

**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

CHALIFOUX FOR CONGRESS

ADDRESS (number and street)

1254 S JOHN YOUNG PKWY



Check if different than previously reported. (ACC)

KISSIMMEE

FL

34741-6301

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00869727

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

FL

09

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
04 / 01 / 2026

through

M M / D D / Y Y Y Y
06 / 30 / 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 HANKINS, BRENDA, , ,

Signature of Treasurer

HANKINS, BRENDA, , ,

Date

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

CHALIFOUX FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		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))....	55386.51	68061.51
(b) Total Contribution Refunds (from Line 20(d))	629.85	629.85
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	54756.66	67431.66
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	252858.85	473587.28
(b) Total Offsets to Operating Expenditures (from Line 14).....	544.28	544.28
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	252314.57	473043.00
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2716704.02	
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)	4912815.75	

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

CHALIFOUX FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2026

To:

MM / DD / YYYY
06 / 30 / 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).....

34867.23

46167.23

(ii) Unitemized

20304.80

20679.80

(iii) TOTAL of contributions
from individuals ▶

55172.03

66847.03

(b) Political Party Committees.....

0.00

1000.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

214.48

214.48

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

55386.51

68061.51

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

753713.19

3003713.19

(b) All Other Loans.....

0.00

0.00

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

753713.19

3003713.19

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

544.28

544.28

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

18508.94

59589.04

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

828152.92

3131908.02

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.....	252858.85	473587.28
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	612899.84
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	612899.84
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	629.85	629.85
(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)).....	629.85	629.85
21. OTHER DISBURSEMENTS	0.00	2500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	253488.70	1089616.97

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2142039.80
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	828152.92
25. SUBTOTAL (add Line 23 and Line 24).....	2970192.72
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	253488.70
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2716704.02

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

PAGE 5 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMILL, DAGNES, , ,

A.

Mailing Address 3795 GLENDA CT

City

SAINT CLOUD

State

FL

Zip Code

34772-8701

FEC ID number of contributing
federal political committee.

C

Name of Employer

THOMAS CONTRACTING INC

Occupation

ACCOUNTING MANAGER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	2	6

Transaction ID : A82E11ACF5E8F4984BD2

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BRINK, KIMBERLY, , ,

B.

Mailing Address 3044 DIKEWOOD CT

City

WINTER PARK

State

FL

Zip Code

32792

FEC ID number of contributing
federal political committee.

C

Name of Employer

THOMAS CONTRACTING

Occupation

GENERAL MANAGER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

521.15

Date of Receipt

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

Transaction ID : A6A4BBCD1AFAC490B911

Amount of Each Receipt this Period

521.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

CHALIFOUX, CAROLYN, , ,

C.

Mailing Address 3500 OLD TAMPA HWY

City

KISSIMMEE

State

FL

Zip Code

34741-6403

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : A051990FE9BF6477EAD2

Amount of Each Receipt this Period

300.00

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

1321.15

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

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

PAGE 6 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

CHALIFOUX, DEBBE, , ,

A.

Mailing Address 6105 LAKE LIZZIE DR

City

SAINT CLOUD

State

FL

Zip Code

34771-8523

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : A41699CD52086486CABD

Amount of Each Receipt this Period

3500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

CHALIFOUX, MARIE, , ,

Mailing Address 119 WALKER STREET

City

HOLLY HILL

State

FL

Zip Code

32117

FEC ID number of contributing
federal political committee.

C

Name of Employer

DR. BERG NUTRITIONALS INC

Occupation

ADVISOR

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

208.65

Date of Receipt

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

Transaction ID : A13E751C45BED497DB61

Amount of Each Receipt this Period

208.65

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

COIA, DAVID, , ,

Mailing Address 302 SIGNATURE TER

City

SAFETY HARBOR

State

FL

Zip Code

34695

FEC ID number of contributing
federal political committee.

C

Name of Employer

BARCLAY GROUP

Occupation

REAL ESTATE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : A406DEDE80FB14A5BAC1

Amount of Each Receipt this Period

3500.00

☐ Memo Item

7208.65

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

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

PAGE 7 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

COIA, IAN, , ,

A.

Mailing Address 740 4TH ST N

241

City

SAINT PETERSBURG

State

FL

Zip Code

33701

FEC ID number of contributing
federal political committee.

C

Name of Employer
BGV LIMITED, LLLPOccupation
REAL ESTATE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A1085A4FF0F2847BF82F

Amount of Each Receipt this Period

1500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

COIA, IAN, , ,

Mailing Address 740 4TH ST N

241

City

SAINT PETERSBURG

State

FL

Zip Code

33701

FEC ID number of contributing
federal political committee.

C

Name of Employer
BGV LIMITED, LLLPOccupation
REAL ESTATE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : AF6DD9117D85F4195AC6

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

COLLINGS, JERI, , ,

Mailing Address 350 E 2200 N

City

LOGAN

State

UT

Zip Code

84341

FEC ID number of contributing
federal political committee.

C

Name of Employer
JERANBI INCOccupation
CONSULTANT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

234.65

Date of Receipt

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

Transaction ID : A573E3B3944F04AFFBC6

Amount of Each Receipt this Period

95.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

2595.00

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

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

PAGE 8 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESSFull Name (Last, First, Middle Initial)
WINRED

Mailing Address 1603 CAPITOL AVE

City
CHEYENNEState
WYZip Code
82001-4525FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

19850.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 25 2026

Transaction ID : AFD71FD4051374CB380B

Amount of Each Receipt this Period

95.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.**B.**Full Name (Last, First, Middle Initial)
COLLINGS, JERI, , ,

Mailing Address 350 E 2200 N

City
LOGANState
UTZip Code
84341FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

JERANBI INC

CONSULTANT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

234.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 25 2026

Transaction ID : AE13C259B98D448AF93D

Amount of Each Receipt this Period

95.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.Full Name (Last, First, Middle Initial)
WINRED

Mailing Address 1603 CAPITOL AVE

City
CHEYENNEState
WYZip Code
82001-4525FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

19850.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 25 2026

Transaction ID : A6001A1C100E440D6A29

Amount of Each Receipt this Period

95.00

☒ Memo Item

INTERMEDIARY

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

95.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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PAGE 9 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

COUILLARD, JACQUES, , ,

A.

Mailing Address 2565 SYKES CREEK DR

City

MERRITT ISLAND

State

FL

Zip Code

32953-2916

FEC ID number of contributing
federal political committee.

C

Name of Employer

SOUTHSTATE BANK N.A.

Occupation

BANKER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A8BBCACF4219E4E11936

Amount of Each Receipt this Period

250.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

COUTURE, ELEANOR, J, ,

Mailing Address 2495 YELLOW BRICK RD

City

ST CLOUD

State

FL

Zip Code

34772-7844

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A7E0D8BA727964DD3A6F

Amount of Each Receipt this Period

200.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

COUTURE, ELEANOR, J, ,

Mailing Address 2495 YELLOW BRICK RD

City

ST CLOUD

State

FL

Zip Code

34772-7844

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AB338E68B9C564B089C7

Amount of Each Receipt this Period

300.00



Memo Item

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

750.00

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

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

PAGE 10 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

CRITCHFIELD, RODNEY, , ,

A.

Mailing Address 3795 GLENDA CT

City

SAINT CLOUD

State

FL

Zip Code

34772-8701

FEC ID number of contributing
federal political committee.

C

Name of Employer

THOMAS CONTRACTING INC

Occupation

PROJECT MANAGER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 19 2026

Transaction ID : ADA5848125C15482C8AB

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DAVIS JR, JAMES, , ,

B.

Mailing Address 210 HANGAR ROAD

City

KISSIMMEE

State

FL

Zip Code

34741-4534

FEC ID number of contributing
federal political committee.

C

Name of Employer

JR. DAVIS CONSTRUCTION CO

Occupation

CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1041.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 19 2026

Transaction ID : A774ECF4462C740EFB5A

Amount of Each Receipt this Period

1041.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

DREGGORS, RICHARD, , ,

C.

Mailing Address 728 W SMITH ST

City

ORLANDO

State

FL

Zip Code

32804

FEC ID number of contributing
federal political committee.

C

Name of Employer

CALHOUN DREGGORS

Occupation

APPRAISER

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
05 28 2026

Transaction ID : A4F096A3FE13A4C458A5

Amount of Each Receipt this Period

500.00

☐ Memo Item

2041.98

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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PAGE 11 OF 57

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

EATON, STEVE, , ,

A.

Mailing Address 1749 LEE JANZEN DR

City

KISSIMMEE

State

FL

Zip Code

34744

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AC970380110704F96B72

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HINDLE, SHAWN, , ,

B.

Mailing Address 2228 JESSICA LANE

City

KISSIMMEE

State

FL

Zip Code

34744

FEC ID number of contributing
federal political committee.

C

Name of Employer

HANSON, WALTER & ASSOCIATES, INC.

Occupation

CIVIL ENGINEER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A69446D46184F473B843

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HOENSTINE, CLARENCE, , ,

C.

Mailing Address 1903 HOFFNER AVE

City

ORLANDO

State

FL

Zip Code

32809

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A62E8355CD6B84D9BBDB

Amount of Each Receipt this Period

250.00

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

2250.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

KATSADOUROUS, KONSTANTIN, , ,

A.

Mailing Address 125 BISCAYNE AVENUE

City

TAMPA

State

FL

Zip Code

33606

FEC ID number of contributing
federal political committee.

C

Name of Employer

OSPREY CAPITAL

Occupation

FINANCE

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
06 26 2026

Transaction ID : AF535EFE65AB849D59A7

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LENTINO, JOSEPH, , ,

B.

Mailing Address 9018 WADING WALK

City

WINTER GARDEN

State

FL

Zip Code

34787

FEC ID number of contributing
federal political committee.

C

Name of Employer

CENTRAL FLORIDA BLACKTOP

Occupation

ASPHALT PAVING

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
06 05 2026

Transaction ID : A8EA58844569B491FA7A

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LUCCHESI, RUTH, , ,

C.

Mailing Address 3427 FERNWOOD DR

City

KISSIMMEE

State

FL

Zip Code

34741-7609

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

521.15

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 11 2026

Transaction ID : AF0B79725AEF94EAF9AB

Amount of Each Receipt this Period

521.15

☐ Memo Item

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

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

2821.15

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

PAGE 13 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

MALOY, RICK, , ,

A.

Mailing Address 5307 JESSAMINE LANE

City

ORLANDO, FL

State

FL

Zip Code

32839

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
ACCOUNTANT

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
06 30 2026

Transaction ID : AF8ABBE095A5045D59AF

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

QUALITY PAINTERS SERVICES LLC

Mailing Address 3554 GRANDE RESERVE WAY
APT 104

City

ORLANDO

State

FL

Zip Code

32837-4080

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 19 2026

Transaction ID : AA7E0154F9F4C4F03AE9

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SEE MEMBER ATTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DIAZ, JOSE, , ,

Mailing Address 2608 WINTER CALM LN

City

KISSIMMEE

State

FL

Zip Code

34744-6502

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
CONTRACTOR

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
05 19 2026

Transaction ID : A4CCE88F8556342A6B8A

Amount of Each Receipt this Period

1000.00

☒ Memo Item

MEMBERSHIP ATTRIBUTION

PARTNERSHIP: QUALITY PAINTERS SERVICES LLC

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

2000.00

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

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

PAGE 14 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

RAMOS, JUAN, , ,

A.

Mailing Address 1913 NAPOLI DR

City

SAINT CLOUD

State

FL

Zip Code

34771

FEC ID number of contributing
federal political committee.

C

Name of Employer

RAMOS FIRE SPRINKLERS, LLC

Occupation

GENERAL MANAGER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : A20F3175D122A4A5489C

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RAUSCH, LINDA LORRAINE, , ,

B.

Mailing Address 2458 OCEAN VIEW DR

City

UPLAND

State

CA

Zip Code

91784

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

267.90

Date of Receipt

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

Transaction ID : AEBF27B2BE9E6438483D

Amount of Each Receipt this Period

44.65

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

C.

Mailing Address 1603 CAPITOL AVE

City

CHEYENNE

State

WY

Zip Code

82001-4525

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 ▼

19850.04

Date of Receipt

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

Transaction ID : AAD8DAC2931464779BE0

Amount of Each Receipt this Period

44.65

☒ Memo Item

INTERMEDIARY

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

2044.65

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 15 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

RAUSCH, LINDA LORRAINE, , ,

A.

Mailing Address 2458 OCEAN VIEW DR

City

UPLAND

State

CA

Zip Code

91784

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

267.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 28 2026

Transaction ID : A5DF88A944BD44410AB1

Amount of Each Receipt this Period

44.65

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address 1603 CAPITOL AVE

City

CHEYENNE

State

WY

Zip Code

82001-4525

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 ▼

19850.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 28 2026

Transaction ID : A4561BF9A34A44549921

Amount of Each Receipt this Period

44.65

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

ROCKER, WILLIAM, , ,

C.

Mailing Address PO BOX 700607

City

SAINT CLOUD

State

FL

Zip Code

34770-0607

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

BUSINESS OWNER

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
06 18 2026

Transaction ID : A20EA951EE660467D95D

Amount of Each Receipt this Period

3300.00

☐ Memo Item

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

3344.65

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

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

PAGE 16 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

SANTIAGO, ALFERT, , ,

A.

Mailing Address 2834 INDIGO BAY DR

City

KISSIMMEE

State

FL

Zip Code

34744

FEC ID number of contributing
federal political committee.

C

Name of Employer

STREAM POOLS SERVICES

Occupation

PRESIDENT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AA1FC81BB0B9B46C9928

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SHAW, BRIAN, , ,

B.

Mailing Address 643 EASY ST

City

SYCAMORE

State

IL

Zip Code

60178

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

289.75

Date of Receipt

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

Transaction ID : ABF654043C0394236AC4

Amount of Each Receipt this Period

95.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

C.

Mailing Address 1603 CAPITOL AVE

City

CHEYENNE

State

WY

Zip Code

82001-4525

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 ▼

19850.04

Date of Receipt

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

Transaction ID : A6E008867157841E88A1

Amount of Each Receipt this Period

95.00

☒ Memo Item

INTERMEDIARY

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

595.00

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

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

PAGE 17 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

VALENTIN, ABRAHAM, , ,

A.

Mailing Address 1004 ROYAL ST.

City

KISSIMMEE

State

FL

Zip Code

34744

FEC ID number of contributing
federal political committee.

C

Name of Employer

ABE'S ELECTRIC, INC.

Occupation

ELECTRICAL CONTRACTOR

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : ADE5A5690570040ABB3B

Amount of Each Receipt this Period

2500.00



Memo Item

Full Name (Last, First, Middle Initial)

VALENTIN, LEILA, , ,

B.

Mailing Address 1120 MEADOW SPRING CT

City

KISSIMMEE

State

FL

Zip Code

34744-6027

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A22DC4F50147D4B60A15

Amount of Each Receipt this Period

2500.00



Memo Item

Full Name (Last, First, Middle Initial)

WARNHAM, JAMIE, , ,

C.

Mailing Address 114 LIVE OAKS BLVD

City

CASSELBERRY

State

FL

Zip Code

32707

FEC ID number of contributing
federal political committee.

C

Name of Employer

SHARK CONSTRUCT

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
0	6		2	5		2	0	2	6

Transaction ID : ABEBE147D7AD44EC0AD0

Amount of Each Receipt this Period

2500.00



Memo Item

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

7500.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 18 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

WHITE, THOMAS, , ,

A.

Mailing Address 6136 WATERFIELD WAY

City

SAINT CLOUD

State

FL

Zip Code

34771-8845

FEC ID number of contributing
federal political committee.

C

Name of Employer
BANKFLORIDA

Occupation
MARKET PRESIDENT

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
06 25 2026

Transaction ID : A312A51C901DB437CB40

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

300.00

34867.23

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 19 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

CHALIFOUX, THOMAS, EUGENE, COL.,

A. Mailing Address 1254 S JOHN YOUNG PKWY

City
KISSIMMEE

State
FL

Zip Code
34741

FEC ID number of contributing
federal political committee.

C H4FL09182

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2250005.52

Date of Receipt

M M / D D / Y Y Y Y Y
04 01 2026

Transaction ID : A85A8E7437C544C798B0

Amount of Each Receipt this Period

5.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

CHALIFOUX, THOMAS, EUGENE, COL.,

B. Mailing Address 1254 S JOHN YOUNG PKWY

City
KISSIMMEE

State
FL

Zip Code
34741

FEC ID number of contributing
federal political committee.

C H4FL09182

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2250110.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 02 2026

Transaction ID : A7CC7BF8323564A6E801

Amount of Each Receipt this Period

104.48

☐ Memo Item

Full Name (Last, First, Middle Initial)

CHALIFOUX, THOMAS, EUGENE, COL.,

C. Mailing Address 1254 S JOHN YOUNG PKWY

City
KISSIMMEE

State
FL

Zip Code
34741

FEC ID number of contributing
federal political committee.

C H4FL09182

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3002649.67

Date of Receipt

M M / D D / Y Y Y Y Y
06 02 2026

Transaction ID : A5F41AC0AA72C441B960

Amount of Each Receipt this Period

104.48

☐ Memo Item

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

214.48

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

214.48

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 20 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

CHALIFOUX, THOMAS, EUGENE, COL.,

A. Mailing Address 1254 S JOHN YOUNG PKWY

City
KISSIMMEE

State
FL

Zip Code
34741

FEC ID number of contributing
federal political committee.

C H4FL09182

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000110.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 06 2026

Transaction ID : A85549B3F8BCB4797A80

Amount of Each Receipt this Period

750000.00

☐ Memo Item
CANDIDATE LOAN

Full Name (Last, First, Middle Initial)

CHALIFOUX, THOMAS, EUGENE, COL.,

B. Mailing Address 1254 S JOHN YOUNG PKWY

City
KISSIMMEE

State
FL

Zip Code
34741

FEC ID number of contributing
federal political committee.

C H4FL09182

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000127.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 09 2026

Transaction ID : A1C5CFC139F6F45D4A0D

Amount of Each Receipt this Period

17.99

☐ Memo Item
CANDIDATE LOAN

Full Name (Last, First, Middle Initial)

CHALIFOUX, THOMAS, EUGENE, COL.,

C. Mailing Address 1254 S JOHN YOUNG PKWY

City
KISSIMMEE

State
FL

Zip Code
34741

FEC ID number of contributing
federal political committee.

C H4FL09182

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000864.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 10 2026

Transaction ID : A48CDA0C6BB264EB4B0D

Amount of Each Receipt this Period

736.99

☐ Memo Item
CANDIDATE LOAN

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

750754.98

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 21 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

CHALIFOUX, THOMAS, EUGENE, COL.,

A. Mailing Address 1254 S JOHN YOUNG PKWY

City
KISSIMMEE

State
FL

Zip Code
34741

FEC ID number of contributing
federal political committee.

C H4FL09182

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000945.23

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 14 / 2026

Transaction ID : ADBF729CF16DC4819BF4

Amount of Each Receipt this Period

80.25

☐ Memo Item
CANDIDATE LOAN

Full Name (Last, First, Middle Initial)

CHALIFOUX, THOMAS, EUGENE, COL.,

B. Mailing Address 1254 S JOHN YOUNG PKWY

City
KISSIMMEE

State
FL

Zip Code
34741

FEC ID number of contributing
federal political committee.

C H4FL09182

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3001394.97

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 15 / 2026

Transaction ID : A08334E35DE2D4452B59

Amount of Each Receipt this Period

449.74

☐ Memo Item
CANDIDATE LOAN

Full Name (Last, First, Middle Initial)

CHALIFOUX, THOMAS, EUGENE, COL.,

C. Mailing Address 1254 S JOHN YOUNG PKWY

City
KISSIMMEE

State
FL

Zip Code
34741

FEC ID number of contributing
federal political committee.

C H4FL09182

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3001448.22

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 16 / 2026

Transaction ID : A39F427B3BA164FF88EE

Amount of Each Receipt this Period

53.25

☐ Memo Item
CANDIDATE LOAN

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

583.24

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

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

PAGE 22 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

CHALIFOUX, THOMAS, EUGENE, COL.,

A. Mailing Address 1254 S JOHN YOUNG PKWYCity
KISSIMMEEState
FLZip Code
34741FEC ID number of contributing
federal political committee.**C** H4FL09182Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3001965.01

Date of Receipt

M M / D D / Y Y Y Y Y
05 22 2026

Transaction ID : ADB83CDF259E24A01A89

Amount of Each Receipt this Period

516.79

☐ Memo Item
CANDIDATE LOAN

Full Name (Last, First, Middle Initial)

CHALIFOUX, THOMAS, EUGENE, COL.,

B. Mailing Address 1254 S JOHN YOUNG PKWYCity
KISSIMMEEState
FLZip Code
34741FEC ID number of contributing
federal political committee.**C** H4FL09182Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3002443.81

Date of Receipt

M M / D D / Y Y Y Y Y
05 26 2026

Transaction ID : AADE2009F86604BE8BAF

Amount of Each Receipt this Period

478.80

☐ Memo Item
CANDIDATE LOAN

Full Name (Last, First, Middle Initial)

CHALIFOUX, THOMAS, EUGENE, COL.,

C. Mailing Address 1254 S JOHN YOUNG PKWYCity
KISSIMMEEState
FLZip Code
34741FEC ID number of contributing
federal political committee.**C** H4FL09182Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3002545.19

Date of Receipt

M M / D D / Y Y Y Y Y
05 27 2026

Transaction ID : A801F3FA9582B4396905

Amount of Each Receipt this Period

22.18

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

1017.77

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 23 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

CHALIFOUX, THOMAS, EUGENE, COL.,

A. Mailing Address 1254 S JOHN YOUNG PKWY

City
KISSIMMEE

State
FL

Zip Code
34741

FEC ID number of contributing
federal political committee.

C H4FL09182

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3002545.19

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2026

Transaction ID : AD353757923494BA2A5B

Amount of Each Receipt this Period

79.20

☐ Memo Item
CANDIDATE LOAN

Full Name (Last, First, Middle Initial)

CHALIFOUX, THOMAS, EUGENE, COL.,

B. Mailing Address 1254 S JOHN YOUNG PKWY

City
KISSIMMEE

State
FL

Zip Code
34741

FEC ID number of contributing
federal political committee.

C H4FL09182

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3003927.67

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 05 / 2026

Transaction ID : A4A7FF01998364A3BBF0

Amount of Each Receipt this Period

1278.00

☐ Memo Item
CANDIDATE LOAN

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

1357.20

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

753713.19

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 24 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

A. Full Name (Last, First, Middle Initial) WINRED TECHNICAL SERVICES			Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2026	
Mailing Address 4250 FAIRFAX DR SUITE 600			Transaction ID : AD5716A1307DC42E294F	
City ARLINGTON	State VA	Zip Code 22203-1665	Amount of Each Receipt this Period 394.09	
FEC ID number of contributing federal political committee. C		Name of Employer Occupation		
Receipt For: 2026 ☒ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼ 544.28		
B. Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y Y Y	
Mailing Address			Amount of Each Receipt this Period	
City	State	Zip Code	Memo Item	
FEC ID number of contributing federal political committee. C		REFUND OF FUNDRAISING FEES		
Name of Employer Occupation		Election Cycle-to-Date ▼		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Amount of Each Receipt this Period		
C. Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y Y Y	
Mailing Address			Amount of Each Receipt this Period	
City	State	Zip Code	Memo Item	
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date ▼		
Name of Employer Occupation		Amount of Each Receipt this Period		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Memo Item		
SUBTOTAL of Receipts This Page (optional)..... ▶			394.09	
TOTAL This Period (last page this line number only)..... ▶			394.09	

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 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

BANKFLORIDA

A.

Mailing Address 100 PARK PL BLVD

City

KISSIMMEE

State

FL

Zip Code

34741-2372

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

46138.22

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2026

Transaction ID : A830244E00692428695A

Amount of Each Receipt this Period

5084.12



Memo Item

BANK INTEREST

Full Name (Last, First, Middle Initial)

BANKFLORIDA

B.

Mailing Address 100 PARK PL BLVD

City

KISSIMMEE

State

FL

Zip Code

34741-2372

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

52968.28

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2026

Transaction ID : A7181E88C0C414B82822

Amount of Each Receipt this Period

6830.06



Memo Item

BANK INTEREST

Full Name (Last, First, Middle Initial)

BANKFLORIDA

C.

Mailing Address 100 PARK PL BLVD

City

KISSIMMEE

State

FL

Zip Code

34741-2372

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

59563.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2026

Transaction ID : AF8BD5F1AE580476EAD3

Amount of Each Receipt this Period

6594.76



Memo Item

BANK INTEREST

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

18508.94

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

18508.94

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

PAGE 26 OF 57

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ACE POLITICAL LLC

Mailing Address 10960 HARMONY PARK DR

City
BONITA SPRINGSState
FLZip Code
34135-1800Purpose of Disbursement
STRATEGIC CONSULTING

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	4		1	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

12000.00

Transaction ID : B3233D2D2910340EC8B0

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ACE POLITICAL LLC

Mailing Address 10960 HARMONY PARK DR

City
BONITA SPRINGSState
FLZip Code
34135-1800Purpose of Disbursement
DIGITAL ADVERTISING

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	5		2	7		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

10000.00

Transaction ID : B9D3E8B645C53419490F

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ACE POLITICAL LLC

Mailing Address 10960 HARMONY PARK DR

City
BONITA SPRINGSState
FLZip Code
34135-1800Purpose of Disbursement
STRATEGIC CONSULTING

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	6		0	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

12000.00

Transaction ID : B4BA0941A92794FEEB4F

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

34000.00

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

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

PAGE 27 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 1 SKYVIEW DR

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

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	5		2	2		2	0	6	

FEC Identification Number

C

Amount of Each Disbursement this Period

516.79

Transaction ID : B5BB7375B80394A3985A

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 1340 POYDRAS ST

City
NEW ORLEANSState
LAZip Code
70112-1221Purpose of Disbursement
CC PROCESSING

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	4		3	0		2	0	6	

FEC Identification Number

C

Amount of Each Disbursement this Period

1.02

Transaction ID : BD59DEFAC8384452397A

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 1340 POYDRAS ST

City
NEW ORLEANSState
LAZip Code
70112-1221Purpose of Disbursement
CC PROCESSING

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	5		3	1		2	0	6	

FEC Identification Number

C

Amount of Each Disbursement this Period

41.03

Transaction ID : B4396FBFBF9C74707BFB

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

558.84

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 28 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS ST

Date of Disbursement

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

City
NEW ORLEANSState
LAZip Code
70112-1221

FEC Identification Number

CPurpose of Disbursement
CC PROCESSING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

748.32

Transaction ID : B896314F4C1564802927

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. CENTENNIAL BANK

Mailing Address 625 N CENTRAL AVE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	2	6

City
KISSIMMEEState
FLZip Code
34741-5006

FEC Identification Number

CPurpose of Disbursement
BANK FEE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

25.00

Transaction ID : B93500FB90C754E839C4

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. CENTENNIAL BANK

Mailing Address 625 N CENTRAL AVE

Date of Disbursement

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

City
KISSIMMEEState
FLZip Code
34741-5006

FEC Identification Number

CPurpose of Disbursement
BANK FEE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

25.00

Transaction ID : B58228CE6F39C4531BB1

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

798.32

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 29 OF 57

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CENTENNIAL BANK

Mailing Address 625 N CENTRAL AVE

Date of Disbursement

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

City
KISSIMMEEState
FLZip Code
34741-5006

FEC Identification Number

CPurpose of Disbursement
BANK FEE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

25.00

Transaction ID : B58CE488CE9A74CFC9B1

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. ELECTION CFO

Mailing Address PO BOX 26141

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	6

City
ALEXANDRIAState
VAZip Code
22313-6141

FEC Identification Number

CPurpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1520.00

Transaction ID : B9F0831E838CE4F43959

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. ELECTION CFO

Mailing Address PO BOX 26141

Date of Disbursement

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

City
ALEXANDRIAState
VAZip Code
22313-6141

FEC Identification Number

CPurpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1560.90

Transaction ID : B5229A9DA5E354631896

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

3105.90

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 30 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ELECTION CFO

Mailing Address PO BOX 26141

Date of Disbursement

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

City
ALEXANDRIAState
VAZip Code
22313-6141

FEC Identification Number

CPurpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1545.19

Transaction ID : BB399FAAFE5C54140A00

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. ELLO CREATIVE LLC

Mailing Address 814 LIVE OAK PLANTATION RD

Date of Disbursement

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

City
TALLAHASSEEState
FLZip Code
32312-2413

FEC Identification Number

CPurpose of Disbursement
GRAPHIC DESIGN

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : BED9B647C5D614CB2B50

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. ELLO CREATIVE LLC

Mailing Address 814 LIVE OAK PLANTATION RD

Date of Disbursement

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

City
TALLAHASSEEState
FLZip Code
32312-2413

FEC Identification Number

CPurpose of Disbursement
WEBSITE DEVELOPMENT

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

3500.00

Transaction ID : B9814320939804FB8911

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

6045.19

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

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

PAGE 31 OF 57

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FLORIDA DIVISION OF ELECTIONS

Mailing Address 500 S BRONOUGH ST

Date of Disbursement

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

City
TALLAHASSEEState
FLZip Code
32399-6504

FEC Identification Number

C

Purpose of Disbursement
FILING FEE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

10440.00

Transaction ID : B7E7746668F56439BB89

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. HARD ROCK HOTELS

Mailing Address 5701 STIRLING RD

Date of Disbursement

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

City
DAVIEState
FLZip Code
33314-7429

FEC Identification Number

C

Purpose of Disbursement
TRAVEL

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

449.74

Transaction ID : B7F5E32E29E32455381C

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. I360Mailing Address 2300 CLARENDON BLVD
STE 800

Date of Disbursement

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

City
ARLINGTONState
VAZip Code
22201-3382

FEC Identification Number

C

Purpose of Disbursement
DATABASE SERVICES

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

3780.00

Transaction ID : B314065E36B8F4FFFB8B

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

14669.74

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 PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. IMPERATOR LLCMailing Address 25 CATOCTIN CIR SE
UNIT 1341City
LEESBURGState
VAZip Code
20177-8718Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

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	6		1	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

587.62

Transaction ID : BCA20F1E80FB148199D8

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. IMPERATOR LLCMailing Address 25 CATOCTIN CIR SE
UNIT 1341City
LEESBURGState
VAZip Code
20177-8718Purpose of Disbursement
TEXTING

Candidate Name

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	6		1	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

786.26

Transaction ID : BC6F8F698BC7B48DFBA9

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. INTERNAL REVENUE SERVICE

Mailing Address 30 W PERSHING RD

City
KANSAS CITYState
MOZip Code
64108-2422Purpose of Disbursement
TAXES

Candidate Name

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	4		1	3		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

4803.00

Transaction ID : B6F32506A92404FF4AAB

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

6176.88

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 34 OF 57

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LENARDSON, ANDERS, , ,

Mailing Address 710 N MAIN ST

City
KISSIMMEEState
FLZip Code
34744-5264Purpose of Disbursement
REIMBURSEMENT - BELOW ITEMIZATION THRESHOLD

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	6		0	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

362.53

Transaction ID : B152504E029774135A76

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MVP STRATEGY AND POLICY INC

Mailing Address 8526 96TH AVE

City
VERO BEACHState
FLZip Code
32967-3438Purpose of Disbursement
STRATEGIC CONSULTING

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	5		2	7		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : BB089C6ACDB27490F845

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. OPTIMATES, LLC

Mailing Address PO BOX 3382

City
ALEXANDRIAState
VAZip Code
22302-0382Purpose of Disbursement
CAMPAIGN CONSULTING

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	4		0	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : BE43B59FF49B249FB958

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

10362.53

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 35 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. OPTIMATES, LLC

Mailing Address PO BOX 3382

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2026

City
ALEXANDRIAState
VAZip Code
22302-0382

FEC Identification Number

CPurpose of Disbursement
PALMCARDS

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1500.00

Transaction ID : B7A00EBA124EC4D578A5

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. PRESSTIGE PRINTING

Mailing Address 10940 HARMONY PARK DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		04		2026

City
BONITA SPRINGSState
FLZip Code
34135-1800

FEC Identification Number

CPurpose of Disbursement
PRINTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

275.79

Transaction ID : B52C587300BFD43C8839

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. PRESSTIGE PRINTING

Mailing Address 10940 HARMONY PARK DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2026

City
BONITA SPRINGSState
FLZip Code
34135-1800

FEC Identification Number

CPurpose of Disbursement
PRINTING AND POSTAGE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

18740.92

Transaction ID : BA15E2C693043488FB53

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

20516.71

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

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

PAGE 36 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PRESSTIGE PRINTING

Mailing Address 10940 HARMONY PARK DR

City
BONITA SPRINGSState
FLZip Code
34135-1800Purpose of Disbursement
PRINTING

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	5		2	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

522.44

Transaction ID : BB40B610CBA21444A938

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PRESSTIGE PRINTING

Mailing Address 10940 HARMONY PARK DR

City
BONITA SPRINGSState
FLZip Code
34135-1800Purpose of Disbursement
PRINTING

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	6		1	6		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

19923.09

Transaction ID : B46AE3D7951D34A37A4F

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PUSH DIGITAL

Mailing Address 342 E BAY ST

City
CHARLESTONState
SCZip Code
29401-1591Purpose of Disbursement
DESIGN CONSULTING

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	5		0	5		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

2600.00

Transaction ID : BF3768CF74C1F4AFAB52

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

23045.53

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 37 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. RED LINE MEDIAMailing Address 2 WISCONSIN CIR
STE 700City
CHEVY CHASEState
MDZip Code
20815-7007Purpose of Disbursement
DIGITAL ADVERTISING

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	6		0	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

14000.00

Transaction ID : B4114BC2E40E64F6AB15

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SMART MEDIA GROUP LLC

Mailing Address PO BOX 26067

City
ALEXANDRIAState
VAZip Code
22313-6067Purpose of Disbursement
TV ADVERTISING

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	6		2	5		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

84175.00

Transaction ID : B61311BA7168644F1A39

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STAYBRIDGE SUITESMailing Address 3 RAVINIA DR
SUITE 100City
ATLANTAState
GAZip Code
30346-2121Purpose of Disbursement
TRAVEL

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	5		1	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

736.99

Transaction ID : B791E17B9F82C4430B2C

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

98911.99

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 38 OF 57

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. STAYBRIDGE SUITESMailing Address 3 RAVINIA DR
SUITE 100City
ATLANTAState
GAZip Code
30346-2121Purpose of Disbursement
TRAVEL

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	5		1	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

80.25

Transaction ID : BE3A97BCF60DF48DDA59

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STAYBRIDGE SUITESMailing Address 3 RAVINIA DR
SUITE 100City
ATLANTAState
GAZip Code
30346-2121Purpose of Disbursement
TRAVEL

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	5		2	6		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

478.80

Transaction ID : BF30FA4442F8048CFAC0

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. THE HEREFORD AGENCYMailing Address 908 KING ST
STE 100City
ALEXANDRIAState
VAZip Code
22314-3067Purpose of Disbursement
VIDEO PRODUCTION

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	5		1	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1749.00

Transaction ID : BC84E5E46C4ED41D3AC8

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

2308.05

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 39 OF 57

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICESMailing Address 4250 FAIRFAX DR
SUITE 600City
ARLINGTONState
VAZip Code
22203-1665Purpose of Disbursement
FUNDRAISING FEES

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	5		3	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

3080.00

Transaction ID : BDE35E5DCA0FC420AB47

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICESMailing Address 4250 FAIRFAX DR
SUITE 600City
ARLINGTONState
VAZip Code
22203-1665Purpose of Disbursement
FUNDRAISING FEES

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	6		3	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

85.50

Transaction ID : B29FE273D521641C7893

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICESMailing Address 4250 FAIRFAX DR
SUITE 600City
ARLINGTONState
VAZip Code
22203-1665Purpose of Disbursement
FUNDRAISING FEES

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	6		3	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

10703.01

Transaction ID : BA3CC0F84C8154474B8E

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

13868.51

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 40 OF 57

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

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NAME OF COMMITTEE (In Full)

CHALIFOUX FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. YARD SIGN WHOLESALMailing Address 1100 W COLONIAL DR
UNIT 1City
ORLANDOState
FLZip Code
32804-7334Purpose of Disbursement
PRINTING

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	6		0	5		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1278.00

Transaction ID : BC72D441D1B0D412199F

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

1278.00

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

252646.19

SCHEDULE C (FEC Form 3)
LOANS

PAGE 41 OF 57

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

NAME OF COMMITTEE (In Full)

Transaction ID : C91B3E98C6EBC48CAA1D

CHALIFOUX FOR CONGRESS

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

Election: 2024

CHALIFOUX, THOMAS, EUGENE, COL.,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1254 S JOHN YOUNG PKWY

City

KISSIMMEE

State

FL

ZIP Code

34741

☒ Personal Funds of the Candidate

Original Amount of Loan

1005000.00

Cumulative Payment To Date

612899.84

Balance Outstanding at Close of This Period

392100.16

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 / 26 / 2024

M M / D D / Y Y Y Y

D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

392100.16

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 42 OF 57

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

NAME OF COMMITTEE (In Full)

Transaction ID : CFB4635FAEE1F4317BF9

CHALIFOUX FOR CONGRESS

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

Election: 2024

CHALIFOUX, THOMAS, EUGENE, COL.,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1254 S JOHN YOUNG PKWY

City

KISSIMMEE

State

FL

ZIP Code

34741

☒ Personal Funds of the Candidate

Original Amount of Loan

17002.40

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

17002.40

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
08 12 / 2024

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

17002.40

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 43 OF 57

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

NAME OF COMMITTEE (In Full)

Transaction ID : C1B772B2B5C924014BBF

CHALIFOUX FOR CONGRESS

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

Election: 2024

CHALIFOUX, THOMAS, EUGENE, COL.,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1254 S JOHN YOUNG PKWY

City

KISSIMMEE

State

FL

ZIP Code

34741

☒ Personal Funds of the Candidate

Original Amount of Loan

1000000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
06 / 24 / 2024

M M / D D / Y Y Y Y

D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

1000000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 44 OF 57

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

NAME OF COMMITTEE (In Full)

Transaction ID : C350BCE55666A467E94D

CHALIFOUX FOR CONGRESS

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

Election: 2024

CHALIFOUX, THOMAS, EUGENE, COL.,

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

1254 S JOHN YOUNG PKWY

City

KISSIMMEE

State

FL

ZIP Code

34741

☒ Personal Funds of the Candidate

Original Amount of Loan

500000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

500000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 19 / 2024

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

500000.00

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

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

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

PAGE 45 OF 57

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

NAME OF COMMITTEE (In Full)

Transaction ID : CF9C805DE94404828889

CHALIFOUX FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

CHALIFOUX, THOMAS, EUGENE, COL.,

Mailing Address

1254 S JOHN YOUNG PKWY

City

KISSIMMEE

State

FL

ZIP Code

34741

☒ Personal Funds of the Candidate

Original Amount of Loan

2000000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2000000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 24 / 2025

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

2000000.00

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

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

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

PAGE 46 OF 57

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

NAME OF COMMITTEE (In Full)

Transaction ID : C08334E35DE2D4452B59

CHALIFOUX FOR CONGRESS

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

Election: 2026

CHALIFOUX, THOMAS, EUGENE, COL.,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1254 S JOHN YOUNG PKWY

City

KISSIMMEE

State

FL

ZIP Code

34741

☒ Personal Funds of the Candidate

Original Amount of Loan

449.74

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

449.74

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 15 / 2026

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

449.74

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 47 OF 57

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

NAME OF COMMITTEE (In Full)

Transaction ID : CDB83CDF259E24A01A89

CHALIFOUX FOR CONGRESS

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

Election: 2026

CHALIFOUX, THOMAS, EUGENE, COL.,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1254 S JOHN YOUNG PKWY

City

KISSIMMEE

State

FL

ZIP Code

34741

☒ Personal Funds of the Candidate

Original Amount of Loan

516.79

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

516.79

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 / 22 / 2026

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

516.79

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 48 OF 57

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

NAME OF COMMITTEE (In Full)

Transaction ID : C39F427B3BA164FF88EE

CHALIFOUX FOR CONGRESS

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

Election: 2026

CHALIFOUX, THOMAS, EUGENE, COL.,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1254 S JOHN YOUNG PKWY

City

KISSIMMEE

State

FL

ZIP Code

34741

☒ Personal Funds of the Candidate

Original Amount of Loan

53.25

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

53.25

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 16 / 2026

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

53.25

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

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

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

PAGE 49 OF 57

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

NAME OF COMMITTEE (In Full)

Transaction ID : C801F3FA9582B4396905

CHALIFOUX FOR CONGRESS

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

Election: 2026

CHALIFOUX, THOMAS, EUGENE, COL.,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1254 S JOHN YOUNG PKWY

City

KISSIMMEE

State

FL

ZIP Code

34741

☒ Personal Funds of the Candidate

Original Amount of Loan

22.18

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

22.18

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 27 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

22.18

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

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

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

PAGE 50 OF 57

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

NAME OF COMMITTEE (In Full)

Transaction ID : C48CDA0C6BB264EB4B0D

CHALIFOUX FOR CONGRESS

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

Election: 2026

CHALIFOUX, THOMAS, EUGENE, COL.,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1254 S JOHN YOUNG PKWY

City

KISSIMMEE

State

FL

ZIP Code

34741

☒ Personal Funds of the Candidate

Original Amount of Loan

736.99

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

736.99

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 10 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

736.99

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

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

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

PAGE 51 OF 57

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

NAME OF COMMITTEE (In Full)

Transaction ID : CDBF729CF16DC4819BF4

CHALIFOUX FOR CONGRESS

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

Election: 2026

CHALIFOUX, THOMAS, EUGENE, COL.,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1254 S JOHN YOUNG PKWY

City

KISSIMMEE

State

FL

ZIP Code

34741

☒ Personal Funds of the Candidate

Original Amount of Loan

80.25

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

80.25

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 14 / 2026

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

80.25

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

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

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

PAGE 52 OF 57

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

NAME OF COMMITTEE (In Full)

Transaction ID : C4A7FF01998364A3BBF0

CHALIFOUX FOR CONGRESS

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

Election: 2026

CHALIFOUX, THOMAS, EUGENE, COL.,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1254 S JOHN YOUNG PKWY

City

KISSIMMEE

State

FL

ZIP Code

34741

☒ Personal Funds of the Candidate

Original Amount of Loan

1278.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1278.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
06 05 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

1278.00

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

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

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

PAGE 53 OF 57

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

NAME OF COMMITTEE (In Full)

Transaction ID : C1C5CFC139F6F45D4A0D

CHALIFOUX FOR CONGRESS

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

Election: 2026

CHALIFOUX, THOMAS, EUGENE, COL.,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1254 S JOHN YOUNG PKWY

City

KISSIMMEE

State

FL

ZIP Code

34741

☒ Personal Funds of the Candidate

Original Amount of Loan

17.99

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

17.99

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 09 / 2026

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

17.99

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 54 OF 57

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

NAME OF COMMITTEE (In Full)

Transaction ID : CADE2009F86604BE8BAF

CHALIFOUX FOR CONGRESS

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

Election: 2026

CHALIFOUX, THOMAS, EUGENE, COL.,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1254 S JOHN YOUNG PKWY

City

KISSIMMEE

State

FL

ZIP Code

34741

☒ Personal Funds of the Candidate

Original Amount of Loan

478.80

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

478.80

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 / 26 / 2026M M / D D / Y Y Y Y
/ / NONEM M / D D / Y Y Y Y
/ /M M / D D / Y Y Y Y
/ /M M / D D / Y Y Y Y
/ /M M / D D / Y Y Y Y
/ /M M / D D / Y Y Y Y
/ /M M / D D / Y Y Y Y
/ /M M / D D / Y Y Y Y
/ /M M / D D / Y Y Y Y
/ /M M / D D / Y Y Y Y
/ /

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

478.80

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

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

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

PAGE 55 OF 57

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

NAME OF COMMITTEE (In Full)

Transaction ID : CD353757923494BA2A5B

CHALIFOUX FOR CONGRESS

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

Election: 2026

CHALIFOUX, THOMAS, EUGENE, COL.,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1254 S JOHN YOUNG PKWY

City

KISSIMMEE

State

FL

ZIP Code

34741

☒ Personal Funds of the Candidate

Original Amount of Loan

79.20

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

79.20

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 / 27 / 2026M M / D D / Y Y Y Y
/ / NONEM M / D D / Y Y Y Y
/ /M M / D D / Y Y Y Y
/ /

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

79.20

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 56 OF 57

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

NAME OF COMMITTEE (In Full)

Transaction ID : C85549B3F8BCB4797A80

CHALIFOUX FOR CONGRESS

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

Election: 2026

CHALIFOUX, THOMAS, EUGENE, COL.,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1254 S JOHN YOUNG PKWY

City

KISSIMMEE

State

FL

ZIP Code

34741

☒ Personal Funds of the Candidate

Original Amount of Loan

750000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

750000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 06 / 2026

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

750000.00

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

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

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

PAGE 57 OF 57

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

NAME OF COMMITTEE (In Full)

Transaction ID : C6A7772E2875D49C3AA9

CHALIFOUX FOR CONGRESS

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

Election: 2026

CHALIFOUX, THOMAS, EUGENE, COL.,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1254 S JOHN YOUNG PKWY

City

KISSIMMEE

State

FL

ZIP Code

34741

☒ Personal Funds of the Candidate

Original Amount of Loan

250000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

250000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 19 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

250000.00

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

4912815.75

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