

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

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

EISENHAUER FOR CONGRESS

ADDRESS (number and street)

1720 10TH AVE S, SUITE 4

MAILSTOP #416

GREAT FALLS

MT

59405

Check if different than previously reported. (ACC)

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00930750

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

STATE ▼ DISTRICT

MT

02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☒

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☐

January 31 Year-End Report (YE)

☐

Termination Report (TER)

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

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

01

D D / Y Y Y Y

01

2026

through

M M / D D / Y Y Y Y

03

D D / Y Y Y Y

31

2026

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

Type or Print Name of Treasurer Dasinger, Katie, , ,

Signature of Treasurer

Dasinger, Katie, , ,

Date

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

14

2026

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

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

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

EISENHAUER FOR CONGRESS

Report Covering the Period:

From:

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

To:

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	7304.99	8404.99
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	7304.99	8404.99
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	70482.65	74738.17
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	70482.65	74738.17
8. Cash on Hand at Close of Reporting Period (from Line 27).....	133710.70	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	204942.00	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

EISENHAUER FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2026

To:

MM / DD / YYYY
03 / 31 / 2026**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

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

7179.99

8179.99

(ii) Unitemized

125.00

225.00

(iii) TOTAL of contributions
from individuals ▶

7304.99

8404.99

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

0.00

0.00

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

7304.99

8404.99

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

0.00

200000.00

(b) All Other Loans.....

0.00

0.00

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

0.00

200000.00

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

0.00

0.00

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

43.88

43.88

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

7348.87

208448.87

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.....

70482.65

74738.17

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES

0.00

0.00

19. LOAN REPAYMENTS:

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

0.00

0.00

(b) Of All Other Loans

0.00

0.00

(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b)).....

0.00

0.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees

0.00

0.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) TOTAL CONTRIBUTION REFUNDS
(add Lines 20(a), (b), and (c)).....

0.00

0.00

21. OTHER DISBURSEMENTS

0.00

0.00

22. **TOTAL DISBURSEMENTS**

(add Lines 17, 18, 19(c), 20(d), and 21) ►

70482.65

74738.17

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

196844.48

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

7348.87

25. SUBTOTAL (add Line 23 and Line 24).....

204193.35

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

70482.65

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

(subtract Line 26 from Line 25).....

133710.70

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

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

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 10

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

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NAME OF COMMITTEE (In Full)

EISENHAUER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Robertson, Brad, , ,

A.

Mailing Address 4415 NW Crystal Court

City

Camas

State

WA

Zip Code

98607

FEC ID number of contributing
federal political committee.

C

Name of Employer

Multnomah County Sheriff's Ofc

Occupation

Law Enforcement

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 08 2026

Transaction ID : SA11AI.4224

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Simons, Elizabeth, , ,

B.

Mailing Address 383 Walsh Road

City

Atherton

State

CA

Zip Code

94027

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3429.99

Date of Receipt

M M / D D / Y Y Y Y Y
03 10 2026

Transaction ID : SA11AI.4226

Amount of Each Receipt this Period

3429.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

Simons, Elizabeth, , ,

C.

Mailing Address 383 Walsh Road

City

Atherton

State

CA

Zip Code

94027

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

6929.99

Date of Receipt

M M / D D / Y Y Y Y Y
03 10 2026

Transaction ID : SA11AI.4228

Amount of Each Receipt this Period

3500.00

☐ Memo Item

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

7179.99

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

7179.99

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

PAGE 6 OF 10

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

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NAME OF COMMITTEE (In Full)

EISENHAUER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Ballot Access Marketing, LLC

Mailing Address 3590 Yadkinville Road

City
Winston-SalemState
NCZip Code
27106

Purpose of Disbursement

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

35000.00

Transaction ID : SB17.4165

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ballot Access Marketing, LLC

Mailing Address 3590 Yadkinville Road

City
Winston-SalemState
NCZip Code
27106

Purpose of Disbursement

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

30000.00

Transaction ID : SB17.4167

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Eisenhauer, Michael, David, Dr.,

Mailing Address 16 Bend View Lane

City
Great FallsState
MTZip Code
59404

Purpose of Disbursement

Mileage Reimburse 2442 @0.725 =

002

Candidate Name

Category/
Type

Office Sought:

☒	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State: MT

District: 02

Date of Disbursement

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

FEC Identification Number

C H6MT02168

Amount of Each Disbursement this Period

1770.45

Transaction ID : SB17.4243

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

66770.45

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

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

PAGE 7 OF 10

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

EISENHAUER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Montana Secretary of StateMailing Address 1302 6th Avenue, Room 260
PO Box 202801City
HelenaState
MTZip Code
59620Purpose of Disbursement
Candidate Filing Fee

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1740.00

Transaction ID : SB17.4199

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Staples

Mailing Address 207 NW Bypass

City
Great FallsState
MTZip Code
59404Purpose of Disbursement
Printing

006

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

44.00

Transaction ID : SB17.4245

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. UPS Store

Mailing Address 1720 10th Ave, Ste 4

City
Great FallsState
MTZip Code
59405Purpose of Disbursement
Mail Services

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

20.35

Transaction ID : SB17.4246

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

1804.35

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

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

PAGE 8 OF 10

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

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NAME OF COMMITTEE (In Full)

EISENHAUER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Verizon

Mailing Address 1000 10th Ave South, #2

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		27		2026

City
Grea FallsState
MTZip Code
59405

FEC Identification Number

C

Purpose of Disbursement
Cell Phone Service

001

Amount of Each Disbursement this Period

40.88

Transaction ID : SB17.4241

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Vista Print

Mailing Address 95 Hayden Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		16		2026

City
LexingtonState
MAZip Code
02421

FEC Identification Number

C

Purpose of Disbursement
Campaign Brochures and Business Cards

006

Amount of Each Disbursement this Period

219.52

Transaction ID : SB17.4172

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Vista Print

Mailing Address 95 Hayden Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		19		2026

City
LexingtonState
MAZip Code
02421

FEC Identification Number

C

Purpose of Disbursement
Campaign Yard Signs and Flyers

006

Amount of Each Disbursement this Period

435.49

Transaction ID : SB17.4173

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

695.89

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

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

PAGE 9 OF 10

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

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NAME OF COMMITTEE (In Full)

EISENHAUER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Vista Print

Mailing Address 95 Hayden Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		17		2026

City
LexingtonState
MAZip Code
02421

FEC Identification Number

C

Purpose of Disbursement

006

Amount of Each Disbursement this Period

263.00

Transaction ID : SB17.4201

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

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

263.00

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

69533.69

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 10 OF 10

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4146

EISENHAUER FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Eisenhauer, Michael, David, Dr.,

Mailing Address

16 Bend View Lane

City

Great Falls

State

MT

ZIP Code

59404

☒ Personal Funds of the Candidate

Original Amount of Loan

200000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

204942.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

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

M M / D D / Y Y Y Y

11/03/2026

9.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

204942.00

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

204942.00

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