



## SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**BergmanforCongress**

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2025 To: M M / D D / Y Y Y Y 12 / 31 / 2025

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	<span style="border: 1px solid black; padding: 2px;">120603.13</span>	<span style="border: 1px solid black; padding: 2px;">687446.11</span>
(b) Total Contribution Refunds (from Line 20(d)) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	<span style="border: 1px solid black; padding: 2px;">800.00</span>
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	<span style="border: 1px solid black; padding: 2px;">120603.13</span>	<span style="border: 1px solid black; padding: 2px;">686646.11</span>
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	<span style="border: 1px solid black; padding: 2px;">100935.10</span>	<span style="border: 1px solid black; padding: 2px;">607760.57</span>
(b) Total Offsets to Operating Expenditures (from Line 14) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	<span style="border: 1px solid black; padding: 2px;">2794.01</span>
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	<span style="border: 1px solid black; padding: 2px;">100935.10</span>	<span style="border: 1px solid black; padding: 2px;">604966.56</span>
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>	<span style="border: 1px solid black; padding: 2px;">558901.57</span>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**BergmanforCongress**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	30847.00	210847.45
(ii) Unitemized .....	18681.13	81673.66
(iii) TOTAL of contributions from individuals .....	49528.13	292521.11
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	71075.00	394925.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	120603.13	687446.11
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	322223.97
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	2794.01
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....</b>	120603.13	1012464.09

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	100935.10	607760.57
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	11933.35
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	800.00
(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	800.00
21. OTHER DISBURSEMENTS .....	200.00	27863.74
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	101135.10	648357.66

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	539433.54
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	120603.13
25. SUBTOTAL (add Line 23 and Line 24).....	660036.67
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	101135.10
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	558901.57

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
ANDERSON, JENNIFER, L., MRS.,

Mailing Address 2991 ALBERENE CHURCH LANE

City ESMONT State VA Zip Code 22937-1518

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

Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 0.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 09 2025

Transaction ID : SA11A.92119

Amount of Each Receipt this Period  
- 1500.00

Memo Item  
CONTRIBUTION  
CHARGED BACK

**B.** Full Name (Last, First, Middle Initial)  
ANDERSON, PHILMORE, B., MR.,

Mailing Address 2991 ALBERENE CHURCH LN

City ESMONT State VA Zip Code 22937-1518

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

Name of Employer NAVIGATORS GLOBAL Occupation OWNER

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  
10 09 2025

Transaction ID : SA11A.90096

Amount of Each Receipt this Period  
- 1000.00

Memo Item  
CONTRIBUTION  
CHARGED BACK

**C.** Full Name (Last, First, Middle Initial)  
APEL, RONALD, H., MR.,

Mailing Address PO BOX 159

City VINEMONT State AL Zip Code 35179-0159

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

Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 07 2025

Transaction ID : SA11A.92570

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ - 2400.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
BABCOCK, CLYDE, H., MR,  
Mailing Address 2815 N WASKEVICH LN

City MIDLAND State MI Zip Code 48642-8855

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date **300.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 08 / 2025

Transaction ID : SA11A.92326

Amount of Each Receipt this Period  
**50.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
BABCOCK, CLYDE, H., MR,  
Mailing Address 2815 N WASKEVICH LN

City MIDLAND State MI Zip Code 48642-8855

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date **300.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 20 / 2025

Transaction ID : SA11A.92652

Amount of Each Receipt this Period  
**50.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
BAIRD, DALE, L., MAJ,  
Mailing Address 110 VANTAGE VIEW DR

City PETOSKEY State MI Zip Code 49770-9211

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date **1200.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 10 / 2025

Transaction ID : SA11A.92550

Amount of Each Receipt this Period  
**200.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **300.00**

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
BALDUS, GEORGE, L., MR,  
Mailing Address 528 E NORPORT DR

City: PORT WASHINGTON State: WI Zip Code: 53074-1170

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 205.00

Date of Receipt: 10 / 07 / 2025  
Transaction ID : SA11A.92243

Amount of Each Receipt this Period: 50.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
BARNA, BARBARA, K., MS,  
Mailing Address 11337 MORGAN AVE

City: PLYMOUTH State: MI Zip Code: 48170-4436

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 370.00

Date of Receipt: 10 / 06 / 2025  
Transaction ID : SA11A.92339

Amount of Each Receipt this Period: 75.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
BARNA, BARBARA, K., MS,  
Mailing Address 11337 MORGAN AVE

City: PLYMOUTH State: MI Zip Code: 48170-4436

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 370.00

Date of Receipt: 11 / 04 / 2025  
Transaction ID : SA11A.92661

Amount of Each Receipt this Period: 75.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 200.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
BATCHA, JOSEPH, , MR.,

Mailing Address 7350 PENINSULA DRIVE

City TRAVERSE CITY	State MI	Zip Code 49686-1752
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FEC ID number of contributing federal political committee. **C**

Name of Employer OPTIMAL CAPITAL	Occupation FOUNDER
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Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 25 / 2025

**Transaction ID : SA11A.92479**

Amount of Each Receipt this Period  
300.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
BIEBER, ALBERT, G., MR.,

Mailing Address PO BOX 207

City CHINA	State TX	Zip Code 77613-0207
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FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation UNEMPLOYED
--------------------------	--------------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 18 / 2025

**Transaction ID : SA11A.92669**

Amount of Each Receipt this Period  
350.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
BURNS, CHRISTINE, M., MS.,

Mailing Address N12790 SAWYER LAKE RD

City CHANNING	State MI	Zip Code 49815-9705
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FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 10 / 2025

**Transaction ID : SA11A.92588**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	700.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 9 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
BUSCHE, TAI, HUA, MRS,  
Mailing Address 405 WOODTON KNL

City STOCKBRIDGE State GA Zip Code 30281-6921

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date **800.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 14 / 2025

Transaction ID : SA11A.92382

Amount of Each Receipt this Period  
**200.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
CAMBRIDGE, ALFRED, E., MR, JR  
Mailing Address 314 POWDERHORN DR

City HOUGHTON LAKE State MI Zip Code 48629-9567

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

Name of Employer ROBINSON INDUSTRIES Occupation CPA

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date **500.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 06 / 2025

Transaction ID : SA11A.92701

Amount of Each Receipt this Period  
**250.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
CASEY, WILLIAM, R., MR,  
Mailing Address 153 LOBLOLLY LN

City BASTROP State TX Zip Code 78602-9514

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

Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date **335.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 06 / 2025

Transaction ID : SA11A.92402

Amount of Each Receipt this Period  
**50.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **500.00**

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 10 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
CASEY, WILLIAM, R., MR,  
Mailing Address 153 LOBLOLLY LN

City BASTROP State TX Zip Code 78602-9514

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
335.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 10 / 2025

Transaction ID : SA11A.92705

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
CHAMBERLAIN, GARY, G., MR,  
Mailing Address 4850 ALTON CT

City TROY State MI Zip Code 48085-5044

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
575.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 07 / 2025

Transaction ID : SA11A.92149

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
CHAMBERLAIN, GARY, G., MR,  
Mailing Address 4850 ALTON CT

City TROY State MI Zip Code 48085-5044

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
575.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 21 / 2025

Transaction ID : SA11A.92524

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
CHIN, WAN, Y., MRS,  
Mailing Address 242 WINDSONG DR

City HENDERSON State NV Zip Code 89074-4265

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 06 / 2025

Transaction ID : SA11A.92197

Amount of Each Receipt this Period  
200.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
CHOATE, DAVID, E., MR,  
Mailing Address 6201 SOMMERSET LN

City WILLIAMSBURG State VA Zip Code 23188-1795

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 06 / 2025

Transaction ID : SA11A.92629

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
CHOATE, DAVID, E., MR,  
Mailing Address 6201 SOMMERSET LN

City WILLIAMSBURG State VA Zip Code 23188-1795

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 06 / 2025

Transaction ID : SA11A.92630

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE 12 OF 127	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
CULLENS, DOROTHY, O., MS,  
Mailing Address 56 BURNS RD

City NORTH BRUNSWICK	State NJ	Zip Code 08902-3464
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
--	--

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 06 / 2025

**Transaction ID : SA11A.92408**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
CURRAN, WILLIAM, E., MR, JR  
Mailing Address 4601 HIGHWAY A1A APT 501

City VERO BEACH	State FL	Zip Code 32963-1353
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FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 14 / 2025

**Transaction ID : SA11A.92645**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
DALMAN, JOAN, A., ,  
Mailing Address 657 ZORICH RD

City WAKEFIELD	State MI	Zip Code 49968-9518
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FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
220.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 04 / 2025

**Transaction ID : SA11A.92798**

Amount of Each Receipt this Period  
70.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	420.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
DOMSIC, MICHAEL, E., MR,  
Mailing Address PO BOX 267

City: CENTRAL LAKE State: MI Zip Code: 49622-0267

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 255.00

Date of Receipt: 11 / 03 / 2025  
Transaction ID : SA11A.92686

Amount of Each Receipt this Period: 25.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
ERVIN, JAMES, L., MR.,  
Mailing Address 410 FIRST ST SE STE 300

City: WASHINGTON State: DC Zip Code: 20003-1866

FEC ID number of contributing federal political committee: C

Name of Employer: ERVIN GRAVES STRATEGY GROUP Occupation: CHAIRMAN

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 1000.00

Date of Receipt: 12 / 23 / 2025  
Transaction ID : SA11A.92764

Amount of Each Receipt this Period: 1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
EVANS, HAROLD, L., LT,  
Mailing Address 3013 BEETHOVEN WAY

City: SILVER SPRING State: MD Zip Code: 20904-6861

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 400.00

Date of Receipt: 10 / 27 / 2025  
Transaction ID : SA11A.92199

Amount of Each Receipt this Period: 50.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1075.00

**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 14 OF 127	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
EVANS, HAROLD, L., LT,  
Mailing Address 3013 BEETHOVEN WAY

City SILVER SPRING	State MD	Zip Code 20904-6861
-----------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2025

**Transaction ID : SA11A.92556**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
FRENCH, JACK, A., MR,  
Mailing Address 7876 W GILFORD RD

City REESE	State MI	Zip Code 48757-9527
---------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 14 / 2025

**Transaction ID : SA11A.92420**

Amount of Each Receipt this Period  
200.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
FRIESLAND, LOU, JANE, MS,  
Mailing Address 38 ALLISON HOLLOW RD

City MARION	State NC	Zip Code 28752-
----------------	-------------	--------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
--	--

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
240.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2025

**Transaction ID : SA11A.92292**

Amount of Each Receipt this Period  
240.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	490.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
GEIGER, SUE, A., MS,  
Mailing Address 863N COUNTY ROAD 441

City: MANISTIQUE State: MI Zip Code: 49854-8826

FEC ID number of contributing federal political committee: C

Name of Employer: INFORMATION REQUESTED PER BEST EFF Occupation: INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 300.00

Date of Receipt: 11 / 20 / 2025  
Transaction ID : SA11A.92668

Amount of Each Receipt this Period: 100.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
GOEDERS, CALVIN, N., MR,  
Mailing Address 2712 GEORGETOWN DR

City: MIDLAND State: MI Zip Code: 48642-3920

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 800.00

Date of Receipt: 10 / 06 / 2025  
Transaction ID : SA11A.92214

Amount of Each Receipt this Period: 100.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
GOEDERS, CALVIN, N., MR,  
Mailing Address 2712 GEORGETOWN DR

City: MIDLAND State: MI Zip Code: 48642-3920

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 800.00

Date of Receipt: 11 / 11 / 2025  
Transaction ID : SA11A.92567

Amount of Each Receipt this Period: 100.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 300.00

**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: PAGE 17 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
HEJDONECK, BARBARA, L., MS,  
Mailing Address 23W040 MULBERRY LN

City: GLEN ELLYN State: IL Zip Code: 60137-7219

FEC ID number of contributing federal political committee: C

Name of Employer: INFORMATION REQUESTED PER BEST EFF Occupation: INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 229.00

Date of Receipt: 11 / 07 / 2025  
Transaction ID : SA11A.92687

Amount of Each Receipt this Period: 45.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
HOFFMAN, ROBERT, L., MR,  
Mailing Address 3886 W HIGGINS LAKE DR

City: ROSCOMMON State: MI Zip Code: 48653-

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 1000.00

Date of Receipt: 10 / 09 / 2025  
Transaction ID : SA11A.92256

Amount of Each Receipt this Period: 1000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
HOFFMAN, TAEKO, O., MRS,  
Mailing Address 1122 PORTESUELLO AVE

City: SANTA BARBARA State: CA Zip Code: 93105-4619

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 650.00

Date of Receipt: 11 / 12 / 2025  
Transaction ID : SA11A.92569

Amount of Each Receipt this Period: 100.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1145.00

**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: PAGE 18 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
HOOK, JOANNE, H., MRS,  
Mailing Address 4141 S BRAESWOOD BLVD APT 1142

City HOUSTON State TX Zip Code 77025-3347

FEC ID number of contributing federal political committee. C

Name of Employer NONE Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 06 / 2025

Transaction ID : SA11A.92181

Amount of Each Receipt this Period  
200.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
HOPKINS, MARK, T., MR,  
Mailing Address 3043 S ROBERTSON RD

City CASPER State WY Zip Code 82604-3621

FEC ID number of contributing federal political committee. C

Name of Employer NONE Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 11 / 2025

Transaction ID : SA11A.92574

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
HOWARD, RONALD , E., MR,  
Mailing Address 500 LINCOLN AVE

City ONTONAGON State MI Zip Code 49953-9650

FEC ID number of contributing federal political committee. C

Name of Employer NONE Occupation 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 Y Y  
10 / 06 / 2025

Transaction ID : SA11A.92249

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 1300.00

**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: PAGE 19 OF 127  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
IRWIN, THOMAS, R., MR,  
Mailing Address PO BOX 469

City: TRAVERSE CITY State: MI Zip Code: 49685-0469

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 300.00

Date of Receipt: 10 / 01 / 2025  
Transaction ID : SA11A.92229

Amount of Each Receipt this Period: 300.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
JAECKLEIN, CECILIA, STRICK, MRS,  
Mailing Address 325 E PROSPECT ST

City: MARQUETTE State: MI Zip Code: 49855-3733

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 225.00

Date of Receipt: 11 / 10 / 2025  
Transaction ID : SA11A.92605

Amount of Each Receipt this Period: 150.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
KAISER, ALFRED, R., MR,  
Mailing Address 1931 OXFORD RD

City: GROSSE POINTE WOOD State: MI Zip Code: 48236-1847

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 400.00

Date of Receipt: 11 / 11 / 2025  
Transaction ID : SA11A.92527

Amount of Each Receipt this Period: 100.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 550.00

**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: PAGE 20 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
KOSCIOLEK, SYLVIA, M., MS,  
Mailing Address 12228 WOODLINE DR

City: FENTON State: MI Zip Code: 48430-3514

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 850.00

Date of Receipt: 10 / 07 / 2025  
Transaction ID : SA11A.92145

Amount of Each Receipt this Period: 200.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
KRAUSE, SHERRI, E., MRS,  
Mailing Address 701 ARBUTUS AVE

City: MANISTIQUE State: MI Zip Code: 49854-1605

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 250.00

Date of Receipt: 11 / 21 / 2025  
Transaction ID : SA11A.92596

Amount of Each Receipt this Period: 50.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
LABRECHE, JUDITH, S., MRS,  
Mailing Address 1700 38TH AVE

City: MENOMINEE State: MI Zip Code: 49858-

FEC ID number of contributing federal political committee: C

Name of Employer: INFORMATION REQUESTED PER BEST EFF Occupation: INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 300.00

Date of Receipt: 10 / 06 / 2025  
Transaction ID : SA11A.92460

Amount of Each Receipt this Period: 100.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 350.00

**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: PAGE 21 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
LABRECHE, JUDITH, S., MRS,  
Mailing Address 1700 38TH AVE

City: MENOMINEE State: MI Zip Code: 49858-

FEC ID number of contributing federal political committee: C

Name of Employer: INFORMATION REQUESTED PER BEST EFFC Occupation: INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 300.00

Date of Receipt: 11 / 17 / 2025  
Transaction ID : SA11A.92754

Amount of Each Receipt this Period: 100.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
LABRECHE, JUDITH, S., MRS,  
Mailing Address 1700 38TH AVE

City: MENOMINEE State: MI Zip Code: 49858-

FEC ID number of contributing federal political committee: C

Name of Employer: INFORMATION REQUESTED PER BEST EFFC Occupation: INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 300.00

Date of Receipt: 11 / 17 / 2025  
Transaction ID : SA11A.92755

Amount of Each Receipt this Period: 100.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
LACEY, JEANETTE, J., MRS,  
Mailing Address 197 INDIANWOOD RD

City: LAKE ORION State: MI Zip Code: 48362-1510

FEC ID number of contributing federal political committee: C

Name of Employer: MEBNAR INDUSTRIAL PARK LLC Occupation: PROP MANAGER

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 700.00

Date of Receipt: 12 / 04 / 2025  
Transaction ID : SA11A.92794

Amount of Each Receipt this Period: 200.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 400.00

**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: PAGE 22 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
LEVIN, HERBERT, A., MR,  
Mailing Address 724 E GRINNELL DR

City: BURBANK State: CA Zip Code: 91501-1720

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 400.00

Date of Receipt: 10 / 22 / 2025  
Transaction ID : SA11A.92142

Amount of Each Receipt this Period: 50.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
LEVIN, HERBERT, A., MR,  
Mailing Address 724 E GRINNELL DR

City: BURBANK State: CA Zip Code: 91501-1720

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 400.00

Date of Receipt: 11 / 18 / 2025  
Transaction ID : SA11A.92520

Amount of Each Receipt this Period: 50.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
LINDSAY, JOHN, R., MR,  
Mailing Address 1018 S STEPHAN BRIDGE RD

City: GRAYLING State: MI Zip Code: 49738-6996

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 400.00

Date of Receipt: 10 / 06 / 2025  
Transaction ID : SA11A.92257

Amount of Each Receipt this Period: 100.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 200.00

**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: PAGE 23 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
LINDSAY, JOHN, R., MR,  
Mailing Address 1018 S STEPHAN BRIDGE RD

City: GRAYLING State: MI Zip Code: 49738-6996

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 400.00

Date of Receipt: 11 / 10 / 2025  
Transaction ID : SA11A.92602

Amount of Each Receipt this Period: 100.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
LOUIE, FRANK, G., MR,  
Mailing Address 1847 W 41ST DR

City: LOS ANGELES State: CA Zip Code: 90062-1517

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 800.00

Date of Receipt: 11 / 11 / 2025  
Transaction ID : SA11A.92576

Amount of Each Receipt this Period: 400.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MALPASS, TAD, M., MR,  
Mailing Address 2701 S M 66

City: EAST JORDAN State: MI Zip Code: 49727-8401

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 250.00

Date of Receipt: 11 / 06 / 2025  
Transaction ID : SA11A.92544

Amount of Each Receipt this Period: 250.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 750.00

**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: PAGE 24 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
MARVIN, WILLIAM, K., MR,  
Mailing Address 308 STRAITS AVE

City MACKINAW CITY State MI Zip Code 49701-9605

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 03 / 2025

Transaction ID : SA11A.92424

Amount of Each Receipt this Period  
200.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MARVIN, WILLIAM, K., MR,  
Mailing Address 308 STRAITS AVE

City MACKINAW CITY State MI Zip Code 49701-9605

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 21 / 2025

Transaction ID : SA11A.92735

Amount of Each Receipt this Period  
200.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MCMILLAN, SUZANE, I., MRS,  
Mailing Address 185 GOLDENWAVE LOOP

City MONTGOMERY State TX Zip Code 77316-2932

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 11 / 2025

Transaction ID : SA11A.92731

Amount of Each Receipt this Period  
200.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00

**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 25 OF 127
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
MOODY, RICHARD, A., MR,  
Mailing Address 6807 W PEDERSON CIRCLE M.25 DR

City ESCANABA	State MI	Zip Code 49829-9529
------------------	-------------	------------------------

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

Name of Employer OPENTEXT	Occupation SENIOR SOLUTIONS ADVISOR
------------------------------	--

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 06 / 2025

**Transaction ID : SA11A.92219**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MOODY, RICHARD, A., MR,  
Mailing Address 6807 W PEDERSON CIRCLE M.25 DR

City ESCANABA	State MI	Zip Code 49829-9529
------------------	-------------	------------------------

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

Name of Employer OPENTEXT	Occupation SENIOR SOLUTIONS ADVISOR
------------------------------	--

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 11 / 2025

**Transaction ID : SA11A.92575**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MOSKWA, STEVEN, D., ,  
Mailing Address PO BOX 904

City MACKINAC IS	State MI	Zip Code 49757-0904
---------------------	-------------	------------------------

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

Name of Employer YANKEE REBEL TAVERN	Occupation BUSINESS OWNER
---	------------------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 08 / 2025

**Transaction ID : SA11A.92266**

Amount of Each Receipt this Period  
300.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 26 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
MOSKWA, STEVEN, D., ,

Mailing Address PO BOX 904

City MACKINAC IS State MI Zip Code 49757-0904

FEC ID number of contributing federal political committee. C

Name of Employer YANKEE REBEL TAVERN Occupation BUSINESS OWNER

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 17 / 2025

Transaction ID : SA11A.92771

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
NEBEL, CHARLES, E., MR,

Mailing Address PO BOX 158

City MUNISING State MI Zip Code 49862-0158

FEC ID number of contributing federal political committee. C

Name of Employer NEBEL & NEBEL Occupation ATTORNEY

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 06 / 2025

Transaction ID : SA11A.92523

Amount of Each Receipt this Period  
750.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
NEWMAN, DONALD, J., MR, JR

Mailing Address 720 MAYER DR

City SAINT CHARLES State MO Zip Code 63301-1511

FEC ID number of contributing federal political committee. C

Name of Employer NONE Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
210.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 02 / 2025

Transaction ID : SA11A.92279

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 1775.00

**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 27 OF 127	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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)  
**BergmanforCongress**

A. Full Name (Last, First, Middle Initial)  
**NEWMAN, DONALD, J., MR, JR**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**11 / 06 / 2025**

Mailing Address **720 MAYER DR**

Transaction ID : **SA11A.92612**

City  
**SAINT CHARLES**

State  
**MO**

Zip Code  
**63301-1511**

Amount of Each Receipt this Period  
**25.00**

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

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Memo Item  
 **CONTRIBUTION**

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**210.00**

B. Full Name (Last, First, Middle Initial)  
**OPPER, GARY, L., MR,**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 06 / 2025**

Mailing Address **PO BOX 709**

Transaction ID : **SA11A.92302**

City  
**GRAYLING**

State  
**MI**

Zip Code  
**49738-0709**

Amount of Each Receipt this Period  
**100.00**

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

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Memo Item  
 **CONTRIBUTION**

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**300.00**

C. Full Name (Last, First, Middle Initial)  
**OTTUM, DAVID, A., MR,**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**11 / 07 / 2025**

Mailing Address **N2532 COUNTY ROAD C**

Transaction ID : **SA11A.92621**

City  
**DARIEN**

State  
**WI**

Zip Code  
**53114-1436**

Amount of Each Receipt this Period  
**70.00**

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

Name of Employer  
**INFORMATION REQUESTED PER BEST EFF**

Occupation  
**INFORMATION REQUESTED PER BEST EFF**

Memo Item  
 **CONTRIBUTION**

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**225.00**

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

**195.00**

**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: PAGE 28 OF 127  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
RAYCRAFT, ALVIN, K., MR,  
Mailing Address 7993 BUSSA LN

City RAPID CITY State MI Zip Code 49676-9203

FEC ID number of contributing federal political committee. C

Name of Employer NONE Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1189.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 06 / 2025

Transaction ID : SA11A.92343

Amount of Each Receipt this Period  
198.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
REINHARD, DONALD, G., MR,  
Mailing Address 75 HARVARD AVE

City PALMERTON State PA Zip Code 18071-1212

FEC ID number of contributing federal political committee. C

Name of Employer PENCOR 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 Y  
10 / 08 / 2025

Transaction ID : SA11A.92121

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
RILEY, BRUCE, A., MR,  
Mailing Address 8 WOODS DR

City HARBOR SPRINGS State MI Zip Code 49740-1455

FEC ID number of contributing federal political committee. C

Name of Employer NONE Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 11 / 2025

Transaction ID : SA11A.92753

Amount of Each Receipt this Period  
200.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 648.00

**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 29 OF 127	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
RILEY, JOHN, MICHAEL, MR,  
Mailing Address 3600 MATADOR W APT 4

City TRAVERSE CITY	State MI	Zip Code 49684-4649
-----------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
325.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 12 / 2025

**Transaction ID : SA11A.92806**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
ROE, DON, D., MR,  
Mailing Address 1637 W MAY ST APT 1701

City WICHITA	State KS	Zip Code 67213-3497
-----------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC	Occupation INFORMATION REQUESTED PER BEST EFF
---	--

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 20 / 2025

**Transaction ID : SA11A.92285**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
ROE, DON, D., MR,  
Mailing Address 1637 W MAY ST APT 1701

City WICHITA	State KS	Zip Code 67213-3497
-----------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC	Occupation INFORMATION REQUESTED PER BEST EFF
---	--

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 06 / 2025

**Transaction ID : SA11A.92619**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	125.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
ROWE, LOWELL, R., LT COL,  
Mailing Address 36570 LANSBURY LN

City FARMINGTON	State MI	Zip Code 48335-2930
--------------------	-------------	------------------------

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

Name of Employer ROWE PROFESSIONAL HOME SERVICES	Occupation OWNER
---	---------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
220.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 14 / 2025

**Transaction ID : SA11A.92176**

Amount of Each Receipt this Period  
40.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
ROWE, LOWELL, R., LT COL,  
Mailing Address 36570 LANSBURY LN

City FARMINGTON	State MI	Zip Code 48335-2930
--------------------	-------------	------------------------

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

Name of Employer ROWE PROFESSIONAL HOME SERVICES	Occupation OWNER
---	---------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
220.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 13 / 2025

**Transaction ID : SA11A.92542**

Amount of Each Receipt this Period  
45.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
SCHALL, JAMES, E., MR,  
Mailing Address 415 MIFFLIN ST

City HUNTINGDON	State PA	Zip Code 16652-1535
--------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
--	--

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2025

**Transaction ID : SA11A.92566**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	585.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
**SCHNEEBECK, ROBERT, W., MR.**

Mailing Address 741 N MANASOTA KEY RD

City: ENGLEWOOD State: FL Zip Code: 34223-9758

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

Name of Employer: INFORMATION REQUESTED PER BEST EFF Occupation: INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 400.00

Date of Receipt: 11 / 19 / 2025

Transaction ID : SA11A.92530

Amount of Each Receipt this Period: 200.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SCHROEDER, WALTER, D., MR.**

Mailing Address 8101 LA PALMA DR

City: HUNTINGTON BEACH State: CA Zip Code: 92646-1655

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

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 550.00

Date of Receipt: 10 / 07 / 2025

Transaction ID : SA11A.92325

Amount of Each Receipt this Period: 200.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SCHROEDER, WALTER, D., MR.**

Mailing Address 8101 LA PALMA DR

City: HUNTINGTON BEACH State: CA Zip Code: 92646-1655

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

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 550.00

Date of Receipt: 11 / 11 / 2025

Transaction ID : SA11A.92651

Amount of Each Receipt this Period: 150.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 550.00

**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: PAGE 32 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
SCOTT, AUDREY, M., MRS,  
Mailing Address 9778 SW COQUILLE CT

City TUALATIN State OR Zip Code 97062-9528

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
293.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 07 / 2025

Transaction ID : SA11A.92741

Amount of Each Receipt this Period  
48.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
SENSKE, BERNARD, J., MR,  
Mailing Address 632 WOOD RD NW

City RAPID CITY State MI Zip Code 49676-9583

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
275.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 03 / 2025

Transaction ID : SA11A.92127

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
SENSKE, BERNARD, J., MR,  
Mailing Address 632 WOOD RD NW

City RAPID CITY State MI Zip Code 49676-9583

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
275.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 10 / 2025

Transaction ID : SA11A.92510

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 98.00

**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 33 OF 127	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
SHIRLEY, JANET, F., MS,  
Mailing Address 1905 NORTHWOOD DR

City TUPELO	State MS	Zip Code 38804-1020
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
--	--

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 06 / 2025

**Transaction ID : SA11A.92638**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
SLOANE, JOHN, D., MR,  
Mailing Address 47780 WESTLAKE DR

City SHELBY TOWNSHIP	State MI	Zip Code 48315-4564
-------------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2025

**Transaction ID : SA11A.92261**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
SMETZER, JEFFREY, A., MR,  
Mailing Address 615 E MAIN ST

City GAYLORD	State MI	Zip Code 49735-1773
-----------------	-------------	------------------------

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

Name of Employer KOLL LLC	Occupation PRESIDENT
------------------------------	-------------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 03 / 2025

**Transaction ID : SA11A.92362**

Amount of Each Receipt this Period  
200.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
SNYDER, SALLIE, F., MRS,  
Mailing Address 3226 SPRUCE ST

City: INDIAN RIVER State: MI Zip Code: 49749-5805

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 500.00

Date of Receipt: 10 / 01 / 2025  
Transaction ID : SA11A.92265

Amount of Each Receipt this Period: 250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
STEWART, SCOTT, E., MR,  
Mailing Address 4601 LAFAYETTE AVE

City: FORT WORTH State: TX Zip Code: 76107-3721

FEC ID number of contributing federal political committee: C

Name of Employer: STEWART PLLC Occupation: ATTORNEY

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 400.00

Date of Receipt: 10 / 02 / 2025  
Transaction ID : SA11A.92178

Amount of Each Receipt this Period: 50.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
STEWART, SCOTT, E., MR,  
Mailing Address 4601 LAFAYETTE AVE

City: FORT WORTH State: TX Zip Code: 76107-3721

FEC ID number of contributing federal political committee: C

Name of Employer: STEWART PLLC Occupation: ATTORNEY

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 400.00

Date of Receipt: 10 / 20 / 2025  
Transaction ID : SA11A.92179

Amount of Each Receipt this Period: 50.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 350.00

**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: PAGE 35 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
STEWART, SCOTT, E., MR,  
Mailing Address 4601 LAFAYETTE AVE

City: FORT WORTH State: TX Zip Code: 76107-3721

FEC ID number of contributing federal political committee: C

Name of Employer: STEWART PLLC Occupation: ATTORNEY

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 400.00

Date of Receipt: 12 / 01 / 2025  
Transaction ID : SA11A.92785

Amount of Each Receipt this Period: 50.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
SUNKLER, MARGARET, L., MRS,  
Mailing Address 88794 SHERRILL LN

City: BANDON State: OR Zip Code: 97411-7386

FEC ID number of contributing federal political committee: C

Name of Employer: INFORMATION REQUESTED PER BEST EFFC Occupation: INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 210.00

Date of Receipt: 10 / 06 / 2025  
Transaction ID : SA11A.92358

Amount of Each Receipt this Period: 35.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
SWAN, RICHARD, C., MR,  
Mailing Address 17020 JUDICIAL RD

City: LAKEVILLE State: MN Zip Code: 55044-7627

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 210.00

Date of Receipt: 11 / 06 / 2025  
Transaction ID : SA11A.92528

Amount of Each Receipt this Period: 35.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 120.00

**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: PAGE 36 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
TAYLER, BERNADETTE, LALONDE, MRS,  
Mailing Address 421 BELANGER ST

City: GROSSE POINTE FARM      State: MI      Zip Code: 48236-3201

FEC ID number of contributing federal political committee: C

Name of Employer: NONE      Occupation: RETIRED

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date: 415.00

Date of Receipt: 10 / 09 / 2025  
**Transaction ID : SA11A.92202**

Amount of Each Receipt this Period: 76.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
TAYLER, BERNADETTE, LALONDE, MRS,  
Mailing Address 421 BELANGER ST

City: GROSSE POINTE FARM      State: MI      Zip Code: 48236-3201

FEC ID number of contributing federal political committee: C

Name of Employer: NONE      Occupation: RETIRED

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date: 415.00

Date of Receipt: 12 / 01 / 2025  
**Transaction ID : SA11A.92793**

Amount of Each Receipt this Period: 76.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
THOMPSON, GREGORY, B., ,  
Mailing Address 224 E BAY BLVD S

City: TRAVERSE CITY      State: MI      Zip Code: 49686-3010

FEC ID number of contributing federal political committee: C

Name of Employer: THOMPSON PHARMACY      Occupation: PHARMACIST

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date: 1400.00

Date of Receipt: 10 / 31 / 2025  
**Transaction ID : SA11A.91114**

Amount of Each Receipt this Period: 100.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 252.00

**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: PAGE 37 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
THOMPSON, GREGORY, B., ,

Mailing Address 224 E BAY BLVD S

City TRAVERSE CITY	State MI	Zip Code 49686-3010
-----------------------	-------------	------------------------

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

Name of Employer THOMPSON PHARMACY	Occupation PHARMACIST
---------------------------------------	--------------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 28 / 2025

**Transaction ID : SA11A.92502**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
THOMPSON, GREGORY, B., ,

Mailing Address 224 E BAY BLVD S

City TRAVERSE CITY	State MI	Zip Code 49686-3010
-----------------------	-------------	------------------------

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

Name of Employer THOMPSON PHARMACY	Occupation PHARMACIST
---------------------------------------	--------------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 28 / 2025

**Transaction ID : SA11A.92812**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
TOMLINSON, JOSEPH, W., MR.,

Mailing Address 237 N LAKE SHORE DR

City HARBOR SPRINGS	State MI	Zip Code 49740-9118
------------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 13 / 2025

**Transaction ID : SA11A.92682**

Amount of Each Receipt this Period  
200.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s)  
for each category of the  
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(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
TUCKER, ANNE, G., MRS,  
Mailing Address 6181 PENINSULA DR

City TRVERSE CITY State MI Zip Code 49686-1913

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

Name of Employer NONE Occupation 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 Y Y  
11 / 14 / 2025

Transaction ID : SA11A.92740

Amount of Each Receipt this Period  
300.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
VANDERWALL, JERRY, D., ,  
Mailing Address 627 HILLOCK CT

City GRAND HAVEN State MI Zip Code 49417-1805

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 06 / 2025

Transaction ID : SA11A.92455

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
VANDERWALL, JERRY, D., ,  
Mailing Address 627 HILLOCK CT

City GRAND HAVEN State MI Zip Code 49417-1805

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 18 / 2025

Transaction ID : SA11A.92752

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 39 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
VRBANCIC, DANIEL, J., MR,  
Mailing Address 313 DESMOND DR

City: SCHAUMBURG State: IL Zip Code: 60193-

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 250.00

Date of Receipt: 10 / 21 / 2025  
Transaction ID : SA11A.92225

Amount of Each Receipt this Period: 250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
WALL, IRENE, B., MRS,  
Mailing Address 119 SHAWNEE TRL

City: PRUDENVILLE State: MI Zip Code: 48651-9727

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 400.00

Date of Receipt: 10 / 06 / 2025  
Transaction ID : SA11A.92378

Amount of Each Receipt this Period: 200.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
WELSH, KATHLEEN, T., MRS,  
Mailing Address 16524 GEORGE WASHINGTON DR

City: ROCKVILLE State: MD Zip Code: 20853-1210

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 280.00

Date of Receipt: 10 / 08 / 2025  
Transaction ID : SA11A.92398

Amount of Each Receipt this Period: 40.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 490.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
WELSH, KATHLEEN, T., MRS,  
Mailing Address 16524 GEORGE WASHINGTON DR

City ROCKVILLE	State MD	Zip Code 20853-1210
-------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
280.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 12 / 2025

**Transaction ID : SA11A.92703**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
WHEATLEY, BRADY, L., MR,  
Mailing Address 6758 SW COUNTY ROAD 1007

City RICH HILL	State MO	Zip Code 64779-1880
-------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC	Occupation INFORMATION REQUESTED PER BEST EFF
---	--

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
240.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 03 / 2025

**Transaction ID : SA11A.92356**

Amount of Each Receipt this Period  
35.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
WHEATLEY, BRADY, L., MR,  
Mailing Address 6758 SW COUNTY ROAD 1007

City RICH HILL	State MO	Zip Code 64779-1880
-------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC	Occupation INFORMATION REQUESTED PER BEST EFF
---	--

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
240.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 10 / 2025

**Transaction ID : SA11A.92673**

Amount of Each Receipt this Period  
30.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	115.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
WINFREE, JAMES, H., MR,  
Mailing Address 354 BAKER ST

City: KILGORE State: TX Zip Code: 75662-

FEC ID number of contributing federal political committee: C

Name of Employer: SELF EMPLOYED Occupation: TREE FARMER

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 500.00

Date of Receipt: 10 / 01 / 2025  
Transaction ID : SA11A.92427

Amount of Each Receipt this Period: 250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
WINFREE, JAMES, H., MR,  
Mailing Address 354 BAKER ST

City: KILGORE State: TX Zip Code: 75662-

FEC ID number of contributing federal political committee: C

Name of Employer: SELF EMPLOYED Occupation: TREE FARMER

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 500.00

Date of Receipt: 11 / 06 / 2025  
Transaction ID : SA11A.92737

Amount of Each Receipt this Period: 250.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
ZICK, ALFORD, E., MR, JR  
Mailing Address 11 ROLLING HILLS DR

City: BARRINGTON State: IL Zip Code: 60010-9333

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 350.00

Date of Receipt: 10 / 06 / 2025  
Transaction ID : SA11A.92236

Amount of Each Receipt this Period: 40.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 540.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
**MATCH-E-BE-NASH-SHE-WISH BAND OF POTTAWATOMI INDIANS**

Mailing Address 2872 MISSION DRIVE

City SHELBYVILLE State MI Zip Code 49344-9580

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

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 19 / 2025

**Transaction ID : SA11A.92476**

Amount of Each Receipt this Period  
3500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**PUBLIC AFFAIRS ASSOCIATES LLC**

Mailing Address 120 N WASHINGTON SQ  
STE 1050

City LANSING State MI Zip Code 48933-

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  
 10 / 30 / 2025

**Transaction ID : SA11A.91110**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

VERIFIED AS FEDERALLY PERMISSIBLE FUNDS;  
SEE ATTRIBUTION BELOW

**C.** Full Name (Last, First, Middle Initial)  
**BECHLER, REBECCA, , ,**

Mailing Address 120 NORTH WASHINGTON SQUARE  
STE 1060

City LANSING State MI Zip Code 48933-1617

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

Name of Employer Occupation  
PUBLIC AFFAIRS ASSOC  
CO MANAGING PARTNER

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 28 / 2025

**Transaction ID : SA11A.92814**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

VERIFIED AS FEDERALLY PERMISSIBLE FUNDS;  
PARTNERSHIP ATTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6000.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
**SAGINAW CHIPPEWA INDIAN TRIBE**

Mailing Address 7500 SOARING EAGLE BLVD.

City MT. PLEASANT State MI Zip Code 48858-7801

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  
11 / 19 / 2025

Transaction ID : SA11A.92475

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**THE CHICKASAW NATION**

Mailing Address 2020 LONNIE ABBOTT BLVD

City ADA State OK Zip Code 74820-

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

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 20 / 2025

Transaction ID : SA11A.90100

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION CO**

Mailing Address 251 H ST NW

City WASHINGTON State DC Zip Code 20001-2604

FEC ID number of contributing federal political committee. **C** C00797670

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
854.46

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2025

Transaction ID : SA11C.92467

Amount of Each Receipt this Period  
256.76

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 4500.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
ROSENBERG, ANDREW, , ,

Mailing Address 711 3RD AVENUE

City NEW YORK State NY Zip Code 10017-4014

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

Name of Employer CASSIN & CASSIN LLP Occupation ATTORNEY

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 27 2025

Transaction ID : SA11A.92468

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

EARMARKED FROM AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITIC

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

Mailing Address P.O. BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
39917.40

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 27 2025

Transaction ID : SA11C.91101

Amount of Each Receipt this Period  
3310.00

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**C.** Full Name (Last, First, Middle Initial)  
GRANTHAM, JONELLE, , ,

Mailing Address 3639 HAVEN VIEW CIRCLE

City BIRMINGHAM State AL Zip Code 35216-

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 22 2025

Transaction ID : SA11A.91102

Amount of Each Receipt this Period  
3300.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3550.00
<b>TOTAL</b> This Period (last page this line number only).....▶	30847.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
**MOOLENAAR FOR CONGRESS**

Mailing Address 5915 EASTMAN AVENUE  
SUITE 100

City MIDLAND State MI Zip Code 48640-6824

FEC ID number of contributing federal political committee. **C** C00561530

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1025.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 30 / 2025

**Transaction ID : SA11C.92813**

Amount of Each Receipt this Period  
1025.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**WALBERG FOR CONGRESS**

Mailing Address PO BOX 1362  
317 W WASHINGTON AVE

City JACKSON State MI Zip Code 49204-1362

FEC ID number of contributing federal political committee. **C** C00390724

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1025.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 17 / 2025

**Transaction ID : SA11C.92773**

Amount of Each Receipt this Period  
1025.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AAR CORP PAC**

Mailing Address 1100 N. WOOD DALE ROAD

City WOOD DALE State IL Zip Code 60191-1060

FEC ID number of contributing federal political committee. **C** C00625921

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 31 / 2025

**Transaction ID : SA11C.92841**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 3050.00

**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: PAGE 46 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
**AM GENERAL LLC POLITICAL ACTION COMMITTEE (AM GENERAL PAC)**

Mailing Address 1401 S. CLARK ST  
SUITE 1030

City ARLINGTON State VA Zip Code 22202-4165

FEC ID number of contributing federal political committee. **C** C00432856

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  
11 / 25 / 2025

**Transaction ID : SA11C.92503**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**AMERICA'S FUTURE, TOGETHER**

Mailing Address 824 S MILLEDGE AVE STE 101

City ATHENS State GA Zip Code 30605-1369

FEC ID number of contributing federal political committee. **C** C00490235

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 25 / 2025

**Transaction ID : SA11C.92480**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN ACADEMY OF PHYSICIAN ASSOCIATES PAC (PA PAC)**

Mailing Address 2318 MILL RD  
STE 1300

City ALEXANDRIA State VA Zip Code 22314-6868

FEC ID number of contributing federal political committee. **C** C00122499

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 31 / 2025

**Transaction ID : SA11C.92839**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**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: PAGE 47 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALIT

Mailing Address 1201 15TH STREET NW  
SUITE 400

City WASHINGTON State DC Zip Code 20005-2899

FEC ID number of contributing federal political committee. **C** C00358663

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 17 / 2025

Transaction ID : SA11C.92770

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALIT

Mailing Address 1201 15TH STREET NW  
SUITE 400

City WASHINGTON State DC Zip Code 20005-2899

FEC ID number of contributing federal political committee. **C** C00358663

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2025

Transaction ID : SA11C.92825

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
B BRIGADE MAJORITY FUND

Mailing Address PO BOX 1182

City BRIGHTON State MI Zip Code 48116-2782

FEC ID number of contributing federal political committee. **C** C00820787

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1025.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 17 / 2025

Transaction ID : SA11C.92772

Amount of Each Receipt this Period  
1025.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 3525.00

**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: PAGE 48 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
**BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION**

Mailing Address 1201 15TH STREET, NW

City WASHINGTON	State DC	Zip Code 20005-2842
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 17 / 2025

**Transaction ID : SA11C.92769**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DIRECT SUPPLY, INC. PARTNERS PAC (DSI PARTNERS PAC)**

Mailing Address 7301 WEST CHAMPIONS WAY

City MILWAUKEE	State WI	Zip Code 53223-1211
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00409516

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 23 / 2025

**Transaction ID : SA11C.92765**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ELEVANCE HEALTH, INC. POLITICAL ACTION COMMITTEE (ELEVANCE H**

Mailing Address 1001 PENNSYLVANIA AVENUE, NW  
SUITE 710

City WASHINGTON	State DC	Zip Code 20004-2513
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00197228

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2025

**Transaction ID : SA11C.92836**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 127
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
**FEDEX CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 942 S SHADY GROVE ROAD

City MEMPHIS	State TN	Zip Code 38120-4117
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00068692

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2025

**Transaction ID : SA11C.92835**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**FRIENDS OF WAYNE STATE**

Mailing Address PO BOX 44406

City DETROIT	State MI	Zip Code 48244-0406
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00452961

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2025

**Transaction ID : SA11C.92828**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**GENERAL ATOMICS PAC**

Mailing Address P.O. BOX 85608

City SAN DIEGO	State CA	Zip Code 92186-5608
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00215285

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 06 / 2025

**Transaction ID : SA11C.92117**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 50 OF 127	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
**GENERAL ATOMICS PAC**

Mailing Address P.O. BOX 85608

City SAN DIEGO	State CA	Zip Code 92186-5608
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00215285

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 17 / 2025

**Transaction ID : SA11C.92774**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**GENERAL MOTORS COMPANY PAC (GM PAC)**

Mailing Address 25 MASSACHUSETTS AVE NW  
STE 400

City WASHINGTON	State DC	Zip Code 20001-1427
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00076810

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2025

**Transaction ID : SA11C.92838**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**HONEYWELL INTERNATIONAL PAC**

Mailing Address 101 CONSTITUTION AVE NW  
STE 500W

City WASHINGTON	State DC	Zip Code 20001-2177
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2025

**Transaction ID : SA11C.92826**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

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

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

5500.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE 51 OF 127	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
**HUNTINGTON INGALLS INDUSTRIES, INC. EMPLOYEES PAC (HIIPAC)**

Mailing Address 300 M ST SE  
STE 350

City WASHINGTON	State DC	Zip Code 20003-3436
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00325092

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2025

**Transaction ID : SA11C.92831**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**LASTING INVESTMENTS STRENGTHENING AMERICA PAC**

Mailing Address PO BOX 327

City ROMEIO	State MI	Zip Code 48065-0327
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00764886

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 19 / 2025

**Transaction ID : SA11C.92810**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LEIDOS INC. PAC**

Mailing Address 301 LABORATORY RD

City OAK RIDGE	State TN	Zip Code 37830-6912
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00546234

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2025

**Transaction ID : SA11C.92837**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	7500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
LEO TECH PAC

Mailing Address 1515 S CAPITAL OF TEXAS HWY  
#220

City AUSTIN State TX Zip Code 78746-6544

FEC ID number of contributing federal political committee. **C** C00900142

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  
09 / 25 / 2025

Transaction ID : SA11C.89839

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION  
SEE REDESIGNATION

**B.** Full Name (Last, First, Middle Initial)  
LEO TECH PAC

Mailing Address 1515 S CAPITAL OF TEXAS HWY  
#220

City AUSTIN State TX Zip Code 78746-6544

FEC ID number of contributing federal political committee. **C** C00900142

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 01 / 2025

Transaction ID : SA11C.92777

Amount of Each Receipt this Period  
- 1500.00

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
LEO TECH PAC

Mailing Address 1515 S CAPITAL OF TEXAS HWY  
#220

City AUSTIN State TX Zip Code 78746-6544

FEC ID number of contributing federal political committee. **C** C00900142

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 01 / 2025

Transaction ID : SA11C.92778

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 53 OF 127	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
**MANTECH INTERNATIONAL CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address **2251 CORPORATE PARK DRIVE  
6TH FLOOR**

City <b>HERNDON</b>	State <b>VA</b>	Zip Code <b>20171-4839</b>
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C C00208983**

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

**Transaction ID : SA11C.92483**

Amount of Each Receipt this Period

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MICROSOFT CORPORATION STAKEHOLDERS VOLUNTARY PAC - MSVPAC**

Mailing Address **1 MICROSOFT WAY**

City <b>REDMOND</b>	State <b>WA</b>	Zip Code <b>98052-8300</b>
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C C00227546**

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

**Transaction ID : SA11C.92832**

Amount of Each Receipt this Period

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL RURAL LETTER CARRIERS' ASSOCIATION POLITICAL ACTION**

Mailing Address **1630 DUKE STREET  
2ND FLOOR**

City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22314-</b>
---------------------------	--------------------	---------------------------

FEC ID number of contributing federal political committee. **C C00072025**

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

**Transaction ID : SA11C.92118**

Amount of Each Receipt this Period

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="7500.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="7500.00"/>

**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 54 OF 127	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL READY MIXED CONCRETE ASSN. PAC (CONCRETEPAC)**

Mailing Address 66 CANAL CENTER PLAZA, SUITE 250

City ALEXANDRIA	State VA	Zip Code 22314-1568
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00114025

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 25 / 2025

**Transaction ID : SA11C.92482**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL RESTAURANT ASSOCIATION PAC (RESTAURANT PAC)**

Mailing Address 2055 L STREET, NW

City WASHINGTON	State DC	Zip Code 20036-4983
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00003764

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2025

**Transaction ID : SA11C.92834**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL STONE, SAND & GRAVEL ASSOCIATION ROCKPAC**

Mailing Address 66 CANAL CENTER PLZ  
STE 300

City ALEXANDRIA	State VA	Zip Code 22314-1576
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00089458

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2025

**Transaction ID : SA11C.92833**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	7000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
RAPTOR PAC

Mailing Address PO BOX 4864

City MIDLAND State TX Zip Code 79704-4864

FEC ID number of contributing federal political committee. **C** C00749481

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 25 / 2025

Transaction ID : SA11C.92484

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
SAFARI CLUB INTERNATIONAL PAC (SCI-PAC)

Mailing Address 654 RICHLAND HILLS SUITE 160

City SAN ANTONIO State TX Zip Code 78245-4084

FEC ID number of contributing federal political committee. **C** C00122101

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2025

Transaction ID : SA11C.92829

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
SEAL PAC SUPPORTING ELECTING AMERICAN LEADERS PAC

Mailing Address 1155 15TH ST NW

City WASHINGTON State DC Zip Code 20005-2706

FEC ID number of contributing federal political committee. **C** C00570226

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 23 / 2025

Transaction ID : SA11C.92766

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 4500.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 OF 127  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
**SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE**

Mailing Address 20 F STREET, NW  
SUITE 310 C

City WASHINGTON State DC Zip Code 20001-6702

FEC ID number of contributing federal political committee. **C** C00325936

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2025

Transaction ID : SA11C.92827

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**THE BOEING COMPANY PAC**

Mailing Address 929 LONG BRIDGE DR.

City ARLINGTON State VA Zip Code 22202-4208

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2025

Transaction ID : SA11C.92830

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**THE CATERPILLAR INC. EMPLOYEE POLITICAL ACTION COMMITTEE**

Mailing Address 100 NE ADAMS STREET

City PEORIA State IL Zip Code 61629-0001

FEC ID number of contributing federal political committee. **C** C00148031

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2025

Transaction ID : SA11C.92840

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 6000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 127
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A.** Full Name (Last, First, Middle Initial)  
**THE NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATION ACTION C**

Mailing Address 4301 WILSON BLVD

City ARLINGTON	State VA	Zip Code 22203-4419
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FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 25 / 2025

**Transaction ID : SA11C.92481**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**WARNER NORCROSS + JUDD FEDERAL PAC**

Mailing Address 150 OTTAWA AVE NW  
SUITE 1500

City GRAND RAPIDS	State MI	Zip Code 49503-
----------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C** C00893081

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 06 / 2025

**Transaction ID : SA11C.92114**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**WARNER NORCROSS + JUDD FEDERAL PAC**

Mailing Address 150 OTTAWA AVE NW  
SUITE 1500

City GRAND RAPIDS	State MI	Zip Code 49503-
----------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C** C00893081

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 06 / 2025

**Transaction ID : SA11C.92120**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	71075.00

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. LEELANAU COUNTY GOP</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2025
Mailing Address 7805 E ALPERS RD		FEC Identification Number C
City LAKE LEELANAU	State MI	Zip Code 49653-9632
Purpose of Disbursement EVENT TICKETS		Amount of Each Disbursement this Period 115.00
Candidate Name		Transaction ID : SB17.I22446
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. HOGGE, JAMES, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2025
Mailing Address 117 E FIFTH ST		FEC Identification Number C
City GAYLORD	State MI	Zip Code 49735-1225
Purpose of Disbursement FIELD CONSULTING		Amount of Each Disbursement this Period 2500.00
Candidate Name		Transaction ID : SB17.I23627
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. LIS, ANTHONY, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2025
Mailing Address 3585 BUNKER HILL RD #434		FEC Identification Number C
City ACME	State MI	Zip Code 49610-5004
Purpose of Disbursement STRATEGY CONSULTING		Amount of Each Disbursement this Period 2000.00
Candidate Name		Transaction ID : SB17.I23542
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4615.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)  
**A. MCCLURE, RANDY, , ,**

Date of Disbursement: **12 / 04 / 2025**

Mailing Address: **1297 LONDOLYN TERRACE NORTH**

City: **TRAVERSE CITY** State: **MI** Zip Code: **49686**

Purpose of Disbursement: **SEE MEMO ENTRY**

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **341.87**

Transaction ID: **SB17.I23594**

Memo Item

Full Name (Last, First, Middle Initial)  
**B. AUDIES RESTAURANT**

Date of Disbursement: **12 / 04 / 2025**

Mailing Address: **314 N NICOLET STREET**

City: **MACKINAW CITY** State: **MI** Zip Code: **49701-**

Purpose of Disbursement: **MEETING EXPENSE**

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **341.87**

Transaction ID: **SB17.I23595**

Memo Item

Full Name (Last, First, Middle Initial)  
**C. OUELLETTE, JODI, , ,**

Date of Disbursement: **11 / 13 / 2025**

Mailing Address: **702 WABASH STREET**

City: **ISHPEMING** State: **MI** Zip Code: **49849**

Purpose of Disbursement: **MILEAGE REIMBURSEMENT**

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **377.94**

Transaction ID: **SB17.I23548**

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ **719.81**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)  
**A. PAULY, LAUREN, , ,**

Mailing Address **3563 LA CASITA AVENUE  
APT 103**

City **TRAVERSE CITY** State **MI** Zip Code **49684**

Purpose of Disbursement **FIELD CONSULTING** Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State:  District:

Date of Disbursement: **10 / 30 / 2025**

FEC Identification Number **C**

Amount of Each Disbursement this Period **1500.00**

Transaction ID : **SB17.I23510**

Memo Item

Full Name (Last, First, Middle Initial)  
**B. SCHULZ, BRADY, , ,**

Mailing Address **1388 OPAL LAKE ROAD**

City **GAYLORD** State **MI** Zip Code **49735**

Purpose of Disbursement **SEE MEMO ENTRY** Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State:  District:

Date of Disbursement: **10 / 01 / 2025**

FEC Identification Number **C**

Amount of Each Disbursement this Period **346.70**

Transaction ID : **SB17.I22366**

Memo Item

Full Name (Last, First, Middle Initial)  
**C. SHEPLER'S MACKINAC ISLAND FERRY**

Mailing Address **556 E CENTRAL AVE**

City **MACKINAW CITY** State **MI** Zip Code **49701-9695**

Purpose of Disbursement **TRAVEL EXPENSE** Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State:  District:

Date of Disbursement: **10 / 01 / 2025**

FEC Identification Number **C**

Amount of Each Disbursement this Period **150.00**

Transaction ID : **SB17.I22368**

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ **1846.70**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 127			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)

**A. AC HOTEL**

Mailing Address 1112 19TH STREET NORTHWEST

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement LODGING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 27 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 988.88

Transaction ID : SB17.I23460

Memo Item

Full Name (Last, First, Middle Initial)

**B. AJ'S WALLEYE LODGE**

Mailing Address 35131 M-28

City BERGLAND State MI Zip Code 49910

Purpose of Disbursement CATERING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 06 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 725.19

Transaction ID : SB17.I22422

Memo Item

Full Name (Last, First, Middle Initial)

**C. AMAZON.COM**

Mailing Address 410 TERRY AVENUE NORTH

City SEATTLE State WA Zip Code 98109-

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 16 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 62.10

Transaction ID : SB17.I22423

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 1776.17

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. AMAZON.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2025
Mailing Address 410 TERRY AVENUE NORTH		FEC Identification Number C
City SEATTLE	State WA	Zip Code 98109-
Purpose of Disbursement OFFICE SUPPLIES	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 57.25	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I23462
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. AMAZON.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2025
Mailing Address 410 TERRY AVENUE NORTH		FEC Identification Number C
City SEATTLE	State WA	Zip Code 98109-
Purpose of Disbursement OFFICE SUPPLIES	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 57.25	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I23613
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2025
Mailing Address 4333 AMON CARTER BOULEVARD		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155-
Purpose of Disbursement AIRFARE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 132.80	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I22424
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	247.30
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 127			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)  
**A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City FORT WORTH State TX Zip Code 76155-

Purpose of Disbursement AIRFARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 31 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 85.00

Transaction ID : SB17.I23498

Memo Item

Full Name (Last, First, Middle Initial)  
**B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City FORT WORTH State TX Zip Code 76155-

Purpose of Disbursement AIRFARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 12 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 935.46

Transaction ID : SB17.I23541

Memo Item

Full Name (Last, First, Middle Initial)  
**C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City FORT WORTH State TX Zip Code 76155-

Purpose of Disbursement AIRFARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 24 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 95.49

Transaction ID : SB17.I23565

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 1115.95

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 127			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2025
Mailing Address 4333 AMON CARTER BOULEVARD			FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155-	Amount of Each Disbursement this Period 378.79
Purpose of Disbursement AIRFARE		Category/ Type	Transaction ID : SB17.I23620
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2025
Mailing Address 4333 AMON CARTER BOULEVARD			FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155-	Amount of Each Disbursement this Period 342.18
Purpose of Disbursement AIRFARE		Category/ Type	Transaction ID : SB17.I23652
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2025
Mailing Address 4333 AMON CARTER BOULEVARD			FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155-	Amount of Each Disbursement this Period 566.96
Purpose of Disbursement AIRFARE		Category/ Type	Transaction ID : SB17.I23657
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1287.93
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 65 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)  
**A. AUNTIE ANNES**

Mailing Address 5620 GLENRIDGE DRIVE

City ATLANTA State GA Zip Code 30342

Purpose of Disbursement CATERING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
12 / 10 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 350.92

Transaction ID : SB17.I23621

Memo Item

Full Name (Last, First, Middle Initial)  
**B. BENT'S CAMP RESORT**

Mailing Address 6882 SOUTH HELEN CREEK ROAD

City LAND O'LAKES State WI Zip Code 54540

Purpose of Disbursement CATERING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
10 / 06 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 253.46

Transaction ID : SB17.I22425

Memo Item

Full Name (Last, First, Middle Initial)  
**C. CAPITAL GRILLE**

Mailing Address 601 PENNSYLVANIA AVENUE NORTHWEST

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement MEETING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
11 / 12 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 294.36

Transaction ID : SB17.I23543

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 898.74

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 127			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2025
Mailing Address 300 FIRST ST SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-
Purpose of Disbursement MEETING EXPENSE	Candidate Name	Amount of Each Disbursement this Period 1961.64
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I23480
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2025
Mailing Address 300 FIRST ST SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-
Purpose of Disbursement MEETING EXPENSE	Candidate Name	Amount of Each Disbursement this Period 622.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I23557
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2025
Mailing Address 300 FIRST ST SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-
Purpose of Disbursement MEETING EXPENSE	Candidate Name	Amount of Each Disbursement this Period 181.28
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I23645
State: District:		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2765.45
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)  
**A. CAPITOL HILL CLUB**

Mailing Address **300 FIRST ST SE**

City **WASHINGTON** State **DC** Zip Code **20003-**

Purpose of Disbursement  
**MEETING EXPENSE**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
**12 / 16 / 2025**

FEC Identification Number  
**C**

Amount of Each Disbursement this Period  
**1165.91**

Transaction ID : **SB17.I23647**

Memo Item

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

Mailing Address **P.O. BOX 725489**

City **ATLANTA** State **GA** Zip Code **31139-2489**

Purpose of Disbursement  
**CATERING EXPENSE**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
**12 / 10 / 2025**

FEC Identification Number  
**C**

Amount of Each Disbursement this Period  
**435.01**

Transaction ID : **SB17.I23622**

Memo Item

Full Name (Last, First, Middle Initial)  
**C. CISCO LAKES**

Mailing Address **3994 EAST CISCO LAKE ROAD**

City **WATERSMEET** State **MI** Zip Code **49969**

Purpose of Disbursement  
**FACILITY RENTAL & CATERING EXPENSE**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
**10 / 06 / 2025**

FEC Identification Number  
**C**

Amount of Each Disbursement this Period  
**665.00**

Transaction ID : **SB17.I22428**

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ **2265.92**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 127			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)

**A. CITI CARD**

Mailing Address PO BOX 78045

City PHOENIX State AZ Zip Code 85062-8045

Purpose of Disbursement SEE MEMO ENTRIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
12 / 16 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 174.49

Transaction ID : SB17.I23646

Memo Item

Full Name (Last, First, Middle Initial)

**B. DELTA AIR LINES**

Mailing Address 1030 DELTA BOULEVARD

City ATLANTA State GA Zip Code 30354-

Purpose of Disbursement AIRFARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
12 / 16 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 152.40

Transaction ID : SB17.I23648

Memo Item

Full Name (Last, First, Middle Initial)

**C. WALMART**

Mailing Address 702 S.W. 8TH ST

City BENTONVILLE State AR Zip Code 72716-

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
12 / 16 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 8.14

Transaction ID : SB17.I23649

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 174.49

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. CLASSIC CITY BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2025
Mailing Address 2365 WEST BROAD STREET		FEC Identification Number C
City ATHENS	State GA	Zip Code 30606
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period 10.00
Candidate Name	Category/ Type	Transaction ID : SB17.I22429
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CLASSIC CITY BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2025
Mailing Address 2365 WEST BROAD STREET		FEC Identification Number C
City ATHENS	State GA	Zip Code 30606
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period 20.00
Candidate Name	Category/ Type	Transaction ID : SB17.I23544
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2025
Mailing Address 1593 SPRING HILL ROAD SUITE 400		FEC Identification Number C
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement SOFTWARE		Amount of Each Disbursement this Period 100.00
Candidate Name	Category/ Type	Transaction ID : SB17.I22430
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	130.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 127			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. CMDI</b>		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y
Mailing Address 1593 SPRING HILL ROAD SUITE 400		<input type="text"/> 10 / <input type="text"/> 29 / <input type="text"/> 2025
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement SOFTWARE	<input type="text"/> Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="text"/> 1000.00	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : SB17.I23482</b>	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. CMDI</b>		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y
Mailing Address 1593 SPRING HILL ROAD SUITE 400		<input type="text"/> 12 / <input type="text"/> 30 / <input type="text"/> 2025
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement SOFTWARE	<input type="text"/> Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="text"/> 1000.00	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : SB17.I23683</b>	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. CONSTANT CONTACT</b>		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y
Mailing Address 1601 TRAPELO RD		<input type="text"/> 10 / <input type="text"/> 13 / <input type="text"/> 2025
City WALTHAM	State MA	Zip Code 02451-7333
Purpose of Disbursement EMAIL PRODUCTION	<input type="text"/> Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="text"/> 67.00	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : SB17.I22431</b>	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<input type="text"/> 2067.00
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 127			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A. CONSTANT CONTACT**

Full Name (Last, First, Middle Initial)  
Mailing Address 1601 TRAPELO RD

City WALTHAM State MA Zip Code 02451-7333

Purpose of Disbursement EMAIL PRODUCTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 20 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 550.14

Transaction ID : SB17.I23481

Memo Item

**B. CONSTANT CONTACT**

Full Name (Last, First, Middle Initial)  
Mailing Address 1601 TRAPELO RD

City WALTHAM State MA Zip Code 02451-7333

Purpose of Disbursement EMAIL PRODUCTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 18 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 617.14

Transaction ID : SB17.I23558

Memo Item

**C. CONSTANT CONTACT**

Full Name (Last, First, Middle Initial)  
Mailing Address 1601 TRAPELO RD

City WALTHAM State MA Zip Code 02451-7333

Purpose of Disbursement EMAIL PRODUCTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 11 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 67.00

Transaction ID : SB17.I23643

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 1234.28

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 127			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

**A. CONSTANT CONTACT**

Full Name (Last, First, Middle Initial)  
Mailing Address 1601 TRAPELO RD

City WALTHAM State MA Zip Code 02451-7333

Purpose of Disbursement EMAIL PRODUCTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 18 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 550.14

Transaction ID : SB17.I23684

Memo Item

**B. CONSUMER CELLULAR**

Full Name (Last, First, Middle Initial)  
Mailing Address 9363 EAST BAHIA DRIVE

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement TELEPHONE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 13 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 30.33

Transaction ID : SB17.I22432

Memo Item

**C. CONSUMER CELLULAR**

Full Name (Last, First, Middle Initial)  
Mailing Address 9363 EAST BAHIA DRIVE

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement TELEPHONE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 05 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 30.38

Transaction ID : SB17.I23514

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 610.85

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 127			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. CONSUMER CELLULAR</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2025
Mailing Address 9363 EAST BAHIA DRIVE			FEC Identification Number C
City SCOTTSDALE	State AZ	Zip Code 85260	Amount of Each Disbursement this Period 30.38
Purpose of Disbursement TELEPHONE		Category/ Type	Transaction ID : SB17.I23602
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. COURTYARD MARRIOTT</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2025
Mailing Address 7750 WISCONSIN AVENUE			FEC Identification Number C
City BETHESDA	State MD	Zip Code 20814	Amount of Each Disbursement this Period 25.00
Purpose of Disbursement LODGING		Category/ Type	Transaction ID : SB17.I22433
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. DELAMAR HOTEL</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2025
Mailing Address 615 EAST FRONT STREET			FEC Identification Number C
City TRAVERSE CITY	State MI	Zip Code 49686	Amount of Each Disbursement this Period 9160.45
Purpose of Disbursement FACILITY RENTAL		Category/ Type	Transaction ID : SB17.I22434
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9215.83
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 127			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. DELTA AIR LINES</b>		M M / D D / Y Y Y Y 10 / 20 / 2025
Mailing Address 1030 DELTA BOULEVARD		FEC Identification Number
City ATLANTA	State GA	Zip Code 30354-
Purpose of Disbursement AIRFARE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.I22435	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. DELTA AIR LINES</b>		M M / D D / Y Y Y Y 10 / 23 / 2025
Mailing Address 1030 DELTA BOULEVARD		FEC Identification Number
City ATLANTA	State GA	Zip Code 30354-
Purpose of Disbursement AIRFARE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.I23464	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. DELTA AIR LINES</b>		M M / D D / Y Y Y Y 11 / 03 / 2025
Mailing Address 1030 DELTA BOULEVARD		FEC Identification Number
City ATLANTA	State GA	Zip Code 30354-
Purpose of Disbursement AIRFARE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.I23500	
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2299.56
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)

**A. DELTA AIR LINES**

Mailing Address 1030 DELTA BOULEVARD

City ATLANTA    State GA    Zip Code 30354-

Purpose of Disbursement AIRFARE

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General     Other (specify) ▼

State:    District:

Date of Disbursement: M M / D D / Y Y Y Y  
11 / 14 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 58.82

Transaction ID : SB17.I23545

Memo Item

Full Name (Last, First, Middle Initial)

**B. DELTA AIR LINES**

Mailing Address 1030 DELTA BOULEVARD

City ATLANTA    State GA    Zip Code 30354-

Purpose of Disbursement AIRFARE

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General     Other (specify) ▼

State:    District:

Date of Disbursement: M M / D D / Y Y Y Y  
12 / 02 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 552.16

Transaction ID : SB17.I23580

Memo Item

Full Name (Last, First, Middle Initial)

**C. DELTA AIR LINES**

Mailing Address 1030 DELTA BOULEVARD

City ATLANTA    State GA    Zip Code 30354-

Purpose of Disbursement AIRFARE

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General     Other (specify) ▼

State:    District:

Date of Disbursement: M M / D D / Y Y Y Y  
12 / 17 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 639.18

Transaction ID : SB17.I23653

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 1250.16

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)

**A. DELTA AIR LINES**

Mailing Address 1030 DELTA BOULEVARD

City ATLANTA State GA Zip Code 30354-

Purpose of Disbursement AIRFARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 1024.86

Transaction ID : SB17.I23658

Memo Item

Full Name (Last, First, Middle Initial)

**B. DEMOCRACY ENGINE LLC**

Mailing Address 2125 14TH STREET NORTHWEST

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement CC TRANSACTION FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 20 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 0.78

Transaction ID : SB17.I23511

Memo Item

Full Name (Last, First, Middle Initial)

**C. DEMOCRACY ENGINE LLC**

Mailing Address 2125 14TH STREET NORTHWEST

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement CC TRANSACTION FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 05 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 12.50

Transaction ID : SB17.I23559

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 1038.14

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. DEMOCRACY ENGINE LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2025
Mailing Address 2125 14TH STREET NORTHWEST		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20009
Purpose of Disbursement CC TRANSACTION FEES		Amount of Each Disbursement this Period 1.27
Candidate Name		Transaction ID : SB17.I23586
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DEMOCRACY ENGINE LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2025
Mailing Address 2125 14TH STREET NORTHWEST		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20009
Purpose of Disbursement CC TRANSACTION FEES		Amount of Each Disbursement this Period 0.78
Candidate Name		Transaction ID : SB17.I23587
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DEMOCRACY ENGINE LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2025
Mailing Address 2125 14TH STREET NORTHWEST		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20009
Purpose of Disbursement CC TRANSACTION FEES		Amount of Each Disbursement this Period 0.78
Candidate Name		Transaction ID : SB17.I23685
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2.83
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 78 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)

**A. DIRECT MAIL PROCESSORS**

Mailing Address 1150 CONRAD COURT

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement DIRECT MAIL CAGING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 09 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 883.50

Transaction ID : SB17.I23532

Memo Item

Full Name (Last, First, Middle Initial)

**B. DIRECT MAIL PROCESSORS**

Mailing Address 1150 CONRAD COURT

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement DIRECT MAIL CAGING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 06 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 868.11

Transaction ID : SB17.I23616

Memo Item

Full Name (Last, First, Middle Initial)

**C. DIRECT MAIL PROCESSORS**

Mailing Address 1150 CONRAD COURT

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement DIRECT MAIL CAGING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 11 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 868.67

Transaction ID : SB17.I23679

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 2620.28

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 79 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. DOORDASH</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2025
Mailing Address 303 2ND STREET		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement MEETING EXPENSE		Amount of Each Disbursement this Period 99.21
Candidate Name		Transaction ID : SB17.I22436
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DOORDASH</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2025
Mailing Address 303 2ND STREET		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement MEETING EXPENSE		Amount of Each Disbursement this Period 57.59
Candidate Name		Transaction ID : SB17.I23465
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DOORDASH</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2025
Mailing Address 303 2ND STREET		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement MEETING EXPENSE		Amount of Each Disbursement this Period 27.32
Candidate Name		Transaction ID : SB17.I23501
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	184.12
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. DOORDASH</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2025
Mailing Address 303 2ND STREET		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement MEETING EXPENSE		Amount of Each Disbursement this Period 44.45
Candidate Name		Transaction ID : SB17.I23515
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State:                  District:		

Full Name (Last, First, Middle Initial) <b>B. DOORDASH</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2025
Mailing Address 303 2ND STREET		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement MEETING EXPENSE		Amount of Each Disbursement this Period 45.85
Candidate Name		Transaction ID : SB17.I23659
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State:                  District:		

Full Name (Last, First, Middle Initial) <b>C. DUCKS UNLIMITED INC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2025
Mailing Address SHELBY FARMS PARK, 1 WATERFOWL WAY		FEC Identification Number C
City MEMPHIS	State TN	Zip Code 38120-
Purpose of Disbursement EVENT TICKETS		Amount of Each Disbursement this Period 112.70
Candidate Name		Transaction ID : SB17.I23546
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State:                  District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	203.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 81 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>A. ELITE CARD PROCESSING</b>		M M / D D / Y Y Y Y 10 / 02 / 2025	
Mailing Address 13701 MAUGANSVILLE ROAD		FEC Identification Number	
City HAGERSTOWN	State MD	Zip Code 21740	<b>C</b>
Purpose of Disbursement CC TRANSACTION FEES		Amount of Each Disbursement this Period	
Candidate Name		79.73	
Office Sought:	Disbursement For:	Transaction ID : SB17.I23529	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item	
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>B. ELITE CARD PROCESSING</b>		M M / D D / Y Y Y Y 11 / 03 / 2025	
Mailing Address 13701 MAUGANSVILLE ROAD		FEC Identification Number	
City HAGERSTOWN	State MD	Zip Code 21740	<b>C</b>
Purpose of Disbursement CC TRANSACTION FEES		Amount of Each Disbursement this Period	
Candidate Name		258.02	
Office Sought:	Disbursement For:	Transaction ID : SB17.I23614	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item	
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>C. ELITE CARD PROCESSING</b>		M M / D D / Y Y Y Y 12 / 02 / 2025	
Mailing Address 13701 MAUGANSVILLE ROAD		FEC Identification Number	
City HAGERSTOWN	State MD	Zip Code 21740	<b>C</b>
Purpose of Disbursement CC TRANSACTION FEES		Amount of Each Disbursement this Period	
Candidate Name		123.80	
Office Sought:	Disbursement For:	Transaction ID : SB17.I23675	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item	
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	461.55
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 127			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. EXPEDIA</b>		M M / D D / Y Y Y Y 12 / 10 / 2025
Mailing Address 333 108TH AVE		FEC Identification Number
City BELLEVUE	State WA	Zip Code 98004-
Purpose of Disbursement LODGING		Category/ Type
Candidate Name		
Office Sought:	Disbursement For:	Amount of Each Disbursement this Period
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	234.82
State: District:		<b>Transaction ID : SB17.I23623</b>
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. EXPEDIA</b>		M M / D D / Y Y Y Y 12 / 17 / 2025
Mailing Address 333 108TH AVE		FEC Identification Number
City BELLEVUE	State WA	Zip Code 98004-
Purpose of Disbursement LODGING		Category/ Type
Candidate Name		
Office Sought:	Disbursement For:	Amount of Each Disbursement this Period
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	- 234.82
State: District:		<b>Transaction ID : SB17.I23654</b>
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. FRESHWATER TAVERN</b>		M M / D D / Y Y Y Y 10 / 03 / 2025
Mailing Address 7146 P ROAD		FEC Identification Number
City GLADSTONE	State MI	Zip Code 49837
Purpose of Disbursement MEETING EXPENSE		Category/ Type
Candidate Name		
Office Sought:	Disbursement For:	Amount of Each Disbursement this Period
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	265.64
State: District:		<b>Transaction ID : SB17.I22440</b>
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	265.64
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)

## A. FULFILLMENT SOLUTIONS INC.

Date of Disbursement

M M / D D / Y Y Y Y  
10 / 16 / 2025

Mailing Address 44970 FALCON PLACE

FEC Identification Number

C

City STERLING State VA Zip Code 20166

Amount of Each Disbursement this Period

1106.08

Purpose of Disbursement PRINTING EXPENSE

Transaction ID : SB17.I23533

Candidate Name

Memo Item

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Full Name (Last, First, Middle Initial)

## B. FULFILLMENT SOLUTIONS INC.

Date of Disbursement

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

Mailing Address 44970 FALCON PLACE

FEC Identification Number

C

City STERLING State VA Zip Code 20166

Amount of Each Disbursement this Period

2617.24

Purpose of Disbursement PRINTING EXPENSE

Transaction ID : SB17.I23535

Candidate Name

Memo Item

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Full Name (Last, First, Middle Initial)

## C. FULFILLMENT SOLUTIONS INC.

Date of Disbursement

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

Mailing Address 44970 FALCON PLACE

FEC Identification Number

C

City STERLING State VA Zip Code 20166

Amount of Each Disbursement this Period

2352.00

Purpose of Disbursement PRINTING EXPENSE

Transaction ID : SB17.I23540

Candidate Name

Memo Item

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

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

6075.32

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 84 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)  
**A. FULFILLMENT SOLUTIONS INC.**

Mailing Address 44970 FALCON PLACE

City STERLING State VA Zip Code 20166

Purpose of Disbursement PRINTING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 26 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 1160.02

Transaction ID : SB17.I23619

Memo Item

Full Name (Last, First, Middle Initial)  
**B. FULFILLMENT SOLUTIONS INC.**

Mailing Address 44970 FALCON PLACE

City STERLING State VA Zip Code 20166

Purpose of Disbursement POSTAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 19 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 6234.00

Transaction ID : SB17.I23681

Memo Item

Full Name (Last, First, Middle Initial)  
**C. FULFILLMENT SOLUTIONS INC.**

Mailing Address 44970 FALCON PLACE

City STERLING State VA Zip Code 20166

Purpose of Disbursement POSTAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 3026.94

Transaction ID : SB17.I23682

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 10420.96

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 85 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)

**A. FUN WATERS**

Mailing Address **FUN STREET SOUTHEAST**

City **LOWELL** State **MI** Zip Code **49331**

Purpose of Disbursement **MEETING EXPENSE**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: **12 / 05 / 2025**

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **200.00**

Transaction ID : **SB17.I23604**

Memo Item

Full Name (Last, First, Middle Initial)

**B. GAYLORD RIGHT TO LIFE**

Mailing Address **P.O. BOX 1461**

City **GAYLORD** State **MI** Zip Code **49734**

Purpose of Disbursement **EVENT TICKETS**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: **10 / 14 / 2025**

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **412.00**

Transaction ID : **SB17.I23430**

Memo Item

Full Name (Last, First, Middle Initial)

**C. GLADHANDER**

Mailing Address **130 EAST TENTH STREET**

City **TRAVERSE CITY** State **MI** Zip Code **49684**

Purpose of Disbursement **MEETING EXPENSE**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: **10 / 08 / 2025**

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **230.63**

Transaction ID : **SB17.I22441**

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ **842.63**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 127			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. GODADDY.COM</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2025		
Mailing Address 14455 N HAYDEN RD. STE 226			FEC Identification Number <b>C</b>		
City SCOTTSDALE	State AZ	Zip Code 85260-	Amount of Each Disbursement this Period 222.40		
Purpose of Disbursement EMAIL SERVICES		Category/ Type	Transaction ID : <b>SB17.I22442</b>		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. GODADDY.COM</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2025		
Mailing Address 14455 N HAYDEN RD. STE 226			FEC Identification Number <b>C</b>		
City SCOTTSDALE	State AZ	Zip Code 85260-	Amount of Each Disbursement this Period 49.96		
Purpose of Disbursement EMAIL SERVICES		Category/ Type	Transaction ID : <b>SB17.I23466</b>		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. GODADDY.COM</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2025		
Mailing Address 14455 N HAYDEN RD. STE 226			FEC Identification Number <b>C</b>		
City SCOTTSDALE	State AZ	Zip Code 85260-	Amount of Each Disbursement this Period 12.19		
Purpose of Disbursement EMAIL SERVICES		Category/ Type	Transaction ID : <b>SB17.I23502</b>		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	284.55
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 87 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. GODADDY.COM</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2025
Mailing Address 14455 N HAYDEN RD. STE 226			FEC Identification Number C
City SCOTTSDALE	State AZ	Zip Code 85260-	Amount of Each Disbursement this Period 19.98
Purpose of Disbursement EMAIL SERVICES		Category/ Type	Transaction ID : SB17.I23517
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. GODADDY.COM</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2025
Mailing Address 14455 N HAYDEN RD. STE 226			FEC Identification Number C
City SCOTTSDALE	State AZ	Zip Code 85260-	Amount of Each Disbursement this Period 39.97
Purpose of Disbursement EMAIL SERVICES		Category/ Type	Transaction ID : SB17.I23547
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. GODADDY.COM</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2025
Mailing Address 14455 N HAYDEN RD. STE 226			FEC Identification Number C
City SCOTTSDALE	State AZ	Zip Code 85260-	Amount of Each Disbursement this Period 49.96
Purpose of Disbursement EMAIL SERVICES		Category/ Type	Transaction ID : SB17.I23566
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	109.91
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 127			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. GODADDY.COM</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2025		
Mailing Address 14455 N HAYDEN RD. STE 226			FEC Identification Number <b>C</b>		
City SCOTTSDALE	State AZ	Zip Code 85260-	Amount of Each Disbursement this Period 9.99		
Purpose of Disbursement EMAIL SERVICES		Category/ Type	Transaction ID : <b>SB17.I23605</b>		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. GODADDY.COM</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2025		
Mailing Address 14455 N HAYDEN RD. STE 226			FEC Identification Number <b>C</b>		
City SCOTTSDALE	State AZ	Zip Code 85260-	Amount of Each Disbursement this Period 49.96		
Purpose of Disbursement EMAIL SERVICES		Category/ Type	Transaction ID : <b>SB17.I23624</b>		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. GODADDY.COM</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2025		
Mailing Address 14455 N HAYDEN RD. STE 226			FEC Identification Number <b>C</b>		
City SCOTTSDALE	State AZ	Zip Code 85260-	Amount of Each Disbursement this Period 49.96		
Purpose of Disbursement EMAIL SERVICES		Category/ Type	Transaction ID : <b>SB17.I23660</b>		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	109.91
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)  
**A. HAMPTON INN & SUITES**

Mailing Address 920 SPRING ST.

City PETOSKEY State MI Zip Code 49770-

Purpose of Disbursement LODGING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 08 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 522.58

Transaction ID : SB17.I22443

Memo Item

Full Name (Last, First, Middle Initial)  
**B. HONEYBAKED HAM**

Mailing Address 3875 MANSELL ROAD

City ALPHARETTA State GA Zip Code 30022-1532

Purpose of Disbursement MEEITNG EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 12 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 402.30

Transaction ID : SB17.I23625

Memo Item

Full Name (Last, First, Middle Initial)  
**C. HONEYBAKED HAM**

Mailing Address 3875 MANSELL ROAD

City ALPHARETTA State GA Zip Code 30022-1532

Purpose of Disbursement MEEITNG EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 22 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: - 3.74

Transaction ID : SB17.I23662

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 921.14

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 127			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)

**A. HOTELS.COM**

Mailing Address 10440 NORTH CENTRAL EXPRESSWAY

City DALLAS State TX Zip Code 75231-

Purpose of Disbursement LODGING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 22 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 244.25

Transaction ID : SB17.I23467

Memo Item

Full Name (Last, First, Middle Initial)

**B. HOTELS.COM**

Mailing Address 10440 NORTH CENTRAL EXPRESSWAY

City DALLAS State TX Zip Code 75231-

Purpose of Disbursement LODGING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 28 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 179.18

Transaction ID : SB17.I23567

Memo Item

Full Name (Last, First, Middle Initial)

**C. HOTELS.COM**

Mailing Address 10440 NORTH CENTRAL EXPRESSWAY

City DALLAS State TX Zip Code 75231-

Purpose of Disbursement LODGING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 02 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 291.55

Transaction ID : SB17.I23581

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 714.98

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 91 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)

**A. HOTELS.COM**

Mailing Address 10440 NORTH CENTRAL EXPRESSWAY

City DALLAS State TX Zip Code 75231-

Purpose of Disbursement LODGING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 08 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 287.28

Transaction ID : SB17.I23606

Memo Item

Full Name (Last, First, Middle Initial)

**B. HOTELS.COM**

Mailing Address 10440 NORTH CENTRAL EXPRESSWAY

City DALLAS State TX Zip Code 75231-

Purpose of Disbursement LODGING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 287.20

Transaction ID : SB17.I23663

Memo Item

Full Name (Last, First, Middle Initial)

**C. HSP DIRECT LLC**

Mailing Address 20130 LAKEVIEW CENTER PLAZA

City ASHBURN State VA Zip Code 20147

Purpose of Disbursement DIRECT MAIL MANAGEMENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 23 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 1725.00

Transaction ID : SB17.I23536

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 2299.48

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 92 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. HSP DIRECT LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2025
Mailing Address 20130 LAKEVIEW CENTER PLAZA		FEC Identification Number C
City ASHBURN	State VA	Zip Code 20147
Purpose of Disbursement DIRECT MAIL MANAGEMENT		Amount of Each Disbursement this Period 531.33
Candidate Name		Transaction ID : SB17.I23538
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. HSP DIRECT LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2025
Mailing Address 20130 LAKEVIEW CENTER PLAZA		FEC Identification Number C
City ASHBURN	State VA	Zip Code 20147
Purpose of Disbursement DIRECT MAIL MANAGEMENT		Amount of Each Disbursement this Period 518.87
Candidate Name		Transaction ID : SB17.I23677
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. INSTACART</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2025
Mailing Address 50 BEALE STREET		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94105
Purpose of Disbursement CATERING EXPENSE		Amount of Each Disbursement this Period 236.62
Candidate Name		Transaction ID : SB17.I23626
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1286.82
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)

**A. INSTACART**

Mailing Address 50 BEALE STREET

City SAN FRANCISCO    State CA    Zip Code 94105

Purpose of Disbursement CATERING EXPENSE

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General     Other (specify) ▼

State:    District:

Date of Disbursement: 12 / 22 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 123.67

Transaction ID : SB17.I23664

Memo Item

Full Name (Last, First, Middle Initial)

**B. LILAC TREE SUITES**

Mailing Address 7372 MAIN ST

City MACKINAC ISLAND    State MI    Zip Code 49757-

Purpose of Disbursement LODGING

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General     Other (specify) ▼

State:    District:

Date of Disbursement: 10 / 14 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 677.43

Transaction ID : SB17.I22447

Memo Item

Full Name (Last, First, Middle Initial)

**C. LILAC TREE SUITES**

Mailing Address 7372 MAIN ST

City MACKINAC ISLAND    State MI    Zip Code 49757-

Purpose of Disbursement LODGING

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General     Other (specify) ▼

State:    District:

Date of Disbursement: 10 / 27 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 677.43

Transaction ID : SB17.I23469

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 1478.53

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 127			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. LYFT</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2025
Mailing Address 185 BERRY STREET		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement TRAVEL EXPENSE		Amount of Each Disbursement this Period 95.35
Candidate Name		Transaction ID : SB17.I23519
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. LYFT</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2025
Mailing Address 185 BERRY STREET		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement TRAVEL EXPENSE		Amount of Each Disbursement this Period 24.92
Candidate Name		Transaction ID : SB17.I23644
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MARRIOTT HOTELS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2025
Mailing Address 10400 FERNWOOD RD		FEC Identification Number C
City BETHESDA	State MD	Zip Code 20817-
Purpose of Disbursement LODGING		Amount of Each Disbursement this Period 389.83
Candidate Name		Transaction ID : SB17.I23425
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	510.10
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 127			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. MARRIOTT HOTELS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2025
Mailing Address 10400 FERNWOOD RD		FEC Identification Number C
City BETHESDA	State MD	Zip Code 20817-
Purpose of Disbursement LODGING		Amount of Each Disbursement this Period - 295.18
Candidate Name		Transaction ID : SB17.I23520
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MARRIOTT HOTELS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2025
Mailing Address 10400 FERNWOOD RD		FEC Identification Number C
City BETHESDA	State MD	Zip Code 20817-
Purpose of Disbursement LODGING		Amount of Each Disbursement this Period 183.80
Candidate Name		Transaction ID : SB17.I23628
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MARRIOTT HOTELS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2025
Mailing Address 10400 FERNWOOD RD		FEC Identification Number C
City BETHESDA	State MD	Zip Code 20817-
Purpose of Disbursement LODGING		Amount of Each Disbursement this Period 215.58
Candidate Name		Transaction ID : SB17.I23665
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	104.20
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 96 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. MARY'S BISTRO</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2025
Mailing Address 7463 MAIN STREET		FEC Identification Number C
City MACKINAC ISLAND	State MI	Zip Code 49757-
Purpose of Disbursement MEETING EXPENSE		Amount of Each Disbursement this Period 192.85
Candidate Name		Transaction ID : SB17.I23470
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MEIJER STORE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2025
Mailing Address 2929 WALKER AVE		FEC Identification Number C
City GRAND RAPIDS	State MI	Zip Code 49544-
Purpose of Disbursement OFFICE SUPPLIES		Amount of Each Disbursement this Period 407.21
Candidate Name		Transaction ID : SB17.I23568
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MEIJER STORE</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2025
Mailing Address 2929 WALKER AVE		FEC Identification Number C
City GRAND RAPIDS	State MI	Zip Code 49544-
Purpose of Disbursement OFFICE SUPPLIES		Amount of Each Disbursement this Period 179.33
Candidate Name		Transaction ID : SB17.I23608
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	779.39
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 97 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. MIDDLETOWN VALLEY BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2025
Mailing Address 1101 PROFESSIONAL COURT		FEC Identification Number C
City HAGERSTOWN	State MD	Zip Code 21740
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period 57.15
Candidate Name		Transaction ID : SB17.I23530
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MIDDLETOWN VALLEY BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2025
Mailing Address 1101 PROFESSIONAL COURT		FEC Identification Number C
City HAGERSTOWN	State MD	Zip Code 21740
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period 54.36
Candidate Name		Transaction ID : SB17.I23615
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MIDDLETOWN VALLEY BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2025
Mailing Address 1101 PROFESSIONAL COURT		FEC Identification Number C
City HAGERSTOWN	State MD	Zip Code 21740
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period 48.92
Candidate Name		Transaction ID : SB17.I23676
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	160.43
<b>TOTAL</b> This Period (last page this line number only).....▶	



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)  
**A. ONPOINT DATA STRATEGY LLC**

Mailing Address 20130 LAKEVIEW CENTER PLAZA  
STE 300

City ASHBURN    State VA    Zip Code 20147

Purpose of Disbursement  
DIRECT MAIL PROCESSING

Candidate Name

Office Sought:  House     Senate     President  
Disbursement For:  Primary     General  
 Other (specify) ▼

State:    District:

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 02 / 2025

FEC Identification Number  
**C**

Amount of Each Disbursement this Period  
270.00

Transaction ID : SB17.I23531

Memo Item

Full Name (Last, First, Middle Initial)  
**B. ONPOINT DATA STRATEGY LLC**

Mailing Address 20130 LAKEVIEW CENTER PLAZA  
STE 300

City ASHBURN    State VA    Zip Code 20147

Purpose of Disbursement  
DIRECT MAIL PROCESSING

Candidate Name

Office Sought:  House     Senate     President  
Disbursement For:  Primary     General  
 Other (specify) ▼

State:    District:

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 16 / 2025

FEC Identification Number  
**C**

Amount of Each Disbursement this Period  
265.52

Transaction ID : SB17.I23534

Memo Item

Full Name (Last, First, Middle Initial)  
**C. ONPOINT DATA STRATEGY LLC**

Mailing Address 20130 LAKEVIEW CENTER PLAZA  
STE 300

City ASHBURN    State VA    Zip Code 20147

Purpose of Disbursement  
DIRECT MAIL PROCESSING

Candidate Name

Office Sought:  House     Senate     President  
Disbursement For:  Primary     General  
 Other (specify) ▼

State:    District:

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 23 / 2025

FEC Identification Number  
**C**

Amount of Each Disbursement this Period  
296.25

Transaction ID : SB17.I23537

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 831.77

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 127			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)  
**A. ONPOINT DATA STRATEGY LLC**

Mailing Address 20130 LAKEVIEW CENTER PLAZA  
STE 300

City ASHBURN State VA Zip Code 20147

Purpose of Disbursement  
DIRECT MAIL PROCESSING

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 30 / 2025

FEC Identification Number  
C

Amount of Each Disbursement this Period  
1377.93

Transaction ID : SB17.I23539

Memo Item

Full Name (Last, First, Middle Initial)  
**B. ONPOINT DATA STRATEGY LLC**

Mailing Address 20130 LAKEVIEW CENTER PLAZA  
STE 300

City ASHBURN State VA Zip Code 20147

Purpose of Disbursement  
DIRECT MAIL PROCESSING

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
11 / 06 / 2025

FEC Identification Number  
C

Amount of Each Disbursement this Period  
270.00

Transaction ID : SB17.I23617

Memo Item

Full Name (Last, First, Middle Initial)  
**C. ONPOINT DATA STRATEGY LLC**

Mailing Address 20130 LAKEVIEW CENTER PLAZA  
STE 300

City ASHBURN State VA Zip Code 20147

Purpose of Disbursement  
DIRECT MAIL PROCESSING

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
11 / 20 / 2025

FEC Identification Number  
C

Amount of Each Disbursement this Period  
265.38

Transaction ID : SB17.I23618

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 1913.31

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 101 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. ONPOINT DATA STRATEGY LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2025
Mailing Address 20130 LAKEVIEW CENTER PLAZA STE 300		FEC Identification Number C
City ASHBURN	State VA	Zip Code 20147
Purpose of Disbursement DIRECT MAIL PROCESSING		Amount of Each Disbursement this Period 270.00
Candidate Name		Transaction ID : SB17.I23678
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ONPOINT DATA STRATEGY LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2025
Mailing Address 20130 LAKEVIEW CENTER PLAZA STE 300		FEC Identification Number C
City ASHBURN	State VA	Zip Code 20147
Purpose of Disbursement DIRECT MAIL PROCESSING		Amount of Each Disbursement this Period 270.00
Candidate Name		Transaction ID : SB17.I23680
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PALETTE BISTRO</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2025
Mailing Address 321 BAY STREET		FEC Identification Number C
City PETOSKEY	State MI	Zip Code 49770-
Purpose of Disbursement MEETING EXPENSE		Amount of Each Disbursement this Period 234.51
Candidate Name		Transaction ID : SB17.I23472
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	774.51
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)  
**A. PEGASUS TAVERNA**

Mailing Address **558 MONROE ST**

City **DETRIOT**    State **MI**    Zip Code **48226**

Purpose of Disbursement  
**TRAVEL EXPENSE**

Candidate Name

Office Sought:  House     Senate     President  
Disbursement For:  Primary     General  
 Other (specify) ▼

State:    District:

Date of Disbursement  
**10 / 09 / 2025**

FEC Identification Number  
**C**

Amount of Each Disbursement this Period  
**213.31**

**Transaction ID : SB17.I23459**

Memo Item

Full Name (Last, First, Middle Initial)  
**B. POPPYCOCKS RESTAURANT**

Mailing Address **128 EAST FRONT STREET**

City **TRAVERSE CITY**    State **MI**    Zip Code **49684-2509**

Purpose of Disbursement  
**MEETING EXPENSE**

Candidate Name

Office Sought:  House     Senate     President  
Disbursement For:  Primary     General  
 Other (specify) ▼

State:    District:

Date of Disbursement  
**11 / 03 / 2025**

FEC Identification Number  
**C**

Amount of Each Disbursement this Period  
**341.11**

**Transaction ID : SB17.I23504**

Memo Item

Full Name (Last, First, Middle Initial)  
**C. PRINT GLOBE**

Mailing Address **3500 COMSOUTH DR**

City **AUSTIN**    State **TX**    Zip Code **78744**

Purpose of Disbursement  
**PRINTING**

Candidate Name

Office Sought:  House     Senate     President  
Disbursement For:  Primary     General  
 Other (specify) ▼

State:    District:

Date of Disbursement  
**11 / 21 / 2025**

FEC Identification Number  
**C**

Amount of Each Disbursement this Period  
**513.15**

**Transaction ID : SB17.I23572**

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ **1067.57**

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 127			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)

**A. PROFESSIONAL DATA SERVICES**

Mailing Address 824 MILLEDGE AVE, SUITE 101

City ATHENS State GA Zip Code 30605-

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 13 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 2111.09

Transaction ID : SB17.I23432

Memo Item

Full Name (Last, First, Middle Initial)

**B. PROFESSIONAL DATA SERVICES**

Mailing Address 824 MILLEDGE AVE, SUITE 101

City ATHENS State GA Zip Code 30605-

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 2045.10

Transaction ID : SB17.I23483

Memo Item

Full Name (Last, First, Middle Initial)

**C. PROFESSIONAL DATA SERVICES**

Mailing Address 824 MILLEDGE AVE, SUITE 101

City ATHENS State GA Zip Code 30605-

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 24 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 2031.04

Transaction ID : SB17.I23573

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 6187.23

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 104 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)

**A. PROFESSIONAL DATA SERVICES**

Mailing Address 824 MILLEDGE AVE, SUITE 101

City ATHENS State GA Zip Code 30605-

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
12 / 17 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 2064.28

Transaction ID : SB17.I23630

Memo Item

Full Name (Last, First, Middle Initial)

**B. ROCKETREACH, LLC**

Mailing Address 800 BELLEVUE WAY NORTHEAST FLOOR 5, UNIT 110

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement DIGITAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
10 / 14 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 99.00

Transaction ID : SB17.I23433

Memo Item

Full Name (Last, First, Middle Initial)

**C. ROCKETREACH, LLC**

Mailing Address 800 BELLEVUE WAY NORTHEAST FLOOR 5, UNIT 110

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement DIGITAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
11 / 13 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 99.00

Transaction ID : SB17.I23550

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 2262.28

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 127			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)  
**A. ROCKETREACH, LLC**

Mailing Address **800 BELLEVUE WAY NORTHEAST  
FLOOR 5, UNIT 110**

City **BELLEVUE** State **WA** Zip Code **98004**

Purpose of Disbursement **DIGITAL CONSULTING** Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: **12 / 15 / 2025**

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **99.00**

Transaction ID : **SB17.I23631**

Memo Item

Full Name (Last, First, Middle Initial)  
**B. ROGERS BAR**

Mailing Address **E19605 OLD, US-2**

City **WATERSMEET** State **MI** Zip Code **49969**

Purpose of Disbursement **MEETING EXPENSE** Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: **10 / 06 / 2025**

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **315.00**

Transaction ID : **SB17.I23434**

Memo Item

Full Name (Last, First, Middle Initial)  
**C. SHELL OIL COMPANY**

Mailing Address **809 N CEDAR ST**

City **KALKASKA** State **MI** Zip Code **49646-**

Purpose of Disbursement **TRAVEL EXPENSE** Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: **10 / 20 / 2025**

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **157.42**

Transaction ID : **SB17.I23435**

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ **571.42**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 106 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. SHELLYS BACK ROOM</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2025
Mailing Address 1331 F STREET NORTHWEST		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20004-1107
Purpose of Disbursement CATERING EXPENSE		Amount of Each Disbursement this Period 506.98
Candidate Name		Transaction ID : SB17.I23632
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SHEPLER'S MACKINAC ISLAND FERRY</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2025
Mailing Address 556 E CENTRAL AVE		FEC Identification Number C
City MACKINAW CITY	State MI	Zip Code 49701-9695
Purpose of Disbursement TRAVEL EXPENSE		Amount of Each Disbursement this Period 226.00
Candidate Name		Transaction ID : SB17.I23473
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SOLACE OUTPOST</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2025
Mailing Address 71 POTOMAC AVENUE SOUTHEAST		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement MEETING EXPENSE		Amount of Each Disbursement this Period 39.26
Candidate Name		Transaction ID : SB17.I23551
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	772.24
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. SORELLINA</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2025
Mailing Address 250 EAST FRONT ST SUITE 110		FEC Identification Number C
City TRAVERSE CITY	State MI	Zip Code 49684-3602
Purpose of Disbursement CATERING EXPENSE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 191.35	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I23436
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. SORELLINA</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2025
Mailing Address 250 EAST FRONT ST SUITE 110		FEC Identification Number C
City TRAVERSE CITY	State MI	Zip Code 49684-3602
Purpose of Disbursement MEETING EXPENSE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 172.64	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I23668
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. SPIRELIGHT WEB</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2025
Mailing Address 3534 N VIRGINIA LN		FEC Identification Number C
City FRESNO	State CA	Zip Code 93726
Purpose of Disbursement WEB DESIGN	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 97.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I23437
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	460.99
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)

**A. SPIRELIGHT WEB**

Mailing Address 3534 N VIRGINIA LN

City FRESNO State CA Zip Code 93726

Purpose of Disbursement WEB DESIGN

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 03 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 58.00

Transaction ID : SB17.I23505

Memo Item

Full Name (Last, First, Middle Initial)

**B. SPIRELIGHT WEB**

Mailing Address 3534 N VIRGINIA LN

City FRESNO State CA Zip Code 93726

Purpose of Disbursement WEB DESIGN

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 12 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 39.00

Transaction ID : SB17.I23552

Memo Item

Full Name (Last, First, Middle Initial)

**C. SPIRELIGHT WEB**

Mailing Address 3534 N VIRGINIA LN

City FRESNO State CA Zip Code 93726

Purpose of Disbursement WEB DESIGN

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 02 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 29.00

Transaction ID : SB17.I23583

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 126.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 127			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. SPIRELIGHT WEB</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2025		
Mailing Address 3534 N VIRGINIA LN			FEC Identification Number C		
City FRESNO	State CA	Zip Code 93726	Amount of Each Disbursement this Period 29.00		
Purpose of Disbursement WEB DESIGN		Category/ Type	Transaction ID : SB17.I23610		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. SPIRELIGHT WEB</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2025		
Mailing Address 3534 N VIRGINIA LN			FEC Identification Number C		
City FRESNO	State CA	Zip Code 93726	Amount of Each Disbursement this Period 39.00		
Purpose of Disbursement WEB DESIGN		Category/ Type	Transaction ID : SB17.I23634		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. STAFFORD'S PERRY HOTEL</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2025		
Mailing Address 100 LEWIS STREET			FEC Identification Number C		
City PETOSKEY	State MI	Zip Code 49770-	Amount of Each Disbursement this Period 349.75		
Purpose of Disbursement FACILITY RENTAL		Category/ Type	Transaction ID : SB17.I23474		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	417.75
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 127			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. SUPER ONE FOODS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2025
Mailing Address P.O. BOX 1411		FEC Identification Number C
City TYLER	State TX	Zip Code 75710
Purpose of Disbursement CATERING EXPENSE		Amount of Each Disbursement this Period 401.16
Candidate Name		Transaction ID : SB17.I23438
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. TERRACE BAY HOTEL</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2025
Mailing Address 1746 P RD		FEC Identification Number C
City GLADSTONE	State MI	Zip Code 49837-
Purpose of Disbursement LODGING		Amount of Each Disbursement this Period 409.92
Candidate Name		Transaction ID : SB17.I23441
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. THE ALLEY</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2025
Mailing Address 4191 COUNTY ROAD B		FEC Identification Number C
City LAND O' LAKES	State WI	Zip Code 54540
Purpose of Disbursement EVENT EXPENSE		Amount of Each Disbursement this Period 56.50
Candidate Name		Transaction ID : SB17.I23442
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	867.58
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 111 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. THE BUTCHER BLOCK</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2025
Mailing Address 425 WEST SOUTH AIRPORT ROAD		FEC Identification Number C
City TRAVERSE CITY	State MI	Zip Code 49686-4882
Purpose of Disbursement MEETING EXPENSE		Amount of Each Disbursement this Period 269.99
Candidate Name		Transaction ID : SB17.I23475
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. THE ELEVATED GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2025
Mailing Address 410 1ST STREET SUITE 310		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-1866
Purpose of Disbursement FUNDRAISING CONSULTING		Amount of Each Disbursement this Period 1790.58
Candidate Name		Transaction ID : SB17.I23445
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. THE ELEVATED GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2025
Mailing Address 410 1ST STREET SUITE 310		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-1866
Purpose of Disbursement FUNDRAISING CONSULTING		Amount of Each Disbursement this Period 3616.01
Candidate Name		Transaction ID : SB17.I23669
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5676.58
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 112 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. THE LANDMARK INN</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2025
Mailing Address 230 N FRONT STREET		FEC Identification Number C
City MARQUETTE	State MI	Zip Code 49855-
Purpose of Disbursement LODGING	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 619.78	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I23446
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. THE RITZ CARLTON</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2025
Mailing Address 4445 WILLARD AVE#800		FEC Identification Number C
City CHEVY CHASE	State MD	Zip Code 20815-3699
Purpose of Disbursement LODGING	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 701.06	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I23553
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. THE SALT LINE</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2025
Mailing Address 79 POTOMAC AVE SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-3848
Purpose of Disbursement MEETING EXPENSE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 56.60	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I23476
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1377.44
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 113 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)

**A. THE UPS STORE**

Mailing Address 2153 WEALTHY ST SE

City GRAND RAPIDS State MI Zip Code 49506-3033

Purpose of Disbursement SHIPPING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 20 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 318.04

Transaction ID : SB17.I23449

Memo Item

Full Name (Last, First, Middle Initial)

**B. THE UPS STORE**

Mailing Address 2153 WEALTHY ST SE

City GRAND RAPIDS State MI Zip Code 49506-3033

Purpose of Disbursement SHIPPING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 24 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 65.32

Transaction ID : SB17.I23575

Memo Item

Full Name (Last, First, Middle Initial)

**C. THE UPS STORE**

Mailing Address 2153 WEALTHY ST SE

City GRAND RAPIDS State MI Zip Code 49506-3033

Purpose of Disbursement SHIPPING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 01 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 28.20

Transaction ID : SB17.I23579

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 411.56

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 127			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>A. THE UPS STORE</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>09</td> <td></td> <td>2025</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	12		09		2025
M M	/	D D	/	Y Y Y Y								
12		09		2025								
Mailing Address 2153 WEALTHY ST SE		FEC Identification Number										
City GRAND RAPIDS	State MI	Zip Code 49506-3033										
Purpose of Disbursement SHIPPING		<input type="checkbox"/> Category/Type										
Candidate Name		Amount of Each Disbursement this Period										
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> 35.56										
Disbursement For:		<b>Transaction ID : SB17.I23611</b>										
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item										
State:	District:											

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>B. THE UPS STORE</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>15</td> <td></td> <td>2025</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	12		15		2025
M M	/	D D	/	Y Y Y Y								
12		15		2025								
Mailing Address 2153 WEALTHY ST SE		FEC Identification Number										
City GRAND RAPIDS	State MI	Zip Code 49506-3033										
Purpose of Disbursement SHIPPING		<input type="checkbox"/> Category/Type										
Candidate Name		Amount of Each Disbursement this Period										
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> 59.69										
Disbursement For:		<b>Transaction ID : SB17.I23638</b>										
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item										
State:	District:											

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>C. THE UPS STORE</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>29</td> <td></td> <td>2025</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	12		29		2025
M M	/	D D	/	Y Y Y Y								
12		29		2025								
Mailing Address 2153 WEALTHY ST SE		FEC Identification Number										
City GRAND RAPIDS	State MI	Zip Code 49506-3033										
Purpose of Disbursement SHIPPING		<input type="checkbox"/> Category/Type										
Candidate Name		Amount of Each Disbursement this Period										
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> 224.02										
Disbursement For:		<b>Transaction ID : SB17.I23670</b>										
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item										
State:	District:											

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<input type="checkbox"/> 319.27
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="checkbox"/>

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 127			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)

**A. TOMS EAST BAY**

Mailing Address 738 MUNSON AVENUE

City TRAVERSE CITY State MI Zip Code 49686

Purpose of Disbursement MEETING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
12 / 22 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 107.43

Transaction ID : SB17.I23671

Memo Item

Full Name (Last, First, Middle Initial)

**B. TOMS WEST BAY**

Mailing Address 13940 SOUTH WEST BAY SHORE DRIVE

City TRAVERSE CITY State MI Zip Code 49684

Purpose of Disbursement MEETING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
10 / 20 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 434.57

Transaction ID : SB17.I23450

Memo Item

Full Name (Last, First, Middle Initial)

**C. TRAVERSE CITY PARKING SERVICES**

Mailing Address 303 E STATE ST

City TRAVERSE CITY State MI Zip Code 49684-

Purpose of Disbursement TRAVEL EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
10 / 23 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 2.50

Transaction ID : SB17.I23477

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 544.50

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 116 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)

**A. TRAVERSE CITY PARKING SERVICES**

Mailing Address 303 E STATE ST

City TRAVERSE CITY State MI Zip Code 49684-

Purpose of Disbursement TRAVEL EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
11 / 21 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 2.50

Transaction ID : SB17.I23576

Memo Item

Full Name (Last, First, Middle Initial)

**B. U & I LOUNGE**

Mailing Address 214 E FRONT STREET

City TRAVERSE CITY State MI Zip Code 49684-

Purpose of Disbursement MEETING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
10 / 14 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 253.36

Transaction ID : SB17.I23452

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER**

Mailing Address 555 MARKET ST

City SAN FRANCISCO State CA Zip Code 94105-2800

Purpose of Disbursement TRAVEL EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
10 / 20 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 195.71

Transaction ID : SB17.I23453

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 451.57

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 117 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. UBER</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2025
Mailing Address 555 MARKET ST		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94105-2800
Purpose of Disbursement TRAVEL EXPENSE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 164.38	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I23478
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. UBER</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2025
Mailing Address 555 MARKET ST		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94105-2800
Purpose of Disbursement TRAVEL EXPENSE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 44.86	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I23506
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. UBER</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2025
Mailing Address 555 MARKET ST		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94105-2800
Purpose of Disbursement TRAVEL EXPENSE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 413.75	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I23523
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	622.99
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)

**A. UBER**

Mailing Address 555 MARKET ST

City SAN FRANCISCO    State CA    Zip Code 94105-2800

Purpose of Disbursement TRAVEL EXPENSE

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General     Other (specify) ▼

State:    District:

Date of Disbursement: 11 / 17 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 413.04

Transaction ID : SB17.I23554

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER**

Mailing Address 555 MARKET ST

City SAN FRANCISCO    State CA    Zip Code 94105-2800

Purpose of Disbursement TRAVEL EXPENSE

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General     Other (specify) ▼

State:    District:

Date of Disbursement: 11 / 21 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 102.45

Transaction ID : SB17.I23577

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER**

Mailing Address 555 MARKET ST

City SAN FRANCISCO    State CA    Zip Code 94105-2800

Purpose of Disbursement TRAVEL EXPENSE

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General     Other (specify) ▼

State:    District:

Date of Disbursement: 12 / 16 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 478.10

Transaction ID : SB17.I23639

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 993.59

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 127			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. UBER</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2025
Mailing Address 555 MARKET ST		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94105-2800
Purpose of Disbursement TRAVEL EXPENSE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 168.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I23655
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. UBER</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2025
Mailing Address 555 MARKET ST		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94105-2800
Purpose of Disbursement TRAVEL EXPENSE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 369.69	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I23672
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. UBER EATS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2025
Mailing Address 1455 MARKET STREET		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement MEETING EXPENSE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 42.77	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I23454
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	580.46
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 120 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)

**A. UBER EATS**

Mailing Address 1455 MARKET STREET

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement MEETING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 14 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 102.14

Transaction ID : SB17.I23555

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER EATS**

Mailing Address 1455 MARKET STREET

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement MEETING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 21 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 45.84

Transaction ID : SB17.I23578

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER EATS**

Mailing Address 1455 MARKET STREET

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement MEETING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 02 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 57.52

Transaction ID : SB17.I23582

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 205.50

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 127			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)

**A. UBER EATS**

Mailing Address 1455 MARKET STREET

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement MEETING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 16 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 98.81

Transaction ID : SB17.I23640

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER EATS**

Mailing Address 1455 MARKET STREET

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement MEETING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 69.35

Transaction ID : SB17.I23673

Memo Item

Full Name (Last, First, Middle Initial)

**C. UNITED AIRLINES**

Mailing Address 233 S WACKER DR

City CHICAGO State IL Zip Code 60606-7147

Purpose of Disbursement AIRFARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 10 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 508.29

Transaction ID : SB17.I23524

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 676.45

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 122 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2025
Mailing Address 1 VERIZON WAY		FEC Identification Number C
City BASKING RIDGE	State NJ	Zip Code 07920-
Purpose of Disbursement TELEPHONE		Amount of Each Disbursement this Period 393.65
Candidate Name	Category/ Type	Transaction ID : SB17.I23455
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2025
Mailing Address 1 VERIZON WAY		FEC Identification Number C
City BASKING RIDGE	State NJ	Zip Code 07920-
Purpose of Disbursement TELEPHONE		Amount of Each Disbursement this Period 393.83
Candidate Name	Category/ Type	Transaction ID : SB17.I23525
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2025
Mailing Address 1 VERIZON WAY		FEC Identification Number C
City BASKING RIDGE	State NJ	Zip Code 07920-
Purpose of Disbursement TELEPHONE		Amount of Each Disbursement this Period 393.83
Candidate Name	Category/ Type	Transaction ID : SB17.I23641
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1181.31
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 123 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)

**A. VIVID SEATS**

Mailing Address 24 EAST WASHINGTON STREET  
STE 900

City CHICAGO State IL Zip Code 60602

Purpose of Disbursement EVENT TICKETS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 10 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 260.35

Transaction ID : SB17.I23642

Memo Item

Full Name (Last, First, Middle Initial)

**B. WALMART**

Mailing Address 702 S.W. 8TH ST

City BENTONVILLE State AR Zip Code 72716-

Purpose of Disbursement EVENT SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 06 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 584.50

Transaction ID : SB17.I23456

Memo Item

Full Name (Last, First, Middle Initial)

**C. WALTERS SPORT**

Mailing Address 10 N STREET SOUTHEAST

City WASHINGTON State DC Zip Code 20024

Purpose of Disbursement MEETING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 21 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 33.93

Transaction ID : SB17.I23479

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 878.78

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 127			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial) <b>A. WASHINGTON NATIONALS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2025
Mailing Address 1500 SOUTH CAPITOL STREET SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement EVENT TICKETS		Amount of Each Disbursement this Period 240.00
Candidate Name	Category/ Type	Transaction ID : SB17.I23427
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WEST END TAVERN</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2025
Mailing Address 12719 S W BAY SHORE DR		FEC Identification Number C
City TRAVERSE CITY	State MI	Zip Code 49684
Purpose of Disbursement MEETING EXPENSE		Amount of Each Disbursement this Period 124.25
Candidate Name	Category/ Type	Transaction ID : SB17.I23507
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WHITEPAGES</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2025
Mailing Address 1301 FIFTH AVE, SUITE 1600		FEC Identification Number C
City SEATTLE	State WA	Zip Code 98101
Purpose of Disbursement OFFICE SOFTWARE		Amount of Each Disbursement this Period 24.99
Candidate Name	Category/ Type	Transaction ID : SB17.I23457
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	389.24
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)

## A. WHITEPAGES

Mailing Address 1301 FIFTH AVE, SUITE 1600

City SEATTLE    State WA    Zip Code 98101

Purpose of Disbursement OFFICE SOFTWARE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State:    District:

Date of Disbursement  
M M / D D / Y Y Y Y  
11 / 14 / 2025

FEC Identification Number  
C

Amount of Each Disbursement this Period  
24.99

Transaction ID : SB17.I23556  
 Memo Item

Full Name (Last, First, Middle Initial)

## B. WHITEPAGES

Mailing Address 1301 FIFTH AVE, SUITE 1600

City SEATTLE    State WA    Zip Code 98101

Purpose of Disbursement OFFICE SOFTWARE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State:    District:

Date of Disbursement  
M M / D D / Y Y Y Y  
12 / 17 / 2025

FEC Identification Number  
C

Amount of Each Disbursement this Period  
24.99

Transaction ID : SB17.I23656  
 Memo Item

Full Name (Last, First, Middle Initial)

## C. WINRED TECHNICAL SERVICES

Mailing Address PO BOX 9891

City ARLINGTON    State VA    Zip Code 22219-1891

Purpose of Disbursement CC TRANSACTION FEES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State:    District:

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 20 / 2025

FEC Identification Number  
C

Amount of Each Disbursement this Period  
135.33

Transaction ID : SB17.I23458  
 Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 185.31

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 126 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES**

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

Purpose of Disbursement CC TRANSACTION FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 27 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 130.41

Transaction ID : SB17.I23484

Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES**

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

Purpose of Disbursement CC TRANSACTION FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 03 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 0.03

Transaction ID : SB17.I23509

Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES**

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

Purpose of Disbursement CC TRANSACTION FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 24 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 0.39

Transaction ID : SB17.I23584

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 130.83

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 127 OF 127	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BergmanforCongress**

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES**

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

Purpose of Disbursement CC TRANSACTION FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 01 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 0.03

Transaction ID : SB17.I23585

Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES**

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

Purpose of Disbursement CC TRANSACTION FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 0.03

Transaction ID : SB17.I23674

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.06

**TOTAL** This Period (last page this line number only).....▶ 97877.85