

**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.

1 2 F E 4 M 5

MIKE FLOOD FOR CONGRESS

ADDRESS (number and street)

PO BOX 81041

Check if different
than previously
reported. (ACC)

LINCOLN

NE

68501-1041

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00801241

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

NE

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

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

through

M M / D D / Y Y Y Y
03 / 31 / 2025

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

PHILLIPS, ROBERT, , III

Signature of Treasurer

PHILLIPS, ROBERT, , III

Date

M M / D D / Y Y Y Y
04 / 15 / 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 FLOOD FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2025

To:

MM / DD / YYYY
03 / 31 / 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))	183234.43	189019.43
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	183234.43	189019.43
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	59977.55	133110.91
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	59977.55	133110.91
8. Cash on Hand at Close of Reporting Period (from Line 27)	362758.65	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	6045.90	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

MIKE FLOOD FOR CONGRESS

Report Covering the Period:

From:

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

To:

M M / D D / Y Y Y Y
03 31 2025**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than
Political Committees****(i) Itemized (use Schedule A).....**

72000.00

76750.00

(ii) Unitemized

734.43

769.43

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

72734.43

77519.43

(b) Political Party Committees.....

0.00

0.00

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

110500.00

111500.00

(d) The Candidate

0.00

0.00

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

183234.43

189019.43

**12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES**

83720.00

83720.00

13. LOANS:**(a) Made or Guaranteed by the
Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

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

0.00

0.00

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

0.00

0.00

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

0.00

0.00

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

266954.43

272739.43

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.....	59977.55	133110.91
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	65000.00	65000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	65000.00	65000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	6000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	124977.55	204110.91

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	220781.77
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	266954.43
25. SUBTOTAL (add Line 23 and Line 24).....	487736.20
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	124977.55
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	362758.65

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

PAGE 5 OF 63

<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	

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

NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

BARRETT, JOHN, , ,

A.

Mailing Address 1637 S 154TH ST

City

OMAHA

State

NE

Zip Code

68144-5154

FEC ID number of contributing
federal political committee.

C

Name of Employer

GREAT PLAINS COMMUNICATIONS, INC

Occupation

VICE PRESIDENT

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A91B47AA964C04534A1D

Amount of Each Receipt this Period

250.00



Memo Item

Full Name (Last, First, Middle Initial)

BLAND, JAIME, , ,

B.

Mailing Address 11412 CENTENNIAL RD, 800

City

LA VISTA

State

NE

Zip Code

68128

FEC ID number of contributing
federal political committee.

C

Name of Employer

CYNCHHEALTH

Occupation

HEALTHCARE EXECUTIVE

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	2	5

Transaction ID : AD915983A435B4395B25

Amount of Each Receipt this Period

500.00



Memo Item

Full Name (Last, First, Middle Initial)

BOULAY, GREGORY, , ,

C.

Mailing Address 9528 CAPITOL AVE

City

OMAHA

State

NE

Zip Code

68114

FEC ID number of contributing
federal political committee.

C

Name of Employer

PELLA WINDOWS

Occupation

OWNER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : AE2512E8F310A4CB7815

Amount of Each Receipt this Period

3500.00



Memo Item

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

4250.00

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

BULFINCH, SCOTT, , ,

A.

Mailing Address 2128 B ST

City

LINCOLN

State

NE

Zip Code

68502

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 21 / 2025D D / Y Y Y Y Y
21 / 2025Y Y Y Y Y
2025

Transaction ID : AA2A30A1217A0401688A

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CARLSON, SCOTT, , ,

B.

Mailing Address 16427 JONES CIR

City

OMAHA

State

NE

Zip Code

68118-2712

FEC ID number of contributing
federal political committee.

C

Name of Employer

WESTIN FOODS

Occupation

PRESIDENT AND CHIEF EXECUTIVE OFFICER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 20 / 2025D D / Y Y Y Y Y
20 / 2025Y Y Y Y Y
2025

Transaction ID : A30B12DC513904BAA876

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CASSELS, KARLA, , ,

C.

Mailing Address 1303 N 136TH AVE

City

OMAHA

State

NE

Zip Code

68154

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 07 / 2025D D / Y Y Y Y Y
07 / 2025Y Y Y Y Y
2025

Transaction ID : AEED28495B4404429B28

Amount of Each Receipt this Period

3500.00

☐ Memo Item

5000.00

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

CASSELS, KARLA, , ,

A.

Mailing Address 1303 N 136TH AVE

City

OMAHA

State

NE

Zip Code

68154

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : A29DEACBC5191465FB29

Amount of Each Receipt this Period

3500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

CASSELS, SCOTT, , ,

Mailing Address 1303 N 136TH AVE

City

OMAHA

State

NE

Zip Code

68154

FEC ID number of contributing
federal political committee.

C

Name of Employer
KIEWIT CORPORATIONOccupation
EXECUTIVE VICE PRESIDENT

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : ADD16F9A2A6114117B85

Amount of Each Receipt this Period

3500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

CASSELS, SCOTT, , ,

Mailing Address 1303 N 136TH AVE

City

OMAHA

State

NE

Zip Code

68154

FEC ID number of contributing
federal political committee.

C

Name of Employer
KIEWIT CORPORATIONOccupation
EXECUTIVE VICE PRESIDENT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : A2AA97FF4ED96422BBC0

Amount of Each Receipt this Period

3500.00

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

10500.00

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

DAUB, HAL, , ,

A.

Mailing Address 314 N 97TH CT

City

OMAHA

State

NE

Zip Code

68114-2353

FEC ID number of contributing
federal political committee.

C

Name of Employer

HUSCH BLACKWELL, LLP

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 20 2025

Transaction ID : ABA43E037C6F943BAB93

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DINKEL, JOHN, M, ,

B.

Mailing Address PO BOX 1404

City

NORFOLK

State

NE

Zip Code

68702-1404

FEC ID number of contributing
federal political committee.

C

Name of Employer

DINKEL IMPLEMENT

Occupation

BUSINESS OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 24 2025

Transaction ID : A87C4693330444B97A31

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FOJE, TODD, , ,

C.

Mailing Address 3225 S 172ND CIR

City

OMAHA

State

NE

Zip Code

68130-2098

FEC ID number of contributing
federal political committee.

C

Name of Employer

GREAT PLAINS COMMUNICATIONS

Occupation

EXECUTIVE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 26 2025

Transaction ID : A6807E1417E0B4A3C901

Amount of Each Receipt this Period

250.00

☐ Memo Item

1750.00

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

FRITZ, LANCE, , ,

A.

Mailing Address 433 ECHO SPUR

City

PARK CITY

State

UT

Zip Code

86040

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : A1B970AFBE54141A8BCB

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GAY, TIM, , ,

B.Mailing Address 301 S 13TH ST
STE 402

City

LINCOLN

State

NE

Zip Code

68508

FEC ID number of contributing
federal political committee.

C

Name of Employer

CATALYST PUBLIC AFFAIRS

Occupation

PRESIDENT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A8DDA196EF16D41CCB11

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GROTHUSEN, ELAINE, , ,

C.

Mailing Address 1452 N PARK AVE

City

FREMONT

State

NE

Zip Code

68025-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer

NEBRASKA GOP STATE EXECUTIVE COMMI

Occupation

STATE CENTRAL COMMITTEEWOMAN

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : AE4101D0CF2F844358F2

Amount of Each Receipt this Period

250.00

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

4000.00

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

GRUBAUGH, RICK, , ,

A.

Mailing Address 1124 3RD ST

City
COLUMBUSState
NEZip Code
68601-7742FEC ID number of contributing
federal political committee.

C

Name of Employer
REMAX REAL ESTATEOccupation
REALTOR

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 30 2025

Transaction ID : A49DC3C3601A946968A1

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HAGER, ALLEN, , ,

B.

Mailing Address 23514 P ST

City
ELKHORNState
NEZip Code
68022-3066FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 13 2025

Transaction ID : AB0FF0C4FCB7A4AD2BAC

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HANEY, RICHARD, P, ,

C.

Mailing Address 3567 23RD AVE

City
COLUMBUSState
NEZip Code
68601-8142FEC ID number of contributing
federal political committee.

C

Name of Employer
EYE PHYSICIANS, P.C.Occupation
OPTOMETRIST

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 20 2025

Transaction ID : ADCDCD2BD48804D12871

Amount of Each Receipt this Period

250.00

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

4250.00

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

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

HAWKINS, FRED, H, ,

A.

Mailing Address 701 S 96TH ST

City

OMAHA

State

NE

Zip Code

68114-4917

FEC ID number of contributing
federal political committee.

C

Name of Employer

HAWKINS CONSTRUCTION COMPANY

Occupation

CEO

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 13 2025

Transaction ID : AA58C4FDFFFA040B38CE

Amount of Each Receipt this Period

3500.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

HAWKINS, FRED, H, ,

Mailing Address 701 S 96TH ST

City

OMAHA

State

NE

Zip Code

68114-4917

FEC ID number of contributing
federal political committee.

C

Name of Employer

HAWKINS CONSTRUCTION COMPANY

Occupation

CEO

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 14 2025

Transaction ID : A4610D64C953B475A858

Amount of Each Receipt this Period

3500.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

HAWKINS, MARIANNE, G, ,

Mailing Address 701 S 96TH ST

City

OMAHA

State

NE

Zip Code

68114-4917

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 14 2025

Transaction ID : A620F918E9CF648B39C5

Amount of Each Receipt this Period

3500.00



Memo Item

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

10500.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

HAWKINS, MARIANNE, G, ,

A.

Mailing Address 701 S 96TH ST

City

OMAHA

State

NE

Zip Code

68114-4917

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 14 / 2025

Transaction ID : A9ABBEDA6E8CE48B094D

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HINCHCLIFF, STEVEN, , ,

B.

Mailing Address 3412 S 228 TER

City

ELKHORN

State

NE

Zip Code

68022

FEC ID number of contributing
federal political committee.

C

Name of Employer

H&H AUTOMOTIVE LLC

Occupation

MANAGER

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 21 / 2025

Transaction ID : AA340A77E119D4B3D846

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KOTOUC, JOHN, , ,

C.

Mailing Address 8308 HICKORY ST

City

OMAHA

State

NE

Zip Code

68124-1377

FEC ID number of contributing
federal political committee.

C

Name of Employer

AMERICA NATIONAL BANK

Occupation

BANKER

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

3300.00

Date of Receipt

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

Transaction ID : ABE21962B1C7C43DB945

Amount of Each Receipt this Period

3300.00

☐ Memo Item

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

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

10300.00

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

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

LEONARD, STEVE, , ,

A.

Mailing Address 1216 S 199TH ST

City

OMAHA

State

NE

Zip Code

68130-2902

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
RESTAURANT OWNER OPERATOR

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	2	5

Transaction ID : AF4B3CE94B4BA4F619E2

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MARQUIS, ALEXANDER, , ,

B.

Mailing Address 15633 N IVY LAKE RD

City

CHILLICOTHE

State

IL

Zip Code

61523

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

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

Transaction ID : A45FEB8D5E20844C4A6F

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MILLIGAN, ROBERT, , ,

C.

Mailing Address 1203 N 141ST AVE

City

OMAHA

State

NE

Zip Code

68154-5106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	2	5

Transaction ID : A98D805994D5743DC942

Amount of Each Receipt this Period

1000.00

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

4800.00

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

MIRCH, CHRISTIAN, H, ,

A. Mailing Address 12516 EAGLE RUN DRCity
OMAHAState
NEZip Code
68164-5212FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF NEBRASKAOccupation
COMMISSIONER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 24 2025

Transaction ID : A9208E2989ACA494086D

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MOORE, SCOTT, D, ,

B. Mailing Address 1233 LINCOLN MALL
SUITE 201City
LINCOLNState
NEZip Code
68508-2820FEC ID number of contributing
federal political committee.

C

Name of Employer
EDWARDS WESTERHOLD & MOOREOccupation
LOBBYIST

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 20 2025

Transaction ID : ABEFAD1236EA74611A81

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

OSBORN, SHANE, , ,

C. Mailing Address 24333 HOWARD CIRCity
WATERLOOState
NEZip Code
68069FEC ID number of contributing
federal political committee.

C

Name of Employer
RWH ENERGYOccupation
CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 13 2025

Transaction ID : A16FD18D098674009901

Amount of Each Receipt this Period

1000.00

☐ Memo Item

1750.00

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

QUANDAHL, MARK, , ,

A.

Mailing Address 16729 LEAVENWORTH CIR

City

OMAHA

State

NE

Zip Code

68118-2721

FEC ID number of contributing
federal political committee.

C

Name of Employer

DVORAK LAW GROUP

Occupation

ATTORNEY

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 17 / 2025

Transaction ID : A1A529356815C4DF2AC1

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ROBERTI, CLIFF, , ,

B.

Mailing Address 2725 BLAINE DRIVE

City

CHEVY CHASE

State

MD

Zip Code

20815

FEC ID number of contributing
federal political committee.

C

Name of Employer

FEDERAL HALL POLICY ADVISORS, LLC

Occupation

CONSULTANT

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 21 / 2025

Transaction ID : AC35DF316AAD24230B49

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ROSS, JOHN, A., ,

C.

Mailing Address 2200 HIGHWAY 16

City

BANCROFT

State

NE

Zip Code

68004-3507

FEC ID number of contributing
federal political committee.

C

Name of Employer

CUMING COUNTY

Occupation

COUNTY SUPERVISOR DIST #2

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 20 / 2025

Transaction ID : A596FB849FAEE41A68D2

Amount of Each Receipt this Period

250.00

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

2250.00

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

SCHLOEMER, JAMES, , ,

A.

Mailing Address W134 N8675 EXECUTIVE PARKWAY

City

MENOMONEE FALLS

State

WI

Zip Code

53051-3310

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 28 / 2025D D / Y Y Y Y Y
28 / 2025Y Y Y Y Y
2025

Transaction ID : A2D761B13A3AF4FD2932

Amount of Each Receipt this Period

3100.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

SCHLOEMER, JAMES, , ,

Mailing Address W134 N8675 EXECUTIVE PARKWAY

City

MENOMONEE FALLS

State

WI

Zip Code

53051-3310

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 28 / 2025D D / Y Y Y Y Y
28 / 2025Y Y Y Y Y
2025

Transaction ID : A707D8E43E5024598832

Amount of Each Receipt this Period

3500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

SCHWARTZ, TODD, , ,

Mailing Address 1 N WACKER DRIVE
SUITE 3605

City

CHICAGO

State

IL

Zip Code

60606

FEC ID number of contributing
federal political committee.

C

Name of Employer

OPPORTUNITY FINANCIAL LLC

Occupation

CEO

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 13 / 2025D D / Y Y Y Y Y
13 / 2025Y Y Y Y Y
2025

Transaction ID : AFC3718F4991D4B27A88

Amount of Each Receipt this Period

3300.00

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

9900.00

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

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

PAGE 17 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

SELINE, STEVE, W, ,

A.

Mailing Address 111 S 108 AVE

City

OMAHA

State

NE

Zip Code

68154

FEC ID number of contributing
federal political committee.

C

Name of Employer
WALNUT PRIVATE EQUITYOccupation
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 17 2025

Transaction ID : A9AE4BFAEA3A746028CF

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TRAUTMAN, TODD, , ,

B.

Mailing Address 121 S 126TH AVE

City

OMAHA

State

NE

Zip Code

68154

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 07 2025

Transaction ID : A255825C567B24D7BA1B

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WOLFSON, LEN, , ,

C.

Mailing Address 123 5TH STREET NE

City

WASHINGTON

State

WA

Zip Code

20002

FEC ID number of contributing
federal political committee.

C

Name of Employer
FEDERAL HALL POLICY ADVISORS LLCOccupation
CONSULTANT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 27 2025

Transaction ID : A645E9386D39441C0A71

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)..... ▶

1750.00

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

PAGE 18 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

WOLFSON, LEN, , ,

A.

Mailing Address 123 5TH STREET NE

City

WASHINGTON

State

WA

Zip Code

20002

FEC ID number of contributing
federal political committee.

C

Name of Employer

FEDERAL HALL POLICY ADVISORS LLC

Occupation

CONSULTANT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	5

Transaction ID : A3C0D35FD35D34304A2D

Amount of Each Receipt this Period

1000.00

☐ 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

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

Amount of Each Receipt this Period

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

1000.00

72000.00

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

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

AICPA PAC

A.

Mailing Address 220 LEIGH FARM RD

City
DURHAMState
NCZip Code
27707-8110FEC ID number of contributing
federal political committee.**C** C00077321

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A3CBF9D849BD04ED1ACE

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ALLSTATE INSURANCE COMPANY PAC

B.Mailing Address 3100 SANDERS RD
STE 201City
NORTHBROOKState
ILZip Code
60062-7155FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	5

Transaction ID : A742A2AD909A8422EA0F

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

C.

Mailing Address 1333 NEW HAMPSHIRE AVE, NW SUITE 7

City
WASHINGTONState
DCZip Code
20036-3971FEC ID number of contributing
federal political committee.**C** C00004275

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : ABE71CB966A0844A4A70

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 RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMERICAN HOSPITAL ASSOCIATION PAC

Mailing Address 800 10TH ST NW

City

WASHINGTON

State

DC

Zip Code

20001-5188

FEC ID number of contributing
federal political committee.

C C00106146

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 20 / 2025

Transaction ID : AD3C3FD43D954484DBFB

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

AMERICAN PROPERTY CASUALTY INSURANCE ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 8700 W BRYN MAWR AVE
STE 1200S

City

CHICAGO

State

IL

Zip Code

60631-3512

FEC ID number of contributing
federal political committee.

C C00066472

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2025

Transaction ID : A02C7DC8D63FE4B02B2C

Amount of Each Receipt this Period

2500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

AMERICA'S CREDIT UNION PAC OF CREDIT UNION NATIONAL ASSOCIATION, INC

Mailing Address 99 M STREET SE, SUITE 300

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing
federal political committee.

C C00007880

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 20 / 2025

Transaction ID : A4E7F8DD814234ED3A6F

Amount of Each Receipt this Period

2500.00

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

6000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse 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 FLOOD FOR CONGRESSFull Name (Last, First, Middle Initial)
BANK POLICY INSTITUTE -PAC**A.** Mailing Address 600 13TH ST NW, SUITE 400City
WASHINGTONState
DCZip Code
20005FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 03 / 2025

Transaction ID : AB277691D00564685BC5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. **BECTON, DICKINSON AND COMPANY PAC**Mailing Address 1 BECTON DR
MC085City
FRANKLIN LAKESState
NJZip Code
07417-1815FEC ID number of contributing
federal political committee.

C C00376582

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2025

Transaction ID : A9F2C413EF5AC49D2950

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. **CCIA PAC**

Mailing Address 1300 PENNSYLVANIA AVE NW #327

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

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : AB4A97D2FD9054E96B81

Amount of Each Receipt this Period

5000.00

☐ Memo Item

7000.00

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

COMMERCIAL REAL ESTATE FINANCE COUNCIL PAC**A.**

Mailing Address 10 EAST 53RD ST 37TH FLOOR

City
NEW YORKState
NYZip Code
10022FEC ID number of contributing
federal political committee.**C** C00411173

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 28 2025

Transaction ID : AD9996FB7C35B496CBDD

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

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

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 28 2025

Transaction ID : A5787612E768E4A02AB6

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DEPOSITORY TRUST AND CLEARING CORPORATION PAC**C.**

Mailing Address 1455 PENNSYLVANIA AVE., NW SUITE 7

City
WASHINGTONState
DCZip Code
20004FEC ID number of contributing
federal political committee.**C** C00497917

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 28 2025

Transaction ID : AF7905163CBB24A59A55

Amount of Each Receipt this Period

1000.00

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

11000.00

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

ENACT HOLDINGS, INC PAC

A.

Mailing Address 325 7TH ST NW STE 550

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.**C** C00821744

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	5

Transaction ID : AAE79C5AD0ACC4F21A97

Amount of Each Receipt this Period

5000.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

FIRST AMERICAN FINANCIAL CORPORATION PAC

Mailing Address 1 FIRST AMERICAN WAY

City

SANTA ANA

State

CA

Zip Code

92707-5913

FEC ID number of contributing
federal political committee.**C** C00346726

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	5

Transaction ID : A3F4EA7EEB59B4DBB934

Amount of Each Receipt this Period

1000.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. PAC

Mailing Address 20 F ST NW
STE 610

City

WASHINGTON

State

DC

Zip Code

20001-6707

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

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A86837096C322437C907

Amount of Each Receipt this Period

5000.00



Memo Item

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

11000.00

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

JIM JORDAN FOR CONGRESS**A.**

Mailing Address 502 6TH STREET

City
HUDSONState
WIZip Code
54016FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : AB6FBF9D4E1624CAAB1C

Amount of Each Receipt this Period

2000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

MANAGED FUNDS ASSOCIATION PACMailing Address 1301 PENNSYLVANIA AVE NW
STE 350City
WASHINGTONState
DCZip Code
20004-1734FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 28 / 2025

Transaction ID : A2A53E882291B49F8A79

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

MANUFACTURED HOUSING INSTITUTE PACMailing Address 1655 FORT MYER DR
STE 200City
ARLINGTONState
VAZip Code
22209-3108FEC ID number of contributing
federal political committee.

C C00043463

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A42F8FBF41D7F4DF2A83

Amount of Each Receipt this Period

5000.00

☐ Memo Item

8000.00

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

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

A. Mailing Address 1166 AVENUE OF THE AMERICASCity
NEW YORKState
NYZip Code
10036-2708FEC ID number of contributing
federal political committee.**C** C00457234

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	5

Transaction ID : A35372642574D4D82BE3

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NARPM PAC

B. Mailing Address 638 INDEPENDENCE PARKWAY, SUITE 10City
CHESAPEAKEState
VAZip Code
23320FEC ID number of contributing
federal political committee.**C** C00567792

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	5

Transaction ID : A5930B2E53C4249C489C

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS PAC

C. Mailing Address 1000 WILSON BLVDCity
ARLINGTONState
VAZip Code
22209-3927FEC ID number of contributing
federal political committee.**C** C00005249

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A8379FAB38BAD4AC4BDB

Amount of Each Receipt this Period

1000.00

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

11000.00

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

NATIONAL MULTIFAMILY HOUSING COUNCIL POLITICAL ACTION COMMITTEE (NMHC PAC)

A. Mailing Address 1775 EYE ST NW STE 1100

City

WASHINGTON

State

DC

Zip Code

20006

FEC ID number of contributing
federal political committee.**C** C00130773

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 28 / 2025D D / Y Y Y Y Y
28 / 2025Y Y Y Y Y
2025

Transaction ID : AFA55578E5A1A4DE5A3A

Amount of Each Receipt this Period

5000.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)
NELNET PAC
Mailing Address 121 S 13TH ST, STE 201

City

LINCOLN

State

NE

Zip Code

68508-1911

FEC ID number of contributing
federal political committee.**C** C00370015

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : ADB0ADDA0F1C54E2FA83

Amount of Each Receipt this Period

5000.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)
NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE (PAC)
Mailing Address 51 MADISON AVENUE ROOM 1109

City

NEW YORK

State

NY

Zip Code

10010

FEC ID number of contributing
federal political committee.**C** C00158881

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 28 / 2025D D / Y Y Y Y Y
28 / 2025Y Y Y Y Y
2025

Transaction ID : A9DC0982A2DCD49BA9B1

Amount of Each Receipt this Period

2500.00

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

12500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse 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 FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

PACIFIC LIFE INSURANCE COMPANY PAC**A.**Mailing Address 282 11TH AVE
APT 2313City
NEW YORKState
NYZip Code
10001-1276FEC ID number of contributing
federal political committee.**C** C00068528

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	5

Transaction ID : A5EEB827E14AE42A5B7A

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PHYSICIANS MUTUAL PAC**B.**

Mailing Address 2600 DODGE ST

City
OMAHAState
NEZip Code
68131-2672FEC ID number of contributing
federal political committee.**C** C00456335

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A18709E6DFC7C4DFCA6F

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PIAPAC**C.**

Mailing Address 419 N LEE ST

City
ALEXANDRIAState
VAZip Code
22314-2301FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	5

Transaction ID : A82459378407D40DDAB9

Amount of Each Receipt this Period

2500.00

☐ 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 RECEIPTSUse separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

RADIAN GROUP INC. PAC

A.Mailing Address 550 E SWEDESFORD RD
STE 350City
WAYNEState
PAZip Code
19087-1607FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 28 2025

Transaction ID : A727E668DB8A34E068B3

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

REPUBLICAN MAIN STREET PARTNERSHIP PAC

B.

Mailing Address 410 1ST ST SE

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

C C00165159

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 07 2025

Transaction ID : A2D2C4DA3C76B40E0983

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 1776 WILSON BLVD
STE 530City
ARLINGTONState
VAZip Code
22209-2517FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 07 2025

Transaction ID : AE0C6EB0BEDCF49498F1

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

2000.00

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

SIFMA PAC

A.

Mailing Address 1099 NEW YORK AVE, NW, 6TH FLOOR

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A7F5BF945AD7A480A83C

Amount of Each Receipt this Period

2500.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

STATE FARM FEDERAL PAC

Mailing Address 1 STATE FARM PLZ

D-2

City

BLOOMINGTON

State

IL

Zip Code

61710-0001

FEC ID number of contributing
federal political committee.

C

C00544817

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 28 / 2025D D / Y Y Y Y Y
28 / 2025Y Y Y Y Y
2025

Transaction ID : A9C78A1BD4F3F48FA8D1

Amount of Each Receipt this Period

2500.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

STATEFARM FEDERAL PAC

Mailing Address 1 STATE FARM PLZ., D-2

City

BLOOMINGTON

State

IL

Zip Code

61710

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A94CA897D1D6C438BB8C

Amount of Each Receipt this Period

2500.00



Memo Item

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

7500.00

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

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

STRIPE, INC PAC

A.

Mailing Address 354 OYSTER BOULEVARD

City

SOUTH SAN FRANCISCO

State

CA

Zip Code

94080

FEC ID number of contributing
federal political committee.**C** C00883116

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : AE398ADF26C2A426A91C

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

THE WESTERN SUGAR COOPERATIVE CORP.

B.

Mailing Address 7555 E HAMPDEN AVE STE 520

City

DENVER

State

CO

Zip Code

80231

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

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A367B00C9F1E54C299DC

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

THRIVENT FINANCIAL FOR LUTHERANS PAC

C.

Mailing Address PO BOX 1892

City

APPLETON

State

WI

Zip Code

54912

FEC ID number of contributing
federal political committee.**C** C00121319

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	5

Transaction ID : ACECD833BEE7443FBA9A

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
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 31 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

US MORTGAGE INSURERS PAC (USMI PAC)

Mailing Address 1101 17TH ST NW
STE 700

City
WASHINGTON

State
DC

Zip Code
20036-4741

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 28 2025

Transaction ID : A4AAA9EC26C8249A69DC

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WHOLESALE & SPECIALTY INSURANCE ASSOCIATION (WSIA) PAC

Mailing Address 1500 K ST NW
STE 1100

City
WASHINGTON

State
DC

Zip Code
20005-1233

FEC ID number of contributing
federal political committee.

C C00417634

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A47062CA662B8437ABFA

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

7500.00

110500.00

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

PAGE 32 OF 63

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

Full Name (Last, First, Middle Initial)

MIKE FLOOD VICTORY FUND

A.Mailing Address 1327 H ST
STE 101City
LINCOLNState
NEZip Code
68508-3751FEC ID number of contributing
federal political committee.**C** C00833715

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

83720.00

Date of Receipt

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

Transaction ID : A2E6323F873C1433FAB3

Amount of Each Receipt this Period

83720.00

☐ Memo Item
JFC TRANSFER

Full Name (Last, First, Middle Initial)

STINSON, ANN, M., ,

B.

Mailing Address 14349 HAMILTON ST

City
OMAHAState
NEZip Code
68154-5116FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

STINSON FAMILY FOUNDATION

DIRECTOR

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : A003CCF3C32894F17935

Amount of Each Receipt this Period

3500.00

☒ Memo Item

JFC TRANSFER

Full Name (Last, First, Middle Initial)

OSTERGARD, HOLLY, , ,

C.

Mailing Address 7001 STEVENS RIDGE RD

City
LINCOLNState
NEZip Code
68516-3743FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

CRETE CARRIER CORP

BOARD OF DIRECTORS

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : A600A8737B56D4702BCB

Amount of Each Receipt this Period

3500.00

☒ Memo Item

JFC TRANSFER

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

83720.00

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

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

PAGE 33 OF 63

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

Full Name (Last, First, Middle Initial)

OSTERGARD, HOLLY, , ,

A.

Mailing Address 7001 STEVENS RIDGE RD

City
LINCOLNState
NEZip Code
68516-3743FEC ID number of contributing
federal political committee.

C

Name of Employer
CRETE CARRIER CORPOccupation
BOARD OF DIRECTORS

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : A8A70CA15B8E44EFFA8E

Amount of Each Receipt this Period

3500.00

☒ Memo Item

JFC TRANSFER

B.

Full Name (Last, First, Middle Initial)

STINSON, KEN, E., ,

Mailing Address 200 S 31ST AVE
STE 4802City
OMAHAState
NEZip Code
68131-1479FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 13 2025

Transaction ID : ACAF2B6CB555746FF8BD

Amount of Each Receipt this Period

3500.00

☒ Memo Item

JFC TRANSFER

C.

Full Name (Last, First, Middle Initial)

STINSON, KEN, E., ,

Mailing Address 200 S 31ST AVE
STE 4802City
OMAHAState
NEZip Code
68131-1479FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 13 2025

Transaction ID : A51D3FB74533347B890C

Amount of Each Receipt this Period

3500.00

☒ Memo Item

JFC TRANSFER

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

0.00

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

PAGE 34 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

STINSON, ANN, , ,

A.

Mailing Address 200 SOUTH 31ST AVENUE

City

OMAHA

State

NE

Zip Code

68131

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 13 / 2025D D / Y Y Y Y Y
13 / 2025Y Y Y Y Y
2025

Transaction ID : A48480846E1C940C3A89

Amount of Each Receipt this Period

3500.00

☒ Memo Item

JFC TRANSFER

Full Name (Last, First, Middle Initial)

HAWKINS, KAYLA, , ,

B.

Mailing Address 1502 RIDGEWOOD AVE

City

OMAHA

State

NE

Zip Code

68124-1317

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 17 / 2025D D / Y Y Y Y Y
17 / 2025Y Y Y Y Y
2025

Transaction ID : A0A7516512CE14CE5A54

Amount of Each Receipt this Period

3500.00

☒ Memo Item

JFC TRANSFER

Full Name (Last, First, Middle Initial)

HAWKINS, KAYLA, , ,

C.

Mailing Address 1502 RIDGEWOOD AVE

City

OMAHA

State

NE

Zip Code

68124-1317

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 17 / 2025D D / Y Y Y Y Y
17 / 2025Y Y Y Y Y
2025

Transaction ID : ABE1FB676B56C47279E6

Amount of Each Receipt this Period

3500.00

☒ Memo Item

JFC TRANSFER

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

0.00

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

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

PAGE 35 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

HAWKINS, CHRIS, , ,

A. Mailing Address 1502 RIDGEWOOD AVECity
OMAHAState
NEZip Code
68124-1317FEC ID number of contributing
federal political committee.

C

Name of Employer
HAWKINS CONSTRUCTION COMPANYOccupation
VICE PRESIDENT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 17 2025

Transaction ID : ACE7ACB7EB2494DF6B0B

Amount of Each Receipt this Period

3500.00

☒ Memo Item

JFC TRANSFER

B. Full Name (Last, First, Middle Initial)
HAWKINS, CHRIS, , ,
Mailing Address 1502 RIDGEWOOD AVECity
OMAHAState
NEZip Code
68124-1317FEC ID number of contributing
federal political committee.

C

Name of Employer
HAWKINS CONSTRUCTION COMPANYOccupation
VICE PRESIDENT

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 17 2025

Transaction ID : A25C7503B67D34E5A889

Amount of Each Receipt this Period

3500.00

☒ Memo Item

JFC TRANSFER

C. Full Name (Last, First, Middle Initial)
HAUSMANN, JOEY, , ,
Mailing Address 14122 BRUSH CREEK PLCity
ROCAState
NEZip Code
68430-4419FEC ID number of contributing
federal political committee.

C

Name of Employer
HAUSMANN & SONS CONSTRUCTIONOccupation
OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : A02F52796F4BC4BC4A3A

Amount of Each Receipt this Period

3500.00

☒ Memo Item

JFC TRANSFER

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

0.00

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

PAGE 36 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

HAUSMANN, JOEY, , ,

A.

Mailing Address 14122 BRUSH CREEK PL

City
ROCAState
NEZip Code
68430-4419FEC ID number of contributing
federal political committee.

C

Name of Employer
HAUSMANN & SONS CONSTRUCTIONOccupation
OWNER

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : A85A46F19C9D7427BA7A

Amount of Each Receipt this Period

3500.00

☒ Memo Item

JFC TRANSFER

B.

Full Name (Last, First, Middle Initial)

OSTERGARD, TONN, , ,

Mailing Address 7001 STEVENS RIDGE RD

City
LINCOLNState
NEZip Code
68516-3743FEC ID number of contributing
federal political committee.

C

Name of Employer
CRETE CARRIER CORP.Occupation
PRESIDENT

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : A5973FA2C0349450080E

Amount of Each Receipt this Period

3500.00

☒ Memo Item

JFC TRANSFER

C.

Full Name (Last, First, Middle Initial)

OSTERGARD, TONN, , ,

Mailing Address 7001 STEVENS RIDGE RD

City
LINCOLNState
NEZip Code
68516-3743FEC ID number of contributing
federal political committee.

C

Name of Employer
CRETE CARRIER CORP.Occupation
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : AEF8A66A421424C278CB

Amount of Each Receipt this Period

3500.00

☒ Memo Item

JFC TRANSFER

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

0.00

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

PAGE 37 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

CLARK, KEVIN, E, ,

A. Mailing Address 12219 FREEBOARD DRCity
PAPILLIONState
NEZip Code
68046-4462FEC ID number of contributing
federal political committee.

C

Name of Employer
AKRS EQUIPMENTOccupation
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 13 2025

Transaction ID : A5ADB613BE1B744BAB39

Amount of Each Receipt this Period

3500.00

☒ Memo Item

JFC TRANSFER

B. Full Name (Last, First, Middle Initial)
CLARK, KEVIN, E, ,
Mailing Address 12219 FREEBOARD DRCity
PAPILLIONState
NEZip Code
68046-4462FEC ID number of contributing
federal political committee.

C

Name of Employer
AKRS EQUIPMENTOccupation
PRESIDENT

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 13 2025

Transaction ID : A0BF6D7F49224487AAE6

Amount of Each Receipt this Period

3500.00

☒ Memo Item

JFC TRANSFER

C. Full Name (Last, First, Middle Initial)
RICKETTS, PETER, , ,
Mailing Address 6450 PRAIRIE AVECity
OMAHAState
NEZip Code
68132-2746FEC ID number of contributing
federal political committee.

C

Name of Employer
UNITED STATES GOVERNMENTOccupation
U.S. SENATOR

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 18 2025

Transaction ID : AC79DFC77E9C146C7A3E

Amount of Each Receipt this Period

3500.00

☒ Memo Item

JFC TRANSFER

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

0.00

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

PAGE 38 OF 63

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

Full Name (Last, First, Middle Initial)

RICKETTS, PETER, , ,

A.

Mailing Address 6450 PRAIRIE AVE

City

OMAHA

State

NE

Zip Code

68132-2746

FEC ID number of contributing
federal political committee.

C

Name of Employer

UNITED STATES GOVERNMENT

Occupation

U.S. SENATOR

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 18 2025

Transaction ID : AC27BE438F0124365B97

Amount of Each Receipt this Period

3500.00

☒ Memo Item

JFC TRANSFER

B.

Full Name (Last, First, Middle Initial)

PEED, SHAWN, , ,

Mailing Address 10360 A ST

City

LINCOLN

State

NE

Zip Code

68520-9457

FEC ID number of contributing
federal political committee.

C

Name of Employer

SANDHILLS PUBLISHING

Occupation

CEO

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 06 2025

Transaction ID : A7E195D5047E24658A03

Amount of Each Receipt this Period

3500.00

☒ Memo Item

JFC TRANSFER

C.

Full Name (Last, First, Middle Initial)

PEED, SHAWN, , ,

Mailing Address 10360 A ST

City

LINCOLN

State

NE

Zip Code

68520-9457

FEC ID number of contributing
federal political committee.

C

Name of Employer

SANDHILLS PUBLISHING

Occupation

CEO

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 06 2025

Transaction ID : A9C5F201717CE4B02AF3

Amount of Each Receipt this Period

3500.00

☒ Memo Item

JFC TRANSFER

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

0.00

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

PAGE 39 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

HUNZEKER, FRED, T, ,

Mailing Address 3402 N 216TH PLZ

City
ELKHORNState
NEZip Code
68022-2908FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 20 2025

Transaction ID : A255FF43B0D804F49ABB

Amount of Each Receipt this Period

3500.00

☒ Memo Item

JFC TRANSFER

B.

Full Name (Last, First, Middle Initial)

HUNZEKER, FRED, T, ,

Mailing Address 3402 N 216TH PLZ

City
ELKHORNState
NEZip Code
68022-2908FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 20 2025

Transaction ID : A223F477333274CA5966

Amount of Each Receipt this Period

3500.00

☒ Memo Item

JFC TRANSFER

C.

Full Name (Last, First, Middle Initial)

PEED, SARAH, J, ,

Mailing Address 10360 A ST

City
LINCOLNState
NEZip Code
68520-9457FEC ID number of contributing
federal political committee.

C

Name of Employer
SANDHILLS PUBLISHINGOccupation
EXECUTIVE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 06 2025

Transaction ID : AF0893EE21DA5464780C

Amount of Each Receipt this Period

3500.00

☒ Memo Item

JFC TRANSFER

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

0.00

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

PAGE 40 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

PEED, SARAH, J, ,

A. Mailing Address 10360 A STCity
LINCOLNState
NEZip Code
68520-9457FEC ID number of contributing
federal political committee.

C

Name of Employer
SANDHILLS PUBLISHINGOccupation
EXECUTIVE

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 06 2025

Transaction ID : A37E74BE1D8BD41A3AB4

Amount of Each Receipt this Period

3500.00

☒ Memo Item

JFC TRANSFER

B. Full Name (Last, First, Middle Initial)
BURGESS, ROBERT, , ,
Mailing Address 10 K STREET SOUTHEAST
427City
WASHINGTONState
DCZip Code
20003FEC ID number of contributing
federal political committee.

C

Name of Employer
CONNECTOR INC.Occupation
CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 21 2025

Transaction ID : AA4DE8E2F13684D549DD

Amount of Each Receipt this Period

3500.00

☒ Memo Item

JFC TRANSFER

C. Full Name (Last, First, Middle Initial)
BURGESS, ROBERT, , ,
Mailing Address 10 K STREET SOUTHEAST
427City
WASHINGTONState
DCZip Code
20003FEC ID number of contributing
federal political committee.

C

Name of Employer
CONNECTOR INC.Occupation
CEO

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 21 2025

Transaction ID : A7008861F652F474ABB2

Amount of Each Receipt this Period

3500.00

☒ Memo Item

JFC TRANSFER

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

0.00

83720.00

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

PAGE 41 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 1 SKYVIEW DR

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

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

260.49

Transaction ID : B9406363F3FE34136841

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 1 SKYVIEW DR

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

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

636.48

Transaction ID : BB0B05CE37D334B6EAC1

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 1 SKYVIEW DR

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

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

437.48

Transaction ID : BD951B699EF024846A92

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

1334.45

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

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

PAGE 42 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 1 SKYVIEW DR

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

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

36.45

Transaction ID : BAD545C2ADE0E49769CA

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 5555 HILTON AVE

City
BATON ROUGEState
LAZip Code
70808-2572Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1659.30

Transaction ID : BD7284B6CBA224CCD863

☐ 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
COMPLIANCE SOFTWARE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2250.00

Transaction ID : B401690F80B424D3982B

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

3945.75

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

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

PAGE 43 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. BEAUTIFULBRUSH

Mailing Address 671 ANACOSTIA AVE NE

City
WASHINGTONState
DCZip Code
20019-1506Purpose of Disbursement
MAKEUP SERVICES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

350.00

Transaction ID : BB78236FF696046CEB1A

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITOL HILL CLUB

Mailing Address 300 1ST ST SE

City
WASHINGTONState
DCZip Code
20003-1801Purpose of Disbursement
TRAVEL: FOOD AND BEVERAGE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

140.08

Transaction ID : BFF152EDA37614CE3983

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITOL PARK LLC

Mailing Address 2704 8TH ST

City
TUSCALOOSAState
ALZip Code
35401-2106Purpose of Disbursement
OFFICE RENT

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

191.17

Transaction ID : B0EE228D04CC942FAA5A

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

681.25

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

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

PAGE 44 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CAPITOL PARK LLC

Mailing Address 2704 8TH ST

City
TUSCALOOSAState
ALZip Code
35401-2106Purpose of Disbursement
OFFICE RENT

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

411.76

Transaction ID : BFDF309D5DB824B06A21

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CARRAHER, ANGIE, , ,

Mailing Address 4276 S 148TH ST

City
OMAHAState
NEZip Code
68137-5369Purpose of Disbursement
MAKEUP SERVICES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

669.00

Transaction ID : B8044C0495992414E81D

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CONGRESSIONAL INSTITUTEMailing Address 1700 DIAGONAL RD
#300City
ALEXANDRIAState
VAZip Code
22314-2847Purpose of Disbursement
MEMBERSHIP FEE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2318.98

Transaction ID : BC68A629E50F0414DA19

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

3399.74

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

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

PAGE 45 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DELTA

Mailing Address 1030 DELTA BLVD

Date of Disbursement

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

City
HAPEVILLEState
GAZip Code
30354-1989

FEC Identification Number

CPurpose of Disbursement
TRAVEL: FLIGHT

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

519.18

Transaction ID : B62E976CA86BF4F44AEB

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. FLOOD, MIKE, , ,

Mailing Address 214 N 7TH ST., STE. 1

Date of Disbursement

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

City
NORFOLKState
NEZip Code
68701-4086

FEC Identification Number

CPurpose of Disbursement
EVENT FOOD AND BEVERAGE REIMBURSEMENT

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1560.92

Transaction ID : BBE89D02FBC9243B3B54

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. CXIII REX

Mailing Address 113 KING ST

Date of Disbursement

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

City
ALEXANDRIAState
VAZip Code
22314-3282

FEC Identification Number

CPurpose of Disbursement
SUB-VENDOR: FUNDRAISING EVENT

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1560.92

Transaction ID : BDDBD95B9BB444F259BC

☒ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

2080.10

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

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

PAGE 46 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FLOOD, MIKE, , ,

Mailing Address 214 N 7TH ST., STE. 1

City
NORFOLKState
NEZip Code
68701-4086Purpose of Disbursement
EVENT FOOD AND BEVERAGE REIMBURSEMENT

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

318.50

Transaction ID : B44787FC0D1DC499D980

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITAL HILL CLUB

Mailing Address 300 1ST ST SE

City
WASHINGTONState
DCZip Code
20003-1801Purpose of Disbursement
SUB-VENDOR - EVENT FOOD AND BEVERAGE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

318.50

Transaction ID : BC1F49B64A9C749B39CA

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FLOOD, MIKE, , ,

Mailing Address 214 N 7TH ST., STE. 1

City
NORFOLKState
NEZip Code
68701-4086Purpose of Disbursement
EVENT FOOD AND BEVERAGE REIMBURSEMENT

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

390.21

Transaction ID : B6C360DB20C634CCE9D0

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

708.71

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

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

PAGE 47 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SEA ISLAND

Mailing Address 100 CLOISTER DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		17		2025

City
SEA ISLANDState
GAZip Code
31561-9705

FEC Identification Number

C

Purpose of Disbursement
SUB-VENDOR: FUNDRAISING EVENT FEES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

390.21

Transaction ID : B0E4238C22D25465EB6A

☒ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. FUNDRAISING, INC.

Mailing Address 411 1ST ST SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2025

City
WASHINGTONState
DCZip Code
20003-1827

FEC Identification Number

C

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

632.88

Transaction ID : B6B67C3B66A5A4C2AB92

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. FUNDRAISING, INC.

Mailing Address 411 1ST ST SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2025

City
WASHINGTONState
DCZip Code
20003-1827

FEC Identification Number

C

Purpose of Disbursement
FUNDRAISING COMMISSION

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

14384.50

Transaction ID : B333B1B08CE1E4EA891C

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

15017.38

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

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

PAGE 48 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FUNDRAISING, INC.

Mailing Address 411 1ST ST SE

City
WASHINGTONState
DCZip Code
20003-1827Purpose of Disbursement
DONOR MANAGEMENT SOFTWARE

Candidate Name

Office Sought:

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

Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

450.00

Transaction ID : B0502F42BA6894CFD9D9

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FUNDRAISING, INC.

Mailing Address 411 1ST ST SE

City
WASHINGTONState
DCZip Code
20003-1827Purpose of Disbursement
EVENT REIMBURSEMENTS

Candidate Name

Office Sought:

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

Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5132.86

Transaction ID : B2953702A80E54DAEB65

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITAL GRILLE

Mailing Address 601 PENNSYLVANIA AVENUE NW

City
WASHINGTONState
DCZip Code
20004-2601Purpose of Disbursement
SUB-VENDOR: EVENT CATERING

Candidate Name

Office Sought:

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

Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

757.13

Transaction ID : B5ADAB14B630D4A27A52

☒ Memo Item

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

5582.86

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. THE PRIME RIB

Mailing Address 2020 K ST NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2025

City
WASHINGTONState
DCZip Code
20006-1817

FEC Identification Number

CPurpose of Disbursement
SUB-VENDOR: EVENT CATERING

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2303.60

Transaction ID : BC6140B14A05D458DACB

☒ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. THE PRIME RIB

Mailing Address 2020 K ST NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2025

City
WASHINGTONState
DCZip Code
20006-1817

FEC Identification Number

CPurpose of Disbursement
SUB-VENDOR: EVENT CATERING

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

816.80

Transaction ID : BC6140B14A05D458DACB

☒ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. OMAHA MARRIOTT

Mailing Address 10220 REGENCY CIR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2025

City
OMAHAState
NEZip Code
68114-3706

FEC Identification Number

CPurpose of Disbursement
SUB-VENDOR - TRAVEL HOTEL

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

710.44

Transaction ID : B92310D557EB84A45AE3

☒ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

0.00

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

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

PAGE 50 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GOOGLE

Mailing Address 1600 AMPHITHEATRE PRKY

Date of Disbursement

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

City
MOUNTAIN VIEWState
CAZip Code
94043

FEC Identification Number

C

Purpose of Disbursement
EMAIL SERVICES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

39.08

Transaction ID : B190641717F1E40F9BD4

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. GOOGLE

Mailing Address 1600 AMPHITHEATRE PRKY

Date of Disbursement

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

City
MOUNTAIN VIEWState
CAZip Code
94043

FEC Identification Number

C

Purpose of Disbursement
EMAIL SERVICES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

15.35

Transaction ID : B8086A39F25554896A9C

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. HAPPY HOLLOW CLUB

Mailing Address 1701 S 105TH ST

Date of Disbursement

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

City
OMAHAState
NEZip Code
68124-1014

FEC Identification Number

C

Purpose of Disbursement
EVENT SPACE RENTAL

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1651.14

Transaction ID : B47EE35C0BD3F461FB39

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

1705.57

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. HOMEWOOD SUITES

Mailing Address 7930 JONES BRANCH DR

Date of Disbursement

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

City
MCLEANState
VAZip Code
22102-3388

FEC Identification Number

C

Purpose of Disbursement
TRAVEL: HOTEL

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

732.11

Transaction ID : B7B0FD37AD49A4E1B800

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. HOMEWOOD SUITES

Mailing Address 7930 JONES BRANCH DR

Date of Disbursement

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

City
MCLEANState
VAZip Code
22102-3388

FEC Identification Number

C

Purpose of Disbursement
TRAVEL: HOTEL

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

732.11

Transaction ID : B5F290EF2DA8E421AB9B

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. HOMEWOOD SUITES

Mailing Address 7930 JONES BRANCH DR

Date of Disbursement

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

City
MCLEANState
VAZip Code
22102-3388

FEC Identification Number

C

Purpose of Disbursement
TRAVEL: HOTEL

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

732.11

Transaction ID : B4B94BF2FF8EC47EF951

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

2196.33

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. HOMEWOOD SUITES

Mailing Address 7930 JONES BRANCH DR

Date of Disbursement

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

City
MCLEANState
VAZip Code
22102-3388

FEC Identification Number

CPurpose of Disbursement
TRAVEL: HOTEL

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

732.11

Transaction ID : B2AC705A467774E9BBFD

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. JBEST & COMPANYMailing Address 11235 DAVENPORT ST
STE 107

Date of Disbursement

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

City
OMAHAState
NEZip Code
68154-2613

FEC Identification Number

CPurpose of Disbursement
FUNDRAISING RETAINER

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

4500.00

Transaction ID : BCB23ED6D05364DBF9E5

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. JBEST & COMPANYMailing Address 11235 DAVENPORT ST
STE 107

Date of Disbursement

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

City
OMAHAState
NEZip Code
68154-2613

FEC Identification Number

CPurpose of Disbursement
FUNDRAISING COMMISSION

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

493.50

Transaction ID : B14347DDB724644388A2

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

5725.61

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

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

PAGE 53 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. JBEST & COMPANYMailing Address 11235 DAVENPORT ST
STE 107City
OMAHAState
NEZip Code
68154-2613Purpose of Disbursement
FUNDRAISING RETAINER

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4500.00

Transaction ID : B0D4DBB485CA04CDAB39

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JBEST & COMPANYMailing Address 11235 DAVENPORT ST
STE 107City
OMAHAState
NEZip Code
68154-2613Purpose of Disbursement
FUNDRAISING RETAINER

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4500.00

Transaction ID : B1BD8695297FE4436A7C

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JBEST & COMPANYMailing Address 11235 DAVENPORT ST
STE 107City
OMAHAState
NEZip Code
68154-2613Purpose of Disbursement
FUNDRAISING COMMISSION

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1312.50

Transaction ID : BC13E5F0799294BAF8FB

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

10312.50

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

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

PAGE 54 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MAHOGANY

Mailing Address 225 N 145TH ST

Date of Disbursement

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

City
OMAHAState
NEZip Code
68154-1012

FEC Identification Number

C

Purpose of Disbursement
EVENT CATERING

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1017.73

Transaction ID : BBAB6E8F94E8D4586BC6

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. MARRIOTT HOTEL

Mailing Address 10220 REGENCY CIR

Date of Disbursement

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

City
OMAHAState
NEZip Code
68114-3706

FEC Identification Number

C

Purpose of Disbursement
TRAVEL: HOTEL

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

353.15

Transaction ID : BC6509E467CBC41FA861

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. MARRIOTT HOTEL

Mailing Address 10220 REGENCY CIR

Date of Disbursement

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

City
OMAHAState
NEZip Code
68114-3706

FEC Identification Number

C

Purpose of Disbursement
TRAVEL: HOTEL

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

340.31

Transaction ID : BD24AF93F570549D6A22

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

1711.19

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

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

PAGE 55 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MARRIOTT HOTEL

Mailing Address 10220 REGENCY CIR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2025

City
OMAHAState
NEZip Code
68114-3706

FEC Identification Number

CPurpose of Disbursement
TRAVEL: HOTEL

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

336.21

Transaction ID : B816313D4DEA84F4F9D7

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. MARRIOTT HOTEL

Mailing Address 10220 REGENCY CIR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2025

City
OMAHAState
NEZip Code
68114-3706

FEC Identification Number

CPurpose of Disbursement
TRAVEL: HOTEL

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

336.21

Transaction ID : B4A16EC0ED40A467082C

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. NEBRASKA LAND FOUNDATION

Mailing Address 4529 S 58TH ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		25		2025

City
LINCOLNState
NEZip Code
68516-1407

FEC Identification Number

CPurpose of Disbursement
EVENT TICKETS

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

350.00

Transaction ID : BC2D82344198B4DF696E

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

1022.42

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

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

PAGE 56 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SDP CREATIVE

Mailing Address 510 UNION ST

City
MILLERSBURGState
PAZip Code
17061-1470Purpose of Disbursement
NEWSPAPER AD

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

159.00

Transaction ID : BDDBB09062DEF435EA7E

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SDP CREATIVE

Mailing Address 510 UNION ST

City
MILLERSBURGState
PAZip Code
17061-1470Purpose of Disbursement
EVENT FLYER

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

63.60

Transaction ID : BEF3A0F91F0FA40A4AFA

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SDP CREATIVE

Mailing Address 510 UNION ST

City
MILLERSBURGState
PAZip Code
17061-1470Purpose of Disbursement
WEBSITE EDITS

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

63.60

Transaction ID : BB98780C857144CEAAE2

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

286.20

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

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

PAGE 57 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. STEWART, AUSTIN, , ,

Mailing Address 2912 2ND ST N

City
ARLINGTONState
VAZip Code
22201-1204Purpose of Disbursement
FIELD STRATEGY

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B3A56D3B5EFFF41E9886

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STEWART, AUSTIN, , ,

Mailing Address 2912 2ND ST N

City
ARLINGTONState
VAZip Code
22201-1204Purpose of Disbursement
FIELD STRATEGY

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B91C804EF81E94B779DE

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STEWART, AUSTIN, , ,

Mailing Address 2912 2ND ST N

City
ARLINGTONState
VAZip Code
22201-1204Purpose of Disbursement
FIELD STRATEGY

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

940.00

Transaction ID : BEAB167FE9B3F4E3FBA9

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

1940.00

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. THE PROSPER GROUPMailing Address 150 W MARKET ST
STE 150City
INDIANAPOLISState
INZip Code
46204-2876Purpose of Disbursement
EMAIL PLATFORM

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

150.00

Transaction ID : B9F94FF55FE2F4618B4C

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THE PROSPER GROUPMailing Address 150 W MARKET ST
STE 150City
INDIANAPOLISState
INZip Code
46204-2876Purpose of Disbursement
EMAIL SERVICES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

150.00

Transaction ID : B6C0687E9AE5F4E0B950

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. THE PROSPER GROUPMailing Address 150 W MARKET ST
STE 150City
INDIANAPOLISState
INZip Code
46204-2876Purpose of Disbursement
EMAIL SERVICES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

150.00

Transaction ID : B8D04EF08CA8542D089B

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

450.00

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

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

PAGE 59 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. THE PROSPER GROUPMailing Address 150 W MARKET ST
STE 150City
INDIANAPOLISState
INZip Code
46204-2876Purpose of Disbursement
EMAIL SERVICES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

150.00

Transaction ID : B61FB006424B64789915

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THE PROSPER GROUPMailing Address 150 W MARKET ST
STE 150City
INDIANAPOLISState
INZip Code
46204-2876Purpose of Disbursement
EMAIL SERVICES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

150.00

Transaction ID : B4EED435C2BCC4F8AB29

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TOASTIQUE LLC

Mailing Address 764 MAINE AVE SW

City
WASHINGTONState
DCZip Code
20024-2495Purpose of Disbursement
TRAVEL: FOOD AND BEVERAGE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

374.55

Transaction ID : BE9210AED2A434D11B20

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

674.55

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

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

PAGE 60 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. USPSMailing Address 1124 PACIFIC ST
RM 107City
OMAHAState
NEZip Code
68108-3200Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

86.20

Transaction ID : B387A4E9A471F44F793B

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. USPSMailing Address 1124 PACIFIC ST
RM 107City
OMAHAState
NEZip Code
68108-3200Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

27.53

Transaction ID : B85C1BE5A86444ED0BC3

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. USPSMailing Address 1124 PACIFIC ST
RM 107City
OMAHAState
NEZip Code
68108-3200Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

18.79

Transaction ID : B38ED274F89794196A93

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

132.52

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

58907.13

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

PAGE 61 OF 63

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

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NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FLOOD, MICHAEL, J, ,

Mailing Address PO BOX 81041

City
LINCOLNState
NEZip Code
68501-1041Purpose of Disbursement
LOAN REPAYMENT: LOAN RECEIVEDCandidate Name
FLOOD, MICHAEL, J, ,Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

State: NE District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03	/	17	/	2025

FEC Identification Number

C C00801241

Amount of Each Disbursement this Period

65000.00

Transaction ID : BAA935D2A95AD406A99A

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

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

65000.00

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

65000.00

SCHEDULE C (FEC Form 3)
LOANS

PAGE 62 OF 63

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C3D9C7FB5DCD740A49F7

MIKE FLOOD FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

Election: 2022

FLOOD, MICHAEL, J, ,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

PO BOX 81041

City

LINCOLN

State

NE

ZIP Code

68501-1041

☒ Personal Funds of the Candidate

Original Amount of Loan

65000.00

Cumulative Payment To Date

65000.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 / 28 / 2022

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional).....▶

0.00

TOTALS This Period (last page in this line only).....▶

0.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE 63 OF 63

FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

MIKE FLOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

DESIGN 4 INC

Nature of Debt (Purpose):

PRINTING: BANNERS/SIGNS

Mailing Address 3232 H ST

City
OMAHA

State
NE

Zip Code
68107-1449

Outstanding Balance Beginning This Period

5745.90

Transaction ID : D2ADF7C8965F04C789BF

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5745.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

NEBRASKA REPUBLICAN PARTY

Nature of Debt (Purpose):

OPERATIONS: OFFICE RENT

Mailing Address 1610 N ST

City
LINCOLN

State
NE

Zip Code
68508-1871

Outstanding Balance Beginning This Period

300.00

Transaction ID : D92A6760C33164041B80

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

300.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

THE RICHARD NORMAN COMPANY

Nature of Debt (Purpose):

DIRECT MAIL FUNDRAISING - SERVICES
CANCELLED

Mailing Address 113 E MARKET ST
SUITE 300

City
LEESBURG

State
VA

Zip Code
20176-3109

Outstanding Balance Beginning This Period

31007.60

Transaction ID : D0840675D74C4411C8CD

Amount Incurred This Period

0.00

Payment This Period

31007.60

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)

6045.90

2) **TOTALS** This Period (last page this line number only)

6045.90

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

6045.90