 2028

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

159416.07

Date of Receipt

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

Transaction ID : A4957EDFF9E6445898A1

Amount of Each Receipt this Period

10.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

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

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

10.00

# **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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

ARNOLD, JOHN, , ,

**A.**

Mailing Address 1717 WEST LOOP S STE 1800

City  
HOUSTON

State  
TX

Zip Code  
77027

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ARNOLD VENTURES

Occupation  
CO-FOUNDER

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 29 2025

Transaction ID : AFFFBC0BB13ED442EB8B

Amount of Each Receipt this Period

400.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

159416.07

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 30 2025

Transaction ID : AF83171CF5FF74499BDD

Amount of Each Receipt this Period

400.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

BENTON, JAMES, R., MR.,

**C.**

Mailing Address 3000 ESTATE ORANGE GRV

City  
CHRISTIANSTED

State  
VI

Zip Code  
00820-4363

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
J. BENTON CONSTRUCTION, LLC

Occupation  
CONTRACTOR

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 27 2025

Transaction ID : A72BD22CE1C85499E8CC

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)..... ▶

3900.00

**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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

BOLES, P. MATTHEW, , ,

**A.**

Mailing Address 2921 PURDUE AVE

City

DALLAS

State

TX

Zip Code

75225-7814

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2028



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 27 / 2025

Transaction ID : A7DB3739E99024E28A92

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

BRONFMN, JEREMY, , ,

Mailing Address 2407 LA MESA DR

City

STUDIO CITY

State

CA

Zip Code

91604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LINCOLN AVENUE COMMUNITIES

Occupation

CEO

Receipt For: 2028



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AD244C166881B4089809

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

CORLEY, KEVIN, , ,

Mailing Address 2406 RED FOX DR

City

MISSOURI CITY

State

TX

Zip Code

77459-7257

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ALLIANTGROUP LP

Occupation

CPA

Receipt For: 2028



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 24 / 2025

Transaction ID : A7F58CB2AE3B74AFBBB2

Amount of Each Receipt this Period

3500.00

☐ Memo Item

5500.00

**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  
Detailed Summary PageFOR LINE NUMBER:  
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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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

DACEY, SCOTT, , ,

**A.**

Mailing Address 139 TRENT SHORES DRIVE

City

TRENT WOODS

State

NC

Zip Code

28562

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PACE GOVT. RELATIONS

Occupation

LOBBYIST

Receipt For: 2028

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	2	5

Transaction ID : A4848D8C717B443C2B3E

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2028

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

159416.07

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

Transaction ID : A551809AE7F744EBBB4A

Amount of Each Receipt this Period

250.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

DALTON, OSCAR, , ,

**C.**

Mailing Address 1780 HUGHES LANDING BOULEVARD SUIT

City

THE WOODLANDS

State

TX

Zip Code

77380

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PLUS POWER SERVICES LLC

Occupation

PRESIDENT

Receipt For: 2028

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AB9CB46C535874F5FB9D

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

1250.00

**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 10 OF 86

<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 CRAPO FOR U.S. SENATE**Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

159416.07

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 19 2025

Transaction ID : A38BA44C10F014C1B977

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.Full Name (Last, First, Middle Initial)  
DUMEZICH, DANIEL, , ,

Mailing Address 970 CAPE MARCO DRIVE

City  
MARCO ISLANDState  
FLZip Code  
34145FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NONE

RETIRED

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 01 2025

Transaction ID : A8D003FD986F9466286C

Amount of Each Receipt this Period

3500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

159416.07

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 09 2025

Transaction ID : AF05534123D9844B48A5

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**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)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 86

<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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

DUNN, BRIAN, , ,

**A.**

Mailing Address 2745 29TH ST NW

City

WASHINGTON

State

DC

Zip Code

20008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SUMMIT RIDGE ENERGY

Occupation

CLEAN ENERGY EXECUTIVE

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AA45C5714112E42AC8D1

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

159416.07

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

Transaction ID : A3D621F7C480E415D928

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

FITZGERALD, RYAN, , ,

**C.**

Mailing Address 7051 N SUNSET MAPLE WAY

City

MERIDIAN

State

ID

Zip Code

83646

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GOWEST CREDIT UNION ASSOCIATION

Occupation

GOVERNMENT AFFAIRS

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A1B09B1E744384529980

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

1500.00

**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 12 OF 86

<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 CRAPO FOR U.S. SENATE**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** C00694323

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

159416.07

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

Transaction ID : A7A73B7A99D50487C8CF

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.Full Name (Last, First, Middle Initial)  
**GREENBERG, RON, , ,**

Mailing Address 45 HILL ST.

City  
**MORRISTOWN**State  
**NJ**Zip Code  
**07960**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

**GREENBERG & RAPP FIN GRP****FINANCIAL ADVISOR**

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : AD3B588E9479A4EC6800

Amount of Each Receipt this Period

1500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
**HAYES, GARY, , ,**

Mailing Address 1208 W OLIVE AVE

City  
**EL CENTRO**State  
**CA**Zip Code  
**92243-2825**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

**NONE****RETIRED**

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

295.00

Date of Receipt

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

Transaction ID : AC7D6CF16DFF94B279F2

Amount of Each Receipt this Period

10.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

1510.00

**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  
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 CRAPO FOR U.S. SENATE**Full Name (Last, First, Middle Initial)  
WINRED**A.** Mailing Address PO BOX 9891City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

159416.07

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	5

Transaction ID : A735200BA603E49E2838

Amount of Each Receipt this Period

10.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.Full Name (Last, First, Middle Initial)  
HAYES, GARY, , ,**B.** Mailing Address 1208 W OLIVE AVECity  
EL CENTROState  
CAZip Code  
92243-2825FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

NONE

RETIRED

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

305.00

Date of Receipt

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

Transaction ID : AD688DACED9B1490B96D

Amount of Each Receipt this Period

10.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)  
WINRED**C.** Mailing Address PO BOX 9891City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

159416.07

Date of Receipt

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

Transaction ID : A4CFFE659F22B4F62B4D

Amount of Each Receipt this Period

10.00

☒ Memo Item

INTERMEDIARY

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

10.00

**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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

HAYES, GARY, , ,

**A.**

Mailing Address 1208 W OLIVE AVE

City

EL CENTRO

State

CA

Zip Code

92243-2825

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2028

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 02 / 2025

Transaction ID : AF046DA26003B47978EA

Amount of Each Receipt this Period

10.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2028

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

159416.07

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 09 / 2025

Transaction ID : A9ECF4860E4D54776961

Amount of Each Receipt this Period

10.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

HENDRIX, MARLIN, , ,

**C.**

Mailing Address 5590 NORTH ANNE STREET

City

COEUR D'ALENE

State

ID

Zip Code

83815

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2028

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

426.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 30 / 2025

Transaction ID : AF59E7898E44143B0B96

Amount of Each Receipt this Period

30.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

40.00

**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 CRAPO FOR U.S. SENATE**Full Name (Last, First, Middle Initial)  
WINRED**A.** Mailing Address PO BOX 9891City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

159416.07

Date of Receipt

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

Transaction ID : A1C69FFA558604639B2F

Amount of Each Receipt this Period

30.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.Full Name (Last, First, Middle Initial)  
HENDRIX, MARLIN, , ,**B.** Mailing Address 5590 NORTH ANNE STREETCity  
COEUR D'ALENEState  
IDZip Code  
83815FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

NONE

RETIRED

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

456.00

Date of Receipt

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

Transaction ID : AFD175FB67F124DD39CA

Amount of Each Receipt this Period

30.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)  
WINRED**C.** Mailing Address PO BOX 9891City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

159416.07

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

Transaction ID : AEC7B83FAACFD4BB3A3E

Amount of Each Receipt this Period

30.00

☒ Memo Item

INTERMEDIARY

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

30.00

**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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

HENDRIX, MARLIN, , ,

**A.**

Mailing Address 5590 NORTH ANNE STREET

City

COEUR D'ALENE

State

ID

Zip Code

83815

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2028

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

486.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 30 2025

Transaction ID : A050EF98552D34311B1E

Amount of Each Receipt this Period

30.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2028

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

159416.07

Date of Receipt

M M / D D / Y Y Y Y Y  
06 30 2025

Transaction ID : A0BA565E2F2D64F3A928

Amount of Each Receipt this Period

30.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

INSKEEP, BRIAN, , ,

**C.**

Mailing Address 1299 ROCKY POINTE ROAD

City

MCCORDSVILLE

State

IN

Zip Code

46055

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INPWR

Occupation

CEO

Receipt For: 2028

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 28 2025

Transaction ID : AF869374D43C04849838

Amount of Each Receipt this Period

7000.00

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

7030.00

**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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

INSKEEP, BRIAN, , ,

**A.**

Mailing Address 1299 ROCKY POINTE ROAD

City

MCCORDSVILLE

State

IN

Zip Code

46055

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INPWR

Occupation

CEO

Receipt For: 2028



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 28 2025

Transaction ID : AF1325EC1B70248278CF

Amount of Each Receipt this Period

- 3500.00



Memo Item

REDESIGNATION FROM

**B.**

Full Name (Last, First, Middle Initial)

INSKEEP, BRIAN, , ,

Mailing Address 1299 ROCKY POINTE ROAD

City

MCCORDSVILLE

State

IN

Zip Code

46055

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INPWR

Occupation

CEO

Receipt For: 2028



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 28 2025

Transaction ID : A9BEDCD66B2314534ACD

Amount of Each Receipt this Period

3500.00



Memo Item

REDESIGNATION TO

**C.**

Full Name (Last, First, Middle Initial)

INSKEEP, STACI, , ,

Mailing Address 12999 ROCKY POINTE ROAD

City

MCCORDSVILLE

State

IL

Zip Code

46055

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CEO

Occupation

INPWR

Receipt For: 2028



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 28 2025

Transaction ID : A704BC523C1C940568FD

Amount of Each Receipt this Period

- 3500.00



Memo Item

REDESIGNATION FROM

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

0.00

**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 18 OF 86

<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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

INSKEEP, STACI, , ,

**A.**

Mailing Address 12999 ROCKY POINTE ROAD

City

MCCORDSVILLE

State

IL

Zip Code

46055

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CEO

Occupation

INPWR

Receipt For: 2028

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : ABAC1345825594000889

Amount of Each Receipt this Period

3500.00

☒ Memo Item

REDESIGNATION TO

**B.**

Full Name (Last, First, Middle Initial)

INSKEEP, STACI, , ,

Mailing Address 12999 ROCKY POINTE ROAD

City

MCCORDSVILLE

State

IL

Zip Code

46055

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CEO

Occupation

INPWR

Receipt For: 2028

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : A178174A5BB2C4CFCAA5

Amount of Each Receipt this Period

7000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

**C.**

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

C00694323

Name of Employer

Occupation

Receipt For: 2028

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

159416.07

Date of Receipt

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

Transaction ID : A2129BB695BC347188E0

Amount of Each Receipt this Period

7000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**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)

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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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

LANDY, EUGENE, , MR.,

**A.**

Mailing Address 3499 US HIGHWAY 9

STE 3C

City

FREEHOLD

State

NJ

Zip Code

07728-3277

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2028



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	5	

Transaction ID : A86730A4026454A87B31

Amount of Each Receipt this Period

3500.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

LANDY, EUGENE, , MR.,

Mailing Address 3499 US HIGHWAY 9

STE 3C

City

FREEHOLD

State

NJ

Zip Code

07728-3277

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2028



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	5	

Transaction ID : AAB96E63542D4970B81

Amount of Each Receipt this Period

1500.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

LIZARDI-DE-VISO, OLGA, , ,

Mailing Address 1507 AVE ASHFORD

PH 1

City

SAN JUAN

State

PR

Zip Code

00911-1179

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2028



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	5	

Transaction ID : A62A8ADB6173B481DB57

Amount of Each Receipt this Period

3500.00



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  
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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

MATTINGLY, MACK, F., ,

**A.**

Mailing Address 145 RICE ML

City

SAINT SIMONS ISLAN

State

GA

Zip Code

31522-5450

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 27 2025

Transaction ID : AA5E07686F0A54C3C9BE

Amount of Each Receipt this Period

2000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

MCCALL, PARKHURST &amp; HORTON LLP

Mailing Address 717 N HARWOOD ST  
STE 900

City

DALLAS

State

TX

Zip Code

75201-6514

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 27 2025

Transaction ID : A7477E0F0B73C4192B3F

Amount of Each Receipt this Period

2000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

GULBAS, JEFF, , ,

Mailing Address 717 N HARWOOD ST  
STE 900

City

DALLAS

State

TX

Zip Code

75201-6514

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MCCALL, PARKHURST &amp; HORTON LLP

Occupation

ATTORNEY

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 27 2025

Transaction ID : A2ABA8F028D6E4E4E975

Amount of Each Receipt this Period

2000.00

☒ Memo ItemPARTNERSHIP: MCCALL, PARKHURST & HORTON  
LLP

4000.00

**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  
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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

MURPHY, MARK, , ,

**A.** Mailing Address 15 CRESTVIEW ROADCity  
MOUNTAIN LAKESState  
NJZip Code  
07046FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NORTHEAST PRIVATE CLIENT GROUPOccupation  
CEO

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 30 2025

Transaction ID : A4BF374232AFB4CC5842

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MURPHY, MARK, , ,

**B.** Mailing Address 15 CRESTVIEW ROADCity  
MOUNTAIN LAKESState  
NJZip Code  
07046FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NORTHEAST PRIVATE CLIENT GROUPOccupation  
CEO

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 26 2025

Transaction ID : A086F78A4F0CB42A9AB3

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NOVOGRADAC, MICHAEL, J., MR.,

**C.** Mailing Address 246 1ST ST  
FL 5City  
SAN FRANCISCOState  
CAZip Code  
94105-2636FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NOVOGRADAC & COMPANY LLPOccupation  
MANAGING PARTNER

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 26 2025

Transaction ID : A2349AB291342440ABB2

Amount of Each Receipt this Period

2500.00

☐ 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  
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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

ODUBANJO, OLUGBOYEGA, , ,

**A.** Mailing Address 12329 PREAKNESS CIRCLE LNCity  
CLARKSVILLEState  
MDZip Code  
21029-1227FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 27 2025

Transaction ID : A93DA864E87784931A7B

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ROE, ELVIN, , ,

**B.** Mailing Address 6753 DALCROSS PLCity  
CANAL WINCHESTERState  
OHZip Code  
43110-8788FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 08 2025

Transaction ID : A2199B3FDAA974181AF1

Amount of Each Receipt this Period

22.50

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**C.** Mailing Address PO BOX 9891City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

159416.07

Date of Receipt

M M / D D / Y Y Y Y Y  
04 14 2025

Transaction ID : A73CDB8588D1B482EBB2

Amount of Each Receipt this Period

22.50

☒ Memo Item

INTERMEDIARY

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

1522.50

**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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

ROE, ELVIN, , ,

**A.**

Mailing Address 6753 DALCROSS PL

City

CANAL WINCHESTER

State

OH

Zip Code

43110-8788

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

697.50

Date of Receipt

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

Transaction ID : A720DF152B1E144CB9CB

Amount of Each Receipt this Period

22.50

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

159416.07

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 12 2025

Transaction ID : AB5100B301CD643D48D2

Amount of Each Receipt this Period

22.50

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

ROE, ELVIN, , ,

**C.**

Mailing Address 6753 DALCROSS PL

City

CANAL WINCHESTER

State

OH

Zip Code

43110-8788

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 31 2025

Transaction ID : A703140702D924DD990C

Amount of Each Receipt this Period

- 22.50

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

0.00

**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 CRAPO FOR U.S. SENATE**Full Name (Last, First, Middle Initial)  
WINRED**A.** Mailing Address PO BOX 9891City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

159416.07

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 02 2025

Transaction ID : A5DCB78C23E1B4343A41

Amount of Each Receipt this Period

- 22.50

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.Full Name (Last, First, Middle Initial)  
ROSEN, DEAN, , ,**B.** Mailing Address 240 KENTUCKY AVENUE, SECity  
WASHINGTONState  
DCZip Code  
20003FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

MEHLMAN CONSULTING

GOVERNMENT RELATIONS

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1001.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 31 2025

Transaction ID : A423BCD7F979C488AAA0

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)  
WINRED**C.** Mailing Address PO BOX 9891City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

159416.07

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 09 2025

Transaction ID : AB2D3215FA205443D8AF

Amount of Each Receipt this Period

1000.00

☒ 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 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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

ROSEN, DEAN, , ,

**A.** Mailing Address 240 KENTUCKY AVENUE, SE

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MEHLMAN CONSULTING

Occupation

GOVERNMENT RELATIONS

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1001.00

Date of Receipt

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

Transaction ID : A430147B86C6A4448A52

Amount of Each Receipt this Period

1.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.** Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

159416.07

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

Transaction ID : A0D789B68108B4F55B88

Amount of Each Receipt this Period

1.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

SAMUELSON, KENNETH, , ,

**C.** Mailing Address 2627 HAMPTON AVE

City

CHARLOTTE

State

NC

Zip Code

28207

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MOREHEAD GROUP

Occupation

LIFE INSURANCE

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A77BB0BF6F547435B853

Amount of Each Receipt this Period

1500.00

☐ Memo Item

1501.00

**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  
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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

VISO-ALONSO, JOAQUIN, B., ,

**A.**

Mailing Address 1507 AVE ASHFORD

PH 1

City

SAN JUAN

State

PR

Zip Code

00911-1179

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2028

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 27 / 2025D D / Y Y Y Y Y  
27 / 2025Y Y Y Y Y  
2025

Transaction ID : AB123847D01454AE4887

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WADE, JOHN, , ,

**B.**

Mailing Address 7031 MAYFLOWER PARK DRIVE

City

ZIONSVILLE

State

IL

Zip Code

46077

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AES

Occupation

OWNER

Receipt For: 2028

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 28 / 2025D D / Y Y Y Y Y  
28 / 2025Y Y Y Y Y  
2025

Transaction ID : A2314C0D7DE924A5B92C

Amount of Each Receipt this Period

- 3500.00

☒ Memo Item

REDESIGNATION FROM

Full Name (Last, First, Middle Initial)

WADE, JOHN, , ,

**C.**

Mailing Address 7031 MAYFLOWER PARK DRIVE

City

ZIONSVILLE

State

IL

Zip Code

46077

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AES

Occupation

OWNER

Receipt For: 2028

☐

Primary

☒

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 28 / 2025D D / Y Y Y Y Y  
28 / 2025Y Y Y Y Y  
2025

Transaction ID : AE445C7EE268645E597A

Amount of Each Receipt this Period

3500.00

☒ Memo Item

REDESIGNATION TO

**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  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 27 OF 86

<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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

WADE, JOHN, , ,

**A.**

Mailing Address 7031 MAYFLOWER PARK DRIVE

City

ZIONSVILLE

State

IL

Zip Code

46077

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AES

Occupation

OWNER

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : AC508AEF00C1248CC95F

Amount of Each Receipt this Period

7000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

159416.07

Date of Receipt

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

Transaction ID : A28A3382CEC3045E399C

Amount of Each Receipt this Period

7000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

WADE, MALLORY, , ,

**C.**Mailing Address 7031 MAYFLOWER PARK DR  
STE A

City

ZIONSVILLE

State

IL

Zip Code

46077

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AES

Occupation

FOUNDER

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : A36A35F09533948F3B83

Amount of Each Receipt this Period

7000.00

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

14000.00

**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)

PAGE 28 OF 86

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

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NAME OF COMMITTEE (In Full)

**MIKE CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

WADE, MALLORY, , ,

**A.**

Mailing Address 7031 MAYFLOWER PARK DR  
STE A

City  
ZIONSVILLE

State  
IL

Zip Code  
46077

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AES

Occupation  
FOUNDER

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 28 2025

Transaction ID : AC6F2365178CB44448B2

Amount of Each Receipt this Period

- 3500.00

☒ Memo Item

REDESIGNATION FROM

Full Name (Last, First, Middle Initial)

WADE, MALLORY, , ,

**B.**

Mailing Address 7031 MAYFLOWER PARK DR  
STE A

City  
ZIONSVILLE

State  
IL

Zip Code  
46077

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AES

Occupation  
FOUNDER

Receipt For: 2028

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 28 2025

Transaction ID : A85E7B09AE0FD4EB9B3E

Amount of Each Receipt this Period

3500.00

☒ Memo Item

REDESIGNATION TO

Full Name (Last, First, Middle Initial)

WICAL, LAWRENCE, , ,

**C.**

Mailing Address 824 MASSACHUSETTS DR.

City  
CINCINNATI

State  
OH

Zip Code  
45245-1704

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 17 2025

Transaction ID : A52993B048027429A921

Amount of Each Receipt this Period

25.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

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

25.00

# **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 29 OF 86

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

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NAME OF COMMITTEE (In Full)

**MIKE CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)  
WINRED

**A.** Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

**C** C00694323

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

159416.07

Date of Receipt

M M / D D / Y Y Y Y  
04 21 2025

Transaction ID : A37711C9535294281B05

Amount of Each Receipt this Period

25.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)  
WICAL, LAWRENCE, , ,

**B.** Mailing Address 824 MASSACHUSETTS DR.

City  
CINCINNATI

State  
OH

Zip Code  
45245-1704

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

NONE

RETIRED

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

775.00

Date of Receipt

M M / D D / Y Y Y Y  
05 17 2025

Transaction ID : AC6FAE6C46EC84669817

Amount of Each Receipt this Period

25.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)  
WINRED

**C.** Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

**C** C00694323

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

159416.07

Date of Receipt

M M / D D / Y Y Y Y  
05 26 2025

Transaction ID : AC73B49ABC7914472BD8

Amount of Each Receipt this Period

25.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

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

25.00

**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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

WICAL, LAWRENCE, , ,

**A.** Mailing Address 824 MASSACHUSETTS DR.City  
CINCINNATIState  
OHZip Code  
45245-1704FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 17 2025

Transaction ID : AD3224118094046DA8F1

Amount of Each Receipt this Period

25.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.** Mailing Address PO BOX 9891City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

159416.07

Date of Receipt

M M / D D / Y Y Y Y Y  
06 23 2025

Transaction ID : AE7178C16C0FA4B7DBBE

Amount of Each Receipt this Period

25.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

WODA, JEFFREY, , MR.,

**C.** Mailing Address 50 W BROAD ST  
APT 3603City  
COLUMBUSState  
OHZip Code  
43215-3309FEC ID number of contributing  
federal political committee.

C

Name of Employer  
THE WODA GROUPOccupation  
EXECUTIVE

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 27 2025

Transaction ID : A824635FFC50145F286F

Amount of Each Receipt this Period

1000.00

☐ Memo Item

1025.00

**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  
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 CRAPO FOR U.S. SENATE**

<b>A.</b> Full Name (Last, First, Middle Initial) WORLD FRESH MARKET, LLC			Date of Receipt M M / D D / Y Y Y Y Y 06 / 27 / 2025	
Mailing Address 1131 W BRYN MAWR AVE STE 2			Transaction ID : A83A13AD4563C49BA86A	
City CHICAGO	State IL	Zip Code 60660-4491	Amount of Each Receipt this Period 3500.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer		Occupation		
Receipt For: 2028 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 10000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) ALKHATIB, AHMAD, M., ,			Date of Receipt M M / D D / Y Y Y Y Y 06 / 27 / 2025	
Mailing Address 1131 W BRYN MAWR AVE STE 2			Transaction ID : A00D4273C8F024A72919	
City CHICAGO	State IL	Zip Code 60660-4491	Amount of Each Receipt this Period 3500.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer WORLD FRESH MARKET, LLC		Occupation PRINCIPAL		
Receipt For: 2028 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 3500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) WORLD FRESH MARKET, LLC			Date of Receipt M M / D D / Y Y Y Y Y 06 / 27 / 2025	
Mailing Address 1131 W BRYN MAWR AVE STE 2			Transaction ID : A19824B59936A4701AE3	
City CHICAGO	State IL	Zip Code 60660-4491	Amount of Each Receipt this Period 6500.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer		Occupation		
Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 10000.00		
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			10000.00	
<b>TOTAL</b> 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
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MIKE CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

ALKHATIB, AHMAD, M., ,

**A.**Mailing Address 1131 W BRYN MAWR AVE  
STE 2City  
CHICAGOState  
ILZip Code  
60660-4491FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WORLD FRESH MARKET, LLCOccupation  
PRINCIPAL

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 27 / 2025

Transaction ID : A20EE376D149641BE94B

Amount of Each Receipt this Period

3500.00

☒ Memo Item

PARTNERSHIP: WORLD FRESH MARKET, LLC

**B.**

Full Name (Last, First, Middle Initial)

ZOOK, SUSAN, STONER, ,

Mailing Address 5 WEST MASON AVENUE

City  
ALEXANDRIAState  
VAZip Code  
22301FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MASON STREET LLCOccupation  
FOUNDER

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A57B7546E2D23429C998

Amount of Each Receipt this Period

- 1500.00

☒ Memo Item

REDESIGNATION FROM

**C.**

Full Name (Last, First, Middle Initial)

ZOOK, SUSAN, STONER, ,

Mailing Address 5 WEST MASON AVENUE

City  
ALEXANDRIAState  
VAZip Code  
22301FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MASON STREET LLCOccupation  
FOUNDER

Receipt For: 2028

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : AE8FFCCC56A2D40B6B3D

Amount of Each Receipt this Period

1500.00

☒ Memo Item

REDESIGNATION TO

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

0.00

**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 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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

ZOOK, SUSAN, STONER, ,

**A.**

Mailing Address 5 WEST MASON AVENUE

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MASON STREET LLC

Occupation

FOUNDER

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : AB616E35DB67E4755959

Amount of Each Receipt this Period

3500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

159416.07

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		16		2025

Transaction ID : A05EBF3ED136440C285C

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

ZORC, BETH, , ,

**C.**

Mailing Address 5323 CARVEL RD

City

BETHESDA

State

MD

Zip Code

20816

FEC ID number of contributing  
federal political committee.

C

Name of Employer

IIB

Occupation

ATTORNEY

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AC4805340EA494603ADF

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)..... ▶

85398.50

**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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

**AMERICAN COUNCIL OF LIFE INSURERS PAC****A.**Mailing Address 101 CONSTITUTION AVE NW  
STE 700City  
WASHINGTONState  
DCZip Code  
20001-2133FEC ID number of contributing  
federal political committee.**C** C00147066

Name of Employer

Occupation

Receipt For: 2028

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		30		2025

Transaction ID : AE3A378D72C9C49938D3

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN FOREST & PAPER ASSN. PAC****B.**

Mailing Address 1111 19TH ST. NW STE 800

City  
WASHINGTONState  
DCZip Code  
20036FEC ID number of contributing  
federal political committee.**C** C00029348

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		08		2025

Transaction ID : A9C86EBEC47184332973

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN PROPERTY CASUALTY INSURANCE ASSOCIATION POLITICAL ACTION COMMITTEE (INSURING AMER****C.**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: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		27		2025

Transaction ID : AD992179A798F4B768ED

Amount of Each Receipt this Period

5000.00

☐ 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)  
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
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)

**MIKE CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

**AMERICAN ROAD & TRANSPORTATION BUILDERS ASSC. PAC**

Mailing Address 1010 MASSACHUSETTS AVE NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00118208

Name of Employer

Occupation

Receipt For: 2028

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	5	

Transaction ID : A07D1F65B1E0D487E8E1

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN SPORTFISHING ASSOCIATION POLITICAL ACTION COMMITTEE**Mailing Address 1001 N FAIRFAX ST  
STE 501

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.**C** C00249532

Name of Employer

Occupation

Receipt For: 2028

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	5	

Transaction ID : A21D27CCB8ECD4C8F8CA

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**ASSURED GUARANTY MUNICIPAL CORP. PAC**

Mailing Address 1633 BROADWAY

City

NEW YORK

State

NY

Zip Code

10019

FEC ID number of contributing  
federal political committee.**C** C00685958

Name of Employer

Occupation

Receipt For: 2028

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	5	

Transaction ID : A01ED1FEA3B204F3691A

Amount of Each Receipt this Period

5000.00

☐ 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)

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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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

BARCLAYS GROUP US PAC

**A.**

Mailing Address 2001 K ST NW

FL 11

City

WASHINGTON

State

DC

Zip Code

20006-1037

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

C00448852

Name of Employer

Occupation

Receipt For: 2028



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 27 2025

Transaction ID : ACCDF1A5DB81845AD9E4

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BECTION, DICKINSON AND COMPANY PAC

**B.**

Mailing Address 1 BECTION DR MC 085

City

FRANKLIN LAKES

State

NJ

Zip Code

07417

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

C00376582

Name of Employer

Occupation

Receipt For: 2028



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 27 2025

Transaction ID : AEDCCDCA0D136458CA79

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BHFS-E, PC PAC (BROWNSTEIN HYATT FARBER SCHRECK POLITICAL ACTION COMMITTEE)

**C.**

Mailing Address 675 15TH STREET

SUITE 2900

City

DENVER

State

CO

Zip Code

80202

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

C00390583

Name of Employer

Occupation

Receipt For: 2028



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 27 2025

Transaction ID : AB769F40A4F91413A9E5

Amount of Each Receipt this Period

2000.00

☐ 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 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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

**CAMBIA HEALTH SOLUTIONS INC PAC****A.**

Mailing Address 200 SW MARKET ST

PO BOX 1271/MS E12C

City

PORTLAND

State

OR

Zip Code

97201

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

C00252684

Name of Employer

Occupation

Receipt For: 2028

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2025D D / Y Y Y Y Y  
30 / 2025Y Y Y Y Y  
2025

Transaction ID : AA47A97613DAA4815B3F

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**CITADEL SECURITIES PAC****B.**

Mailing Address 700 K ST NW STE 810

City

WASHINGTON

State

DC

Zip Code

20001

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

C00815704

Name of Employer

Occupation

Receipt For: 2028

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 27 / 2025D D / Y Y Y Y Y  
27 / 2025Y Y Y Y Y  
2025

Transaction ID : AA4B12A1D658346A8BAA

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**COHNREZNICK LLP PAC****C.**

Mailing Address 1301 AVENUE OF THE AMERICAS

City

NEW YORK

State

NY

Zip Code

10019-6022

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

C00547216

Name of Employer

Occupation

Receipt For: 2028

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 27 / 2025D D / Y Y Y Y Y  
27 / 2025Y Y Y Y Y  
2025

Transaction ID : A9C9D632F6EA04DD8B1F

Amount of Each Receipt this Period

1000.00

☐ 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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

DIAGEO PAC

A.

Mailing Address 601 MASSACHUSETTS AVE NW  
STE 230City  
WASHINGTONState  
DCZip Code  
20001-5369FEC ID number of contributing  
federal political committee.

C C00034470

Name of Employer

Occupation

Receipt For: 2028

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	5	

Transaction ID : A1D54EF0495BB4063A7E

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DORSEY NATIONAL FUND

B.

Mailing Address 50 SOUTH SIXTH STREET

City  
MINNEAPOLISState  
MNZip Code  
55402-1540FEC ID number of contributing  
federal political committee.

C C00018945

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	5	

Transaction ID : ADAD7031D636F4B2EB01

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ELEVANCE HEALTH, INC. PAC (ELEVANCE HEALTH PAC)

C.

Mailing Address 1001 PENNSYLVANIA AVE NW  
STE 710City  
WASHINGTONState  
DCZip Code  
20004-2513FEC ID number of contributing  
federal political committee.

C C00197228

Name of Employer

Occupation

Receipt For: 2028

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	5	

Transaction ID : AB0A201D015B2442D842

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)..... ▶

7000.00

**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 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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

**ELEVANCE HEALTH, INC. PAC (ELEVANCE HEALTH PAC)****A.**Mailing Address 1001 PENNSYLVANIA AVE NW  
STE 710City  
WASHINGTONState  
DCZip Code  
20004-2513FEC ID number of contributing  
federal political committee.**C** C00197228

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		27		2025

Transaction ID : A63BAB5DC6BA44A18B8D

Amount of Each Receipt this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**GLOBAL MEDICAL RESPONSE INC. PAC****B.**Mailing Address 6363 S FIDDLERS GREEN CIR.  
14TH FLOORCity  
GREENWOOD VILLAGEState  
COZip Code  
80111FEC ID number of contributing  
federal political committee.**C** C00389585

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		08		2025

Transaction ID : A0ED80ADFBEE547AB809

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**GUIDEWELL MUTUAL HOLDING CORPORATION PAC (GUIDEWELL PAC)****C.**Mailing Address 4800 DEERWOOD CAMPUS PKWY  
DC3-4City  
JACKSONVILLEState  
FLZip Code  
32246-8317FEC ID number of contributing  
federal political committee.**C** C00161141

Name of Employer

Occupation

Receipt For: 2028

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		26		2025

Transaction ID : A454C249958F54D9BBE8

Amount of Each Receipt this Period

2500.00

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

9000.00

**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 CRAPO FOR U.S. SENATE****A.**

Full Name (Last, First, Middle Initial)

**GUIDEWELL MUTUAL HOLDING CORPORATION PAC (GUIDEWELL PAC)**

Mailing Address 4800 DEERWOOD CAMPUS PKWY

DC3-4

City  
JACKSONVILLEState  
FLZip Code  
32246-8317FEC ID number of contributing  
federal political committee.**C** C00161141

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		26		2025

Transaction ID : A2683FAB1EE7D4C249D7

Amount of Each Receipt this Period

2500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

**HF SINCLAIR PAC (DINO PAC)**

Mailing Address 2323 VICTORY AVE

STE 1400

City  
DALLASState  
TXZip Code  
75219-7695FEC ID number of contributing  
federal political committee.**C** C00342766

Name of Employer

Occupation

Receipt For: 2028

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID : A03C9AFEACC7A425E89B

Amount of Each Receipt this Period

5000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

**HF SINCLAIR PAC (DINO PAC)**

Mailing Address 2323 VICTORY AVE

STE 1400

City  
DALLASState  
TXZip Code  
75219-7695FEC ID number of contributing  
federal political committee.**C** C00342766

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID : AC97714C399654A7A9CB

Amount of Each Receipt this Period

5000.00

☐ 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  
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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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

INDEPENDENT INSURANCE AGENTS &amp; BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE (INSURP

**A.**

Mailing Address 20 F STREET, NW SUITE 610

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00022343

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		27		2025

Transaction ID : AFFBD8337EED947E2B71

Amount of Each Receipt this Period

5000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

INTEL CORPORATION PAC

Mailing Address 1155 F STREET NW  
STE. 1025

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.**C** C00125641

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		14		2025

Transaction ID : A6181B5270E184EFF9E2

Amount of Each Receipt this Period

2500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

JACKSON HOLDINGS LLC AND JACKSON NATIONAL LIFE (JACKSON PAC)

Mailing Address 1 CORPORATE WAY

City

LANSING

State

MI

Zip Code

48951

FEC ID number of contributing  
federal political committee.**C** C00254953

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		27		2025

Transaction ID : AAF37633B449A4703B82

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)  
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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

KUTAK ROCK LLP PAC

Mailing Address 1650 FARNAM ST

City  
OMAHAState  
NEZip Code  
68102-2102

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	5	

Transaction ID : A8A0ADB30D2A04F1F89C

FEC ID number of contributing  
federal political committee.

C C00160986

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 2121 CRYSTAL DR  
STE 100City  
ARLINGTONState  
VAZip Code  
22202-3706

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	5	

Transaction ID : A783BDAA41B5644FCB41

FEC ID number of contributing  
federal political committee.

C C00303024

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MARATHON PETROLEUM CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE (MPAC)

Mailing Address 539 S MAIN ST

City  
FINDLAYState  
OHZip Code  
45840-3229

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	5	

Transaction ID : AC75C3786BA944C8B911

FEC ID number of contributing  
federal political committee.

C C00496307

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

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

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NAME OF COMMITTEE (In Full)

**MIKE CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

**MOLINA HEALTHCARE, INC. PAC**

**A.**

Mailing Address 200 OCEANGATE  
STE 100

City  
LONG BEACH

State  
CA

Zip Code  
90802-4317

FEC ID number of contributing  
federal political committee.

**C** C00430256

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 27 2025

Transaction ID : A9B6EAE7E8A3042FA967

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NATIONAL ASSOCIATION OF WHOLESALER-DISTRIBUTORS PAC**

**B.**

Mailing Address 1325 G ST NW  
STE 1000

City  
WASHINGTON

State  
DC

Zip Code  
20005-3134

FEC ID number of contributing  
federal political committee.

**C** C00109306

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 27 2025

Transaction ID : A5EE1CBD52C504A848CC

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NIXON PEABODY LLP PAC**

**C.**

Mailing Address 1300 CLINTON SQUARE

City  
ROCHESTER

State  
NY

Zip Code  
14604

FEC ID number of contributing  
federal political committee.

**C** C00404178

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 27 2025

Transaction ID : AB61CC38354324C62BAC

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)..... ►

6500.00

**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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

NOMURA HOLDING AMERICA INC, POLITICAL ACTION COMMITTEE (NOMURAPAC)

Mailing Address 1101 PENNSYLVANIA AVENUE, NW  
SUITE 515City  
WASHINGTONState  
DCZip Code  
20004-2528FEC ID number of contributing  
federal political committee.

C C00491951

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 27 2025

Transaction ID : ACBC3828C3F5548FFB5E

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PAIN FREE AMERICA, THE PAC OF ATHLETICO HOLDINGS, LLC

Mailing Address 2122 YORK RD  
STE 300City  
OAK BROOKState  
ILZip Code  
60523-1925FEC ID number of contributing  
federal political committee.

C C00760660

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 27 2025

Transaction ID : AB1F328F830204D37B3F

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RBC USA HOLDCO CORPORATION FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 3 WORLD FINANCIAL CTR  
200 VESEY STCity  
NEW YORKState  
NYZip Code  
10281-1019FEC ID number of contributing  
federal political committee.

C C00517052

Name of Employer

Occupation

Receipt For: 2028

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 27 2025

Transaction ID : A01233A71E44940E695C

Amount of Each Receipt this Period

2500.00

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

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NAME OF COMMITTEE (In Full)

**MIKE CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

**RBC USA HOLDCO CORPORATION FEDERAL POLITICAL ACTION COMMITTEE**

**A.**

Mailing Address 3 WORLD FINANCIAL CTR  
200 VESEY ST

City  
NEW YORK

State  
NY

Zip Code  
10281-1019

FEC ID number of contributing  
federal political committee.

**C** C00517052

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 27 2025

**Transaction ID : A24145EEAC8734C5AA3A**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**SECURITIES INDUSTRY AND FINANCIAL MARKETS ASSOCIATION POLITICAL ACTION COMMITTEE**

**B.**

Mailing Address 1101 NEW YORK AVE NW  
FL 8

City  
WASHINGTON

State  
DC

Zip Code  
20005-4279

FEC ID number of contributing  
federal political committee.

**C** C00431312

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 27 2025

**Transaction ID : AB64F5E833633455A910**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**SIDLEY AUSTIN LLP GOOD GOVERNMENT FUND**

**C.**

Mailing Address 787 SEVENTH AVE

City  
NEW YORK

State  
NY

Zip Code  
10019

FEC ID number of contributing  
federal political committee.

**C** C00351270

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 27 2025

**Transaction ID : AC4EB8C1F6995483394F**

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)..... ►

8500.00

**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 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 CRAPO FOR U.S. SENATE**

<b>A.</b> Full Name (Last, First, Middle Initial) SUNRUN INC PAC (SUNRUN PAC)			Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 27 / 2025	
Mailing Address 600 CALIFORNIA ST STE 1800			Transaction ID : A13B2D891D891442D9D0	
City SAN FRANCISCO	State CA	Zip Code 94108-2704	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00489302		Memo Item <input type="checkbox"/>		
Name of Employer		Occupation		
Receipt For: 2028 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) TEXTRON INC PAC			Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 08 / 2025	
Mailing Address 40 WESTMINISTER ST.			Transaction ID : A8EFBC00544C34DADA8A	
City PROVIDENCE	State RI	Zip Code 02903	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00123612		Memo Item <input type="checkbox"/>		
Name of Employer		Occupation		
Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 3500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) TEXTRON INC PAC			Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 27 / 2025	
Mailing Address 40 WESTMINISTER ST.			Transaction ID : A09842052573042B68E4	
City PROVIDENCE	State RI	Zip Code 02903	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C C00123612		Memo Item <input type="checkbox"/>		
Name of Employer		Occupation		
Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 8500.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....▶			6500.00	
<b>TOTAL</b> 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 47 OF 86

<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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

TEXTRON INC PAC

A.

Mailing Address 40 WESTMINSTER ST.

City  
PROVIDENCEState  
RIZip Code  
02903FEC ID number of contributing  
federal political committee.

C C00123612

Name of Employer

Occupation

Receipt For: 2028

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 27 2025

Transaction ID : ACCE7ED42B20641FBA99

Amount of Each Receipt this Period

3500.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

3500.00

117000.00

**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 48 OF 86

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

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NAME OF COMMITTEE (In Full)

**MIKE CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

**ZIONS BANK MONEY MARKET - BOISE****A.**

Mailing Address 890 W MAIN ST

City  
BOISEState  
IDZip Code  
83702-5899FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2028

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

58311.74

Date of Receipt

M M	D D	Y Y Y Y
04	04	2025

Transaction ID : A96EA01F9A9F9460AAA4

Amount of Each Receipt this Period

1771.11

☐ Memo Item

BANK INTEREST

**B.**

Full Name (Last, First, Middle Initial)

**ZIONS BANK MONEY MARKET - BOISE**

Mailing Address 890 W MAIN ST

City  
BOISEState  
IDZip Code  
83702-5899FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2028

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

60286.19

Date of Receipt

M M	D D	Y Y Y Y
05	06	2025

Transaction ID : A73754D0DDD304BF6BF0

Amount of Each Receipt this Period

1974.45

☐ Memo Item

BANK INTEREST

**C.**

Full Name (Last, First, Middle Initial)

**ZIONS BANK MONEY MARKET - BOISE**

Mailing Address 890 W MAIN ST

City  
BOISEState  
IDZip Code  
83702-5899FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2028

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

62246.40

Date of Receipt

M M	D D	Y Y Y Y
06	06	2025

Transaction ID : A05E400FED5AB4F49893

Amount of Each Receipt this Period

1960.21

☐ Memo Item

BANK INTEREST

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

5705.77

5705.77



**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 49 OF 86

<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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. ACUITY**

Mailing Address 2800 S TAYLOR DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		13		2025

City  
SHEBOYGANState  
WIZip Code  
53081-8474

FEC Identification Number

C

Purpose of Disbursement  
INSURANCE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

743.00

Transaction ID : B3804DBD1E519496F9FF

☐ 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:

Full Name (Last, First, Middle Initial)

**B. AMAZON.COM**

Mailing Address 2654 N US HIGHWAY 169

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2025

City  
COFFEYVILLEState  
KSZip Code  
67337-9254

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

29.67

Transaction ID : B047A526070A649E89E5

☐ 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:

Full Name (Last, First, Middle Initial)

**C. AMAZON.COM**

Mailing Address 2654 N US HIGHWAY 169

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2025

City  
COFFEYVILLEState  
KSZip Code  
67337-9254

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

15.09

Transaction ID : B66425DC1F7864D23BD7

☐ 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).....▶

787.76

**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 50 OF 86

<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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. AMAZON.COM**

Mailing Address 2654 N US HIGHWAY 169

City  
COFFEYVILLEState  
KSZip Code  
67337-9254Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

105.99

Transaction ID : B6EAEAC5F4C2A4501B64

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD

City  
FORT WORTHState  
TXZip Code  
76155-2605Purpose of Disbursement  
AIRFARECategory/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

377.59

Transaction ID : BFB9847E1B93441D5971

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**Mailing Address 555 HILTON AVE  
STE 106City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

661.20

Transaction ID : BFDDF123BA75A40F4ACD

☐ Memo Item

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

1144.78

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 51 OF 86

<input checked="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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. ANEDOT**Mailing Address 555 HILTON AVE  
STE 106City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

60.30

Transaction ID : B7893E9687B7E41CA8F5

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**Mailing Address 555 HILTON AVE  
STE 106City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

225.50

Transaction ID : B1A534A890DFD49ECB24

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ARISTOTLE INTERNATIONAL, INC.**

Mailing Address 205 PENNSYLVANIA AVE SE

City  
WASHINGTONState  
DCZip Code  
20003-1164Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5700.00

Transaction ID : BDA76F94AEFFC4B61998

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

5985.80

**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)

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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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. BARRACKS ROW STRATEGIES**

Mailing Address 5263 POCOSIN LN

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2025

City  
ALEXANDRIAState  
VAZip Code  
22304-8675

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Amount of Each Disbursement this Period

11374.10

Transaction ID : B6608B13394C744A8834

☐ Memo Item

Candidate Name

Category/  
Type

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:

Full Name (Last, First, Middle Initial)

**B. BLACKLANE**

Mailing Address 929 COLORADO AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2025

City  
SANTA MONICAState  
CAZip Code  
90401-2716

FEC Identification Number

C

Purpose of Disbursement  
EVENT TRANSPORTATION

001

Amount of Each Disbursement this Period

550.72

Transaction ID : B6ADF2ED7A4B049ECB30

☐ Memo Item

Candidate Name

Category/  
Type

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:

Full Name (Last, First, Middle Initial)

**C. BLACKLANE**

Mailing Address 929 COLORADO AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		28		2025

City  
SANTA MONICAState  
CAZip Code  
90401-2716

FEC Identification Number

C

Purpose of Disbursement  
EVENT TRANSPORTATION

001

Amount of Each Disbursement this Period

326.91

Transaction ID : B3EBB015E64484CF2B61

☐ Memo Item

Candidate Name

Category/  
Type

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).....▶

12251.73

**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 53 OF 86

<input checked="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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. BLACKLANE**

Mailing Address 929 COLORADO AVE

City  
SANTA MONICAState  
CAZip Code  
90401-2716Purpose of Disbursement  
EVENT TRANSPORTATION

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

479.70

Transaction ID : B1112A412CA614C5BAFD

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BONNEVILLE COUNTY REPUBLICAN COMMITTEE**

Mailing Address 175 LEESBURG LN

City  
IDAHO FALLSState  
IDZip Code  
83404Purpose of Disbursement  
EVENT TICKETS

Candidate Name

BONNEVILLE COUNTY REPUBLICAN COMMITTEE

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B4936352CCC06485387A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CITICARDS - THE LAKES**

Mailing Address PO BOX 6000

City  
THE LAKESState  
NVZip Code  
88901-0001Purpose of Disbursement  
SEE MEMO

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1474.23

Transaction ID : B033712CC69D143A6828

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

2953.93

**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 54 OF 86

<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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. DELTA AIRLINES**

Mailing Address 1600 AVIATION BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2025

City  
ATLANTAState  
GAZip Code  
30320

FEC Identification Number

C

Purpose of Disbursement  
AIRFARE

001

Amount of Each Disbursement this Period

1159.18

Transaction ID : BFFB7CAF20D44586BC0

☒ Memo Item

Candidate Name

Category/  
Type

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:

Full Name (Last, First, Middle Initial)

**B. STOR-IT**

Mailing Address 1435 W MALAD ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2025

City  
BOISEState  
IDZip Code  
83705-4481

FEC Identification Number

C

Purpose of Disbursement  
STORAGE

001

Amount of Each Disbursement this Period

282.00

Transaction ID : BAE9392031FEE4A668AC

☒ Memo Item

Candidate Name

Category/  
Type

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:

Full Name (Last, First, Middle Initial)

**C. CITICARDS - THE LAKES**

Mailing Address PO BOX 6000

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2025

City  
THE LAKESState  
NVZip Code  
88901-0001

FEC Identification Number

C

Purpose of Disbursement  
SEE MEMO

001

Amount of Each Disbursement this Period

1313.33

Transaction ID : B7BF751359A2E480A8D6

☐ Memo Item

Candidate Name

Category/  
Type

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).....▶

1313.33

**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 55 OF 86

<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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. PANERA BREAD**

Mailing Address 1150 W MYRTLE ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2025

City  
BOISEState  
IDZip Code  
83702-6900

FEC Identification Number

C

Purpose of Disbursement  
MEETING EXPENSE

001

Amount of Each Disbursement this Period

85.46

Transaction ID : B0145525473394BFEB74

☒ Memo Item

Candidate Name

Category/  
Type

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:

Full Name (Last, First, Middle Initial)

**B. NESPRESSO USA INC.**Mailing Address 112 W 34TH ST  
FL 5

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2025

City  
NEW YORKState  
NYZip Code  
10120-0703

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUPPLIES

001

Amount of Each Disbursement this Period

226.31

Transaction ID : BF2492C63070E49BFB80

☒ Memo Item

Candidate Name

Category/  
Type

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:

Full Name (Last, First, Middle Initial)

**C. COSTCO - BOISE**

Mailing Address 2051 S COLE RD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2025

City  
BOISEState  
IDZip Code  
83709-2815

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUPPLIES

001

Amount of Each Disbursement this Period

347.65

Transaction ID : B8229980377444263849

☒ Memo Item

Candidate Name

Category/  
Type

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).....▶

0.00

**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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. CAFE ZUPAS**

Mailing Address 129 BROADWAY AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2025

City  
BOISEState  
IDZip Code  
83702-7210

FEC Identification Number

C

Purpose of Disbursement  
MEETING EXPENSE

001

Amount of Each Disbursement this Period

83.04

Transaction ID : B783983ED2DCF4086A97

☒ Memo Item

Candidate Name

Category/  
Type

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:

Full Name (Last, First, Middle Initial)

**B. AMAZON.COM**

Mailing Address 2654 N US HIGHWAY 169

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2025

City  
COFFEYVILLEState  
KSZip Code  
67337-9254

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUPPLIES

001

Amount of Each Disbursement this Period

570.87

Transaction ID : B99705992A72C4CF89B5

☒ Memo Item

Candidate Name

Category/  
Type

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:

Full Name (Last, First, Middle Initial)

**C. COMCAST CABLE**

Mailing Address PO BOX 3005

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		18		2025

City  
SOUTHEASTERNState  
PAZip Code  
19398-3005

FEC Identification Number

C

Purpose of Disbursement  
INTERNET

001

Amount of Each Disbursement this Period

712.35

Transaction ID : B5C9EEB79BD4A4C37879

☐ Memo Item

Candidate Name

Category/  
Type

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).....▶

712.35

**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 57 OF 86

<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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. DELTA AIRLINES**

Mailing Address 1600 AVIATION BLVD

City  
ATLANTAState  
GAZip Code  
30320Purpose of Disbursement  
AIRFARE

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5772.42

Transaction ID : B5E05379AFD864FCE966

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DELTA AIRLINES**

Mailing Address 1600 AVIATION BLVD

City  
ATLANTAState  
GAZip Code  
30320Purpose of Disbursement  
AIRFARE

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2364.66

Transaction ID : B514B144376724CEA8DE

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DELTA AIRLINES**

Mailing Address 1600 AVIATION BLVD

City  
ATLANTAState  
GAZip Code  
30320Purpose of Disbursement  
AIRFARE

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1328.49

Transaction ID : B2DE27F377B984D52A6D

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

9465.57

**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="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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. DELTA AIRLINES**

Mailing Address 1600 AVIATION BLVD

City  
ATLANTAState  
GAZip Code  
30320Purpose of Disbursement  
AIRFARE

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5137.39

Transaction ID : BA5300A91CCF849B595C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DELTA AIRLINES**

Mailing Address 1600 AVIATION BLVD

City  
ATLANTAState  
GAZip Code  
30320Purpose of Disbursement  
AIRFARE

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

139.67

Transaction ID : B7D03BFFFE9BB44EE9B1

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DELTA AIRLINES**

Mailing Address 1600 AVIATION BLVD

City  
ATLANTAState  
GAZip Code  
30320Purpose of Disbursement  
AIRFARE

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

184.37

Transaction ID : B4D327536E50F490FB17

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

5461.43

**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 59 OF 86

<input checked="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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. DELUXE**

Mailing Address 3680 VICTORIA ST N

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2025

City  
SAINT PAULState  
MNZip Code  
55126-2906

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

578.72

Transaction ID : B56C6A08AD88E40449CA

☐ 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:

Full Name (Last, First, Middle Initial)

**B. DEMOCRACY ENGINE**

Mailing Address 416 FLORIDA AVE NW, #26418

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		27		2025

City  
WASHINGTONState  
DCZip Code  
20001-0516

FEC Identification Number

C

Purpose of Disbursement  
TRANSACTION FEES

Candidate Name

001  
Category/  
Type

Amount of Each Disbursement this Period

200.00

Transaction ID : B7217AA95C13F485E9FD

☐ 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:

Full Name (Last, First, Middle Initial)

**C. DEMOCRACY ENGINE**

Mailing Address 416 FLORIDA AVE NW, #26418

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2025

City  
WASHINGTONState  
DCZip Code  
20001-0516

FEC Identification Number

C

Purpose of Disbursement  
TRANSACTION FEES

Candidate Name

001  
Category/  
Type

Amount of Each Disbursement this Period

100.00

Transaction ID : BA2AF04B672ED4D94880

☐ 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).....▶

878.72

**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 60 OF 86

<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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. ELLIOTT GROUP CONSULTING LLC**Mailing Address 1174 VILLAGE CREEK LN  
APT 3City  
MOUNT PLEASANTState  
SCZip Code  
29464-6164Purpose of Disbursement  
FIELD CONSULTING

001

Category/  
Type

Candidate Name

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : B31FB198A495C425F855

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FAIRMONT HOTEL**

Mailing Address 950 MASON ST

City  
SAN FRANCISCOState  
CAZip Code  
94108-6000Purpose of Disbursement  
LODGINGCategory/  
Type

Candidate Name

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

541.48

Transaction ID : B990CF2F835B34291881

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FEDEX CORPORATION**

Mailing Address 101 CONSTITUTION AVE NW

City  
WASHINGTONState  
DCZip Code  
20001-2140Purpose of Disbursement  
SHIPPING

001

Category/  
Type

Candidate Name

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

48.78

Transaction ID : B717DDC53E46B40E59EE

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

3090.26

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

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

PAGE 61 OF 86

<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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. FEDEX CORPORATION**

Mailing Address 101 CONSTITUTION AVE NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		02		2025

City  
WASHINGTONState  
DCZip Code  
20001-2140

FEC Identification Number

C

Purpose of Disbursement  
SHIPPING

001

Amount of Each Disbursement this Period

10.00

Transaction ID : B5B0161236D7E459EBB2

☐ Memo Item

Candidate Name

Category/  
Type

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:

Full Name (Last, First, Middle Initial)

**B. FEDEX CORPORATION**

Mailing Address 101 CONSTITUTION AVE NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		16		2025

City  
WASHINGTONState  
DCZip Code  
20001-2140

FEC Identification Number

C

Purpose of Disbursement  
SHIPPING

001

Amount of Each Disbursement this Period

10.00

Transaction ID : B12DB46718E7449F8BC2

☐ Memo Item

Candidate Name

Category/  
Type

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:

Full Name (Last, First, Middle Initial)

**C. FEDEX CORPORATION**

Mailing Address 101 CONSTITUTION AVE NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2025

City  
WASHINGTONState  
DCZip Code  
20001-2140

FEC Identification Number

C

Purpose of Disbursement  
SHIPPING

001

Amount of Each Disbursement this Period

10.00

Transaction ID : B8D2BB963208B4983A7D

☐ Memo Item

Candidate Name

Category/  
Type

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).....▶

30.00

**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 62 OF 86

<input checked="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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. FEDEX CORPORATION**

Mailing Address 101 CONSTITUTION AVE NW

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20001-2140

FEC Identification Number

C

Purpose of Disbursement  
SHIPPING

001

Amount of Each Disbursement this Period

10.00

Transaction ID : B4565F2A127F544D78A8

☐ Memo Item

Candidate Name

Category/  
Type

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:

Full Name (Last, First, Middle Initial)

**B. FEDEX CORPORATION**

Mailing Address 101 CONSTITUTION AVE NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2025

City  
WASHINGTONState  
DCZip Code  
20001-2140

FEC Identification Number

C

Purpose of Disbursement  
SHIPPING

001

Amount of Each Disbursement this Period

10.00

Transaction ID : B27DD686E56974C639DC

☐ Memo Item

Candidate Name

Category/  
Type

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:

Full Name (Last, First, Middle Initial)

**C. GODADDY.COM - MORENCI**

Mailing Address 8564 PO BOX

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2025

City  
MORENCIState  
AZZip Code  
85540

FEC Identification Number

C

Purpose of Disbursement  
WEB SERVICES

001

Amount of Each Disbursement this Period

44.34

Transaction ID : B0A00C9D8B8B64421B7F

☐ Memo Item

Candidate Name

Category/  
Type

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).....▶

64.34

**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 86

<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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. HARRELL, PARKER, , ,**

Mailing Address 19404 HOLLOW LN

City  
REDDINGState  
CAZip Code  
96003-9527Purpose of Disbursement  
SEE MEMO

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1654.68

Transaction ID : B0AED038878034791A6D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ATKINSONS MARKETS**

Mailing Address 93 E CROY ST

City  
HAILEYState  
IDZip Code  
83333-8407Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

37.11

Transaction ID : BA612146D08EB4A0E910

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. HARRELL, PARKER, , ,**

Mailing Address 19404 HOLLOW LN

City  
REDDINGState  
CAZip Code  
96003-9527Purpose of Disbursement  
MILEAGE REIMBURSEMENT

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

408.16

Transaction ID : B64CCED316CDA4A2DB43

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

1654.68

**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)

PAGE 64 OF 86

<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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD RD

City  
BETHESDAState  
MDZip Code  
20817-1102Purpose of Disbursement  
EVENT ROOM RENTAL

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

220.32

Transaction ID : BD4D51605E40A459EBE4

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. COSTCO - BOISE**

Mailing Address 2051 S COLE RD

City  
BOISEState  
IDZip Code  
83709-2815Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

170.62

Transaction ID : BD360756C658846FEA34

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINCO FOODS - BOISE**

Mailing Address 8200 W FAIRVIEW AVE

City  
BOISEState  
IDZip Code  
83704-8313Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

41.49

Transaction ID : BF6BFEA31EBB7448F821

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

0.00

**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 86

<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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. HARRELL, PARKER, , ,**

Mailing Address 19404 HOLLOW LN

City  
REDDINGState  
CAZip Code  
96003-9527Purpose of Disbursement  
SALARY

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

554.10

Transaction ID : B87775C1BA640464FBFF

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HARRELL, PARKER, , ,**

Mailing Address 19404 HOLLOW LN

City  
REDDINGState  
CAZip Code  
96003-9527Purpose of Disbursement  
SALARY

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

554.10

Transaction ID : B0852F664C2F94BE69B7

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HARRELL, PARKER, , ,**

Mailing Address 19404 HOLLOW LN

City  
REDDINGState  
CAZip Code  
96003-9527Purpose of Disbursement  
SALARY

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

554.10

Transaction ID : B5A15ECF8BC2E49FA9C6

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

1662.30

**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 66 OF 86

<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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. HOSTEK**Mailing Address 1648 TAYLOR RD  
# 355City  
PORT ORANGEState  
FLZip Code  
32128-6753Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

38.03

Transaction ID : B20BA2DB5511040BBA6F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HOSTEK**Mailing Address 1648 TAYLOR RD  
# 355City  
PORT ORANGEState  
FLZip Code  
32128-6753Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

38.03

Transaction ID : BBAD760F9DE204E07A5D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HOSTEK**Mailing Address 1648 TAYLOR RD  
# 355City  
PORT ORANGEState  
FLZip Code  
32128-6753Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

38.03

Transaction ID : B74ED100765F74352985

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

114.09

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

X	17		18		19a		19b
	20a		20b		20c		21

MIKE CRAPO FOR U.S. SENATE

### A. IDAHO STATE INSURANCE FUND

C \_\_\_\_\_

219.00

Memo Item

**B. IDAHO.GOV**

Three digital display units are shown, each with a different format. The first unit shows 'MM' at the top and '04' at the bottom. The second unit shows 'DD' at the top and '01' at the bottom. The third unit shows 'YYYY' at the top and '2025' at the bottom. The units are separated by slashes.

C \_\_\_\_\_

421.94

Memo Item

District:

### C. INDY BLACK CAR

MM / DD / YYYY

C

540.00

Memo Item

District:

1180.94





**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 69 OF 86

<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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. INTERNAL REVENUE SERVICE - OGDEN**

Mailing Address 1973 N RULON WHITE BLVD

Date of Disbursement

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

City  
OGDENState  
UTZip Code  
84201-1000

FEC Identification Number

C

Purpose of Disbursement  
TAXES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3.60

Transaction ID : B8332A9DD6B8C484587C

☐ 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:

Full Name (Last, First, Middle Initial)

**B. INTERNAL REVENUE SERVICE - OGDEN**

Mailing Address 1973 N RULON WHITE BLVD

Date of Disbursement

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

City  
OGDENState  
UTZip Code  
84201-1000

FEC Identification Number

C

Purpose of Disbursement  
TAXES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

91.80

Transaction ID : BBE75B313E3104D0C974

☐ 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:

Full Name (Last, First, Middle Initial)

**C. INTERNAL REVENUE SERVICE - OGDEN**

Mailing Address 1973 N RULON WHITE BLVD

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

City  
OGDENState  
UTZip Code  
84201-1000

FEC Identification Number

C

Purpose of Disbursement  
TAXES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3.60

Transaction ID : B2CC3670A9DC94812A31

☐ 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).....▶

99.00

**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 70 OF 86

<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 CRAPO FOR U.S. SENATE**

Full Name (Last, First, Middle Initial)

**A. INTERNAL REVENUE SERVICE - OGDEN**

Mailing Address 1973 N RULON WHITE BLVD

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

City  
OGDENState  
UTZip Code  
84201-1000

FEC Identification Number

C

Purpose of Disbursement  
TAXES

001

Candidate Name

Amount of Each Disbursement this Period

91.80

Transaction ID : B3C2036B1AC254C57A86

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. MARRIOTT HOTELS**

Mailing Address 310 W BEARCAT DR

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	2	5

City  
SOUTH SALT LAKEState  
UTZip Code  
84115-2518

FEC Identification Number

C

Purpose of Disbursement  
LODGING

Candidate Name

Amount of Each Disbursement this Period

644.20

Transaction ID : BC7681B32135B44E1BB1

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. MARSHALL, SAMANTHA, , ,**

Mailing Address 847 15TH AVE E

Date of Disbursement

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

City  
JEROMEState  
IDZip Code  
83338-2145

FEC Identification Number

C

Purpose of Disbursement  
SEE MEMO

001

Candidate Name

Amount of Each Disbursement this Period

634.90

Transaction ID : BDD1C4491FF5B42BE820

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

1370.90

**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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

A. MARSHALL, SAMANTHA, , ,

Mailing Address 847 15TH AVE E

City  
JEROMEState  
IDZip Code  
83338-2145Purpose of Disbursement  
MILEAGE REIMBURSEMENT

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

109.90

Transaction ID : B671A3750922E413C908

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. JEROME COUNTY REPUBLICAN PARTY

Mailing Address 1135 VALLEY RD. SO.

City  
EDENState  
IDZip Code  
83325Purpose of Disbursement  
EVENT TICKETS

001

Candidate Name

JEROME COUNTY REPUBLICAN PARTY

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

265.00

Transaction ID : B2F4CD65D11644ACB98C

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. NYTIMES

Mailing Address 620 EIGHTH AVE

City  
NEW YORKState  
NYZip Code  
10018Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : B19601C0C54254DAF8E9

☐ Memo Item

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

20.00

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 72 OF 86

<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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. NYTIMES**

Mailing Address 620 EIGHTH AVE

City  
NEW YORKState  
NYZip Code  
10018Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : B48280662B5D24614867

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NYTIMES**

Mailing Address 620 EIGHTH AVE

City  
NEW YORKState  
NYZip Code  
10018Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : BAF3CB1F91D9F42AF97F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PAYPAL**

Mailing Address 2211 N 1ST ST

City  
SAN JOSEState  
CAZip Code  
95131-2021Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

101.64

Transaction ID : B77423B67D8414E2E935

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

141.64

**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 73 OF 86

<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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. PROFESSIONAL DATA SERVICES**

Mailing Address 824 S MILLEDGE AVE STE 101

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	2	5

City  
ATHENSState  
GAZip Code  
30606

FEC Identification Number

C

Purpose of Disbursement  
COMPLIANCE CONSULTING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

5180.42

Transaction ID : B4CD5C686487F4490B01

☐ 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:

Full Name (Last, First, Middle Initial)

**B. QUICKBOOKS - DENVER**

Mailing Address PO BOX 24789

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	2	5

City  
DENVERState  
COZip Code  
80224-0789

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

8.00

Transaction ID : B1B87A6816AF0419BB65

☐ 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:

Full Name (Last, First, Middle Initial)

**C. QUICKBOOKS - DENVER**

Mailing Address PO BOX 24789

Date of Disbursement

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

City  
DENVERState  
COZip Code  
80224-0789

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

8.00

Transaction ID : B256ED5E8A02F473C9DE

☐ 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).....▶

5196.42

**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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. QUICKBOOKS - DENVER**

Mailing Address PO BOX 24789

City  
DENVERState  
COZip Code  
80224-0789Purpose of Disbursement  
PAYROLL FEES

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

8.00

Transaction ID : B68C7EC8AC26B47758C4

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SELOSKE, LETICIA, , ,**

Mailing Address 1017 CEDAR AVE

City  
LEWISTONState  
IDZip Code  
83501-5421Purpose of Disbursement  
SEE MEMO

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

515.70

Transaction ID : B3C94D755237D4F95A55

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SELOSKE, LETICIA, , ,**

Mailing Address 1017 CEDAR AVE

City  
LEWISTONState  
IDZip Code  
83501-5421Purpose of Disbursement  
MILEAGE REIMBURSEMENT

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

210.70

Transaction ID : BF6B840C94FC3443E822

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

523.70

**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="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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. SENATE RESTAURANT - WASHINGTON**

Mailing Address 1ST &amp; C STS NE # C

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20510-0001

FEC Identification Number

C

Purpose of Disbursement  
MEETING EXPENSE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

331.20

Transaction ID : BBC66795D39E740B997B

☐ 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:

Full Name (Last, First, Middle Initial)

**B. SENATE RESTAURANT - WASHINGTON**

Mailing Address 1ST &amp; C STS NE # C

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20510-0001

FEC Identification Number

C

Purpose of Disbursement  
MEETING EXPENSE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

138.00

Transaction ID : B3738B6EA81E64C89868

☐ 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:

Full Name (Last, First, Middle Initial)

**C. SIMPLISAFE**Mailing Address 100 SUMMER ST  
STE 300

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	2	5

City  
BOSTONState  
MAZip Code  
02110-2151

FEC Identification Number

C

Purpose of Disbursement  
SECURITY EXPENSE

Candidate Name

Category/  
Type  
001

Amount of Each Disbursement this Period

894.63

Transaction ID : B56618EC15E7B4705915

☐ 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).....▶

1363.83

**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)

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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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. SMITH, JULIANN, , ,**

Mailing Address 1665 CLUB LANE

City  
HAYDENState  
IDZip Code  
83835-9536Purpose of Disbursement  
REIMBURSE EVENT TICKETS-NO ITEMIZATION NECESSARY

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

77.55

Transaction ID : BA9F51D7D24814D2FB04

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SMITH, JULIANN, , ,**

Mailing Address 1665 CLUB LANE

City  
HAYDENState  
IDZip Code  
83835-9536Purpose of Disbursement  
REIMBURSE EVENT TICKETS-NO ITEMIZATION NECESSARY

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

45.00

Transaction ID : BE772EB8DB7C64F42905

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SOUTHWEST AIRLINES - DALLAS**

Mailing Address PO BOX 36649

City  
DALLASState  
TXZip Code  
75235-1649Purpose of Disbursement  
AIRFARE

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

317.48

Transaction ID : B9F69500829FF44378D6

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

440.03

**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 77 OF 86

<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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. SPARKLIGHT**

Mailing Address 1525 SHERRY AVE

Date of Disbursement

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

City  
IDAHO FALLSState  
IDZip Code  
83401-4849

FEC Identification Number

C

Purpose of Disbursement  
INTERNET

001

Amount of Each Disbursement this Period

406.52

Transaction ID : B4BFD9AA4FB2342D2B62

☐ Memo Item

Candidate Name

Category/  
Type

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:

Full Name (Last, First, Middle Initial)

**B. STAPLES - WASHINGTON**

Mailing Address 1250 H ST NW

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20005-3952

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUPPLIESCategory/  
Type

Amount of Each Disbursement this Period

12.19

Transaction ID : BB2CBBF40A04E4E959DE

☐ Memo Item

Candidate Name

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:

Full Name (Last, First, Middle Initial)

**C. THE CHARLES GROUP**Mailing Address 2907 BUTTERFIELD RD  
STE 150

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		28		2025

City  
OAK BROOKState  
ILZip Code  
60523-8002

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Amount of Each Disbursement this Period

2100.00

Transaction ID : B43F11573279F4DB0A63

☐ Memo Item

Candidate Name

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).....▶

2518.71

**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 78 OF 86

<input checked="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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 1455 MARKET ST

City  
SAN FRANCISCOState  
CAZip Code  
94103-1331Purpose of Disbursement  
TRAVEL EXPENSE

001

Category/  
Type

Candidate Name

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

19.29

Transaction ID : B5361D3D7CA914224B5E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. UNITED AIRLINES**

Mailing Address PO BOX 66100

City  
CHICAGOState  
ILZip Code  
60666Purpose of Disbursement  
AIRFARE

001

Category/  
Type

Candidate Name

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

968.48

Transaction ID : B2176B68A634A4429A98

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. VERIZON**

Mailing Address PO BOX 660720

City  
DALLASState  
TXZip Code  
75266-0720Purpose of Disbursement  
TELEPHONE/INTERNET

001

Category/  
Type

Candidate Name

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

781.58

Transaction ID : B5C926AE930194220A8E

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

1769.35

**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 79 OF 86

<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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. VERIZON**

Mailing Address PO BOX 660720

City  
DALLASState  
TXZip Code  
75266-0720Purpose of Disbursement  
TELEPHONE/INTERNET

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

781.58

Transaction ID : B1DC0D962FF83479490C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WHEELER, SUSAN, , ,**

Mailing Address 1200 N GARFIELD ST, APT 1207

City  
ARLINGTONState  
VAZip Code  
22201-6830Purpose of Disbursement  
SEE MEMO

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1048.97

Transaction ID : BA8B7A8A2A3FF434683E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LYON PLACE**

Mailing Address 1200 N GARFIELD ST

City  
ARLINGTONState  
VAZip Code  
22201-6816Purpose of Disbursement  
STORAGE

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

450.00

Transaction ID : B78D7C2BB6755479E925

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

1830.55

**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 80 OF 86

<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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 1455 MARKET ST

City  
SAN FRANCISCOState  
CAZip Code  
94103-1331Purpose of Disbursement  
TRAVEL EXPENSE

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

426.27

Transaction ID : B08DFF83C571D493EA5D

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. VERIZON**

Mailing Address PO BOX 660720

City  
DALLASState  
TXZip Code  
75266-0720Purpose of Disbursement  
TELEPHONE/INTERNET

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

172.70

Transaction ID : BA556CB58B2664C87949

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.39

Transaction ID : BFA91B48100174704A66

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

0.39

**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 81 OF 86

<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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.59

Transaction ID : B06BFEABADA5C4642A4A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.63

Transaction ID : B5EA0C86BFF804E92A43

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.08

Transaction ID : B730C03AA54384E64B0C

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

3.30

**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 82 OF 86

<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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.90

Transaction ID : B7285FD1B3C0E4C4C8B3

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.55

Transaction ID : BCE4FA5C26CEF478AAE4

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

39.81

Transaction ID : B2466F445BD79404E8A9

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

43.26

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

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

PAGE 83 OF 86

<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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

565.44

Transaction ID : BD89C522180FF4A65BA0

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.25

Transaction ID : BB0D9A5EA7FD143C19F9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

238.33

Transaction ID : BD2AB7B98801B4C59A5D

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

805.02

**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 86

<input checked="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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

138.36

Transaction ID : BF0EBED8471C14F6F934

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

11.11

Transaction ID : BCA708C1999114761A1E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.15

Transaction ID : B4AF3647744764DC4B1D

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

149.62

**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 86

<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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

17.14

Transaction ID : BF14DEE154E2C4C1C91C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ZIONS CHECKING ACCT - BOISE**

Mailing Address 890 W MAIN ST

City  
BOISEState  
IDZip Code  
83702-5899Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

136.80

Transaction ID : B720EDF8917394F9E9A9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ZIONS CHECKING ACCT - BOISE**

Mailing Address 890 W MAIN ST

City  
BOISEState  
IDZip Code  
83702-5899Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

110.58

Transaction ID : BC8982BD569F0404EBC5

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

264.52

**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 86

<input checked="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 CRAPO FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

**A. ZIONS CHECKING ACCT - BOISE**

Mailing Address 890 W MAIN ST

City  
BOISEState  
IDZip Code  
83702-5899Purpose of Disbursement  
BANK FEES

001

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

106.29

Transaction ID : B11CB6E74F8CB4ED6822

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

106.29

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

72691.58