

**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

DAVID FLIPPO FOR NEVADA

ADDRESS (number and street)

355 E PLUMB LN

1157

Check if different  
than previously  
reported. (ACC)

RENO

NV

89502-3405

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00901710

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

NV

02

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

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y  
06 / 09 / 2026in the  
State of

NV

(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  
05 / 20 / 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

DATWYLER, THOMAS, , ,

Signature of Treasurer

DATWYLER, THOMAS, , ,

Date

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

**DAVID FLIPPO FOR NEVADA**

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 | 5 |   | 2 | 0 |   | 2 | 0 | 2 | 6 |

|                                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)                                                                          |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e)) ....                                             | 35695.89                | 434671.23                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....                                                        | 1.00                    | 59301.00                           |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 35694.89                | 375370.23                          |
| 7. Net Operating Expenditures                                                                                    |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....                                                         | 634204.85               | 1587452.56                         |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14) .....                                              | 0.00                    | 6051.48                            |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 634204.85               | 1581401.08                         |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27) .....                                             | 31466.42                |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 1256500.00              |                                    |

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

DAVID FLIPPO FOR NEVADA

Report Covering the Period:

From:

MM / DD / YYYY  
04 / 01 / 2026

To:

MM / DD / YYYY  
05 / 20 / 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).....

26102.47

418592.87

(ii) Unitemized .....

4093.42

9510.16

(iii) TOTAL of contributions  
from individuals ▶

30195.89

428103.03

(b) Political Party Committees.....

0.00

0.00

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

5500.00

5500.00

(d) The Candidate .....

0.00

1068.20

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

35695.89

434671.23

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

0.00

0.00

## 13. LOANS:

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

0.00

1280000.00

(b) All Other Loans.....

0.00

0.00

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

0.00

1280000.00

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

0.00

6051.48

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

5.55

4851.82

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

35701.44

1725574.53

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

| II. DISBURSEMENTS                                                            | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....                                              | 634204.85                     | 1587452.56                         |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:                                                         |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 12000.00                      | 23500.00                           |
| (b) Of All Other Loans .....                                                 | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 12000.00                      | 23500.00                           |
| 20. REFUNDS OF CONTRIBUTIONS TO:                                             |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 1.00                          | 59301.00                           |
| (b) Political Party Committees.....                                          | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs) .....                       | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 1.00                          | 59301.00                           |
| 21. OTHER DISBURSEMENTS .....                                                | 2044.50                       | 29646.41                           |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 648250.35                     | 1699899.97                         |

## **III. CASH SUMMARY**

|                                                                                       |           |
|---------------------------------------------------------------------------------------|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 644015.33 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 35701.44  |
| 25. SUBTOTAL (add Line 23 and Line 24).....                                           | 679716.77 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 648250.35 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 31466.42  |

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 5 OF 94

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

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NAME OF COMMITTEE (In Full)

**DAVID FLIPPO FOR NEVADA**

Full Name (Last, First, Middle Initial)

BLUTH, CHARLES, , ,

**A.**

Mailing Address 1730 US HIGHWAY 50

City

GLENBROOK

State

NV

Zip Code

89413

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 ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 13 2026

Transaction ID : A2F83543A9BC84CA5845

Amount of Each Receipt this Period

- 1500.00

☒ Memo Item

REDESIGNATION FROM

Full Name (Last, First, Middle Initial)

BLUTH, CHARLES, , ,

**B.**

Mailing Address 1730 US HIGHWAY 50

City

GLENBROOK

State

NV

Zip Code

89413

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 ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 13 2026

Transaction ID : AF5520C1A250F469AA3C

Amount of Each Receipt this Period

1500.00

☒ Memo Item

REDESIGNATION TO

Full Name (Last, First, Middle Initial)

BLUTH, CHARLES, , ,

**C.**

Mailing Address 1730 US HIGHWAY 50

City

GLENBROOK

State

NV

Zip Code

89413

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 ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 13 2026

Transaction ID : AADB4E5FEC8E44EE5B20

Amount of Each Receipt this Period

5000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

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

5000.00

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

PAGE 6 OF 94

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

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NAME OF COMMITTEE (In Full)

**DAVID FLIPPO FOR NEVADA**Full Name (Last, First, Middle Initial)  
WINREDMailing Address 4250 FAIRFAX DR  
STE 600City  
ARLINGTONState  
VAZip Code  
22203-1665FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

38292.95

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 05  | 13  | 2026    |

Transaction ID : AFB93D518E4814903A7B

Amount of Each Receipt this Period

5000.00

☒ Memo Item

INTERMEDIARY

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

Mailing Address PO BOX 1185

City  
JACKSONState  
WYZip Code  
83001-1185FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

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 |
| 04  | 01  | 2026    |

Transaction ID : AAFD6D9749C7F45689F7

Amount of Each Receipt this Period

3500.00

☐ Memo ItemEARMARKED (NON-DIRECTED) THROUGH  
FREEDOM CAUCUS FUNDFull Name (Last, First, Middle Initial)  
FREEDOM CAUCUS FUND

Mailing Address PO BOX 96006

City  
WASHINGTONState  
DCZip Code  
20090-6006FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13885.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 01  | 2026    |

Transaction ID : A3454ED9F900C4C4898B

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

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

3500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 94

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

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NAME OF COMMITTEE (In Full)

**DAVID FLIPPO FOR NEVADA**

Full Name (Last, First, Middle Initial)

BROPHY, DANIEL, , ,

**A.**

Mailing Address PO BOX 1185

City

JACKSON

State

WY

Zip Code

83001-1185

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 Y Y  
04 01 2026

Transaction ID : AC83CCE2A369A4888B03

Amount of Each Receipt this Period

3500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH  
FREEDOM CAUCUS FUND

Full Name (Last, First, Middle Initial)

FREEDOM CAUCUS FUND

**B.**

Mailing Address PO BOX 96006

City

WASHINGTON

State

DC

Zip Code

20090-6006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13885.00

Date of Receipt

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

Transaction ID : A3BE441B1DDF34D32A49

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

CUMMINS, BELLA, , ,

**C.**

Mailing Address PO BOX 550

City

WELLS

State

NV

Zip Code

89835

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ENTREPRENEUR

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  
04 18 2026

Transaction ID : AEE7D0C697BA34B18AF9

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

4500.00

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

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

PAGE 8 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

HERMAN, M JEANNE, , ,

A.

Mailing Address PO BOX 5000

City  
SPARKSState  
NVZip Code  
89432-5000FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYEDOccupation  
COMMISSIONER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 11 2026

Transaction ID : AA2E4F6879EE14868909

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KANE, HENRY, , ,

B.

Mailing Address P.O. BOX 729

City  
BARTLESVILLEState  
OKZip Code  
74005FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A345C835E5A884CB5B7D

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

C.

Mailing Address 4250 FAIRFAX DR  
STE 600City  
ARLINGTONState  
VAZip Code  
22203-1665FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

38292.95

Date of Receipt

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

Transaction ID : AFED482C697DD4D659F7

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

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

1000.00

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

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

PAGE 9 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

KHANKHANIAN, FARNAZ, , ,

A.

Mailing Address 2515 BEDFORD WAY

City

CARSON CITY

State

NV

Zip Code

89703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EAGLE VISIONOccupation  
OPTOMETRIST

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 | 5 |   | 1 | 4 |   | 2 | 0 | 2 | 6 |

Transaction ID : AE6DB2D591FD44028B91

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

KIEWIT, SCOTT, D., ,

Mailing Address 33 KIMBERLEY DR

City

LAUREL

State

MS

Zip Code

39440

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

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

Transaction ID : A5C952A917D7E419F9DB

Amount of Each Receipt this Period

325.00

☐ Memo ItemEARMARKED (NON-DIRECTED) THROUGH  
FREEDOM CAUCUS FUND

C.

Full Name (Last, First, Middle Initial)

FREEDOM CAUCUS FUND

Mailing Address PO BOX 96006

City

WASHINGTON

State

DC

Zip Code

20090-6006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13885.00

Date of Receipt

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

Transaction ID : AD71EB89618394AE59DA

Amount of Each Receipt this Period

325.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

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

1325.00

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

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

PAGE 10 OF 94

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

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NAME OF COMMITTEE (In Full)

**DAVID FLIPPO FOR NEVADA**

Full Name (Last, First, Middle Initial)

KRUSELL, WILLY, , ,

**A.**

Mailing Address 1060 LAKESHORE BLVD

City

INCLINE VILLAGE

State

NV

Zip Code

89451

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 ▼

258.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 05  |   | 2026    |

Transaction ID : ADAB40510A12F464F8C8

Amount of Each Receipt this Period

258.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

**B.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address 4250 FAIRFAX DR  
STE 600

City

ARLINGTON

State

VA

Zip Code

22203-1665

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

38292.95

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 05  |   | 2026    |

Transaction ID : ACD5E2866C90C4C6FA13

Amount of Each Receipt this Period

258.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

LIBBY, WILLIAM, , ,

Mailing Address 3913 CANYON MEADOWS CT

City

LAS VEGAS

State

NV

Zip Code

89129

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 ▼

392.04

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 28  |   | 2026    |

Transaction ID : A26A865EA0D9742CCB1F

Amount of Each Receipt this Period

20.26

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

278.26

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

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

PAGE 11 OF 94

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

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NAME OF COMMITTEE (In Full)

**DAVID FLIPPO FOR NEVADA**Full Name (Last, First, Middle Initial)  
WINREDMailing Address 4250 FAIRFAX DR  
STE 600City  
ARLINGTONState  
VAZip Code  
22203-1665FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

38292.95

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 8 |   | 2 | 0 | 2 | 6 |

Transaction ID : A6B4FCDFC8A1A4AC6B36

Amount of Each Receipt this Period

20.26

☒ Memo Item

INTERMEDIARY

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

Mailing Address 21134 N 36TH PL

City  
PHOENIXState  
AZZip Code  
85050FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

FIRST COMMAND

FINANCE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

416.40

Date of Receipt

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

Transaction ID : A5C3E99F232714A1CA80

Amount of Each Receipt this Period

104.10

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)  
WINREDMailing Address 4250 FAIRFAX DR  
STE 600City  
ARLINGTONState  
VAZip Code  
22203-1665FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

38292.95

Date of Receipt

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

Transaction ID : AB5E52FA575944A0383B

Amount of Each Receipt this Period

104.10

☒ Memo Item

INTERMEDIARY

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

104.10

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

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

PAGE 12 OF 94

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

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NAME OF COMMITTEE (In Full)

**DAVID FLIPPO FOR NEVADA**

Full Name (Last, First, Middle Initial)

LIGUORI, CRAIG, , ,

**A.**

Mailing Address 21134 N 36TH PL

City  
PHOENIXState  
AZZip Code  
85050FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FIRST COMMANDOccupation  
FINANCE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

520.50

Date of Receipt

M M / D D / Y Y Y Y Y  
05 20 2026

Transaction ID : AFE702E6373A74EC4B06

Amount of Each Receipt this Period

104.10

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

**B.**Full Name (Last, First, Middle Initial)  
WINREDMailing Address 4250 FAIRFAX DR  
STE 600City  
ARLINGTONState  
VAZip Code  
22203-1665FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

38292.95

Date of Receipt

M M / D D / Y Y Y Y Y  
05 20 2026

Transaction ID : AB63BE8534E0A4F66804

Amount of Each Receipt this Period

104.10

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**C.**Full Name (Last, First, Middle Initial)  
LYFORD, LAURIE, , ,

Mailing Address 186 VALLEY VIEW RD

City  
LOPEZ ISLANDState  
WAZip Code  
98261FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 22 2026

Transaction ID : A94905E6EAA65448EA25

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

1104.10

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

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

PAGE 13 OF 94

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

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NAME OF COMMITTEE (In Full)

**DAVID FLIPPO FOR NEVADA**Full Name (Last, First, Middle Initial)  
WINREDMailing Address 4250 FAIRFAX DR  
STE 600City  
ARLINGTONState  
VAZip Code  
22203-1665FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

38292.95

Date of Receipt

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

Transaction ID : A34136650D33644D3972

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

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

Mailing Address 2924 LA CRESTA CIR

City  
MINDENState  
NVZip Code  
89423-7858FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

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 | 5 |   | 0 | 1 |   | 2 | 0 | 6 |   |

Transaction ID : A94CBFC3BB8A547E79D2

Amount of Each Receipt this Period

500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
RYDIN, MICHAEL, , ,

Mailing Address 5500 HOLLY ST

City  
HOUSTONState  
TXZip Code  
77081-7410FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

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 | 4 |   | 1 | 0 |   | 2 | 0 | 6 |   |

Transaction ID : AA54AB69FF5724AC4890

Amount of Each Receipt this Period

3500.00

☐ Memo ItemEARMARKED (NON-DIRECTED) THROUGH  
FREEDOM CAUCUS FUND

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

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

4000.00

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

PAGE 14 OF 94

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

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NAME OF COMMITTEE (In Full)

**DAVID FLIPPO FOR NEVADA**

Full Name (Last, First, Middle Initial)

FREEDOM CAUCUS FUND

**A.**

Mailing Address PO BOX 96006

City

WASHINGTON

State

DC

Zip Code

20090-6006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

13885.00

Date of Receipt

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

Transaction ID : A1A6F018201D64DA0B98

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

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

Mailing Address PO BOX 12770

City

ODESSA

State

TX

Zip Code

79768-2770

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SALISBURY INDUSTRIES

Occupation

EXECUTIVE

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 | 4 |   | 2 | 8 |   | 2 | 0 | 2 | 6 |

Transaction ID : AD86FA70CCE82455A938

Amount of Each Receipt this Period

2500.00

☐ Memo ItemEARMARKED (NON-DIRECTED) THROUGH  
FREEDOM CAUCUS FUND**C.**Full Name (Last, First, Middle Initial)  
FREEDOM CAUCUS FUND

Mailing Address PO BOX 96006

City

WASHINGTON

State

DC

Zip Code

20090-6006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

13885.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 8 |   | 2 | 0 | 2 | 6 |

Transaction ID : AB226A798DEFF413CB60

Amount of Each Receipt this Period

2500.00

☒ Memo Item

INTERMEDIARY

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

2500.00

**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 15 OF 94

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

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NAME OF COMMITTEE (In Full)

**DAVID FLIPPO FOR NEVADA**

Full Name (Last, First, Middle Initial)

STARRETT, VIRGINIA, , ,

**A.**

Mailing Address 891 STUTLER CREEK CT

City

GARDNERVILLE

State

NV

Zip Code

89460-6413

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 01 2026

Transaction ID : A6E9B6F5A6A09459A8A6

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STOCKSETH, STEVEN, , ,

**B.**

Mailing Address 5030 GREENBRIAR DR

City

CORPUS CHRISTI

State

TX

Zip Code

78413

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 ▼

520.51

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 06 2026

Transaction ID : AF89169B1490D4662A90

Amount of Each Receipt this Period

520.51

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**C.**

Mailing Address 4250 FAIRFAX DR  
STE 600

City

ARLINGTON

State

VA

Zip Code

22203-1665

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

38292.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 06 2026

Transaction ID : ABB6605BB534E4735B0E

Amount of Each Receipt this Period

520.51

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

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

1020.51

**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 16 OF 94

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

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NAME OF COMMITTEE (In Full)

**DAVID FLIPPO FOR NEVADA**

Full Name (Last, First, Middle Initial)

SULLIVAN, MARIE, , ,

**A.**

Mailing Address 5001 CONVICT HILL RD APT 307

City  
AUSTIN

State  
TX

Zip Code  
78749-2219

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NXP SEMICONDUCTORS

Occupation  
COMPUTER ENGINEER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 17 2026

Transaction ID : A155EB02D119A45D0944

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH  
FREEDOM CAUCUS FUND

Full Name (Last, First, Middle Initial)

FREEDOM CAUCUS FUND

**B.**

Mailing Address PO BOX 96006

City  
WASHINGTON

State  
DC

Zip Code  
20090-6006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13885.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 17 2026

Transaction ID : A6F5D3D6CBDA74FC8967

Amount of Each Receipt this Period

250.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

TIMMERMAN, KEVIN, , ,

**C.**

Mailing Address 6920 AUKLET LN

City  
NORTH LAS VEGAS

State  
NV

Zip Code  
89084

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 ▼

283.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 02 2026

Transaction ID : A01E38A808CE24B149F2

Amount of Each Receipt this Period

52.05

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

302.05

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

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

PAGE 17 OF 94

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

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NAME OF COMMITTEE (In Full)

**DAVID FLIPPO FOR NEVADA**Full Name (Last, First, Middle Initial)  
WINREDMailing Address 4250 FAIRFAX DR  
STE 600City  
ARLINGTONState  
VAZip Code  
22203-1665FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

38292.95

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 02  |   | 2026    |

Transaction ID : A0787367F44AE4F69912

Amount of Each Receipt this Period

52.05

☒ Memo Item

INTERMEDIARY

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

Mailing Address 1718 WESTWOOD DRIVE

City  
MINDENState  
NVZip Code  
89423FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

TREO VENTURE

OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.25

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 09  |   | 2026    |

Transaction ID : AA230AE390C934E5A999

Amount of Each Receipt this Period

260.25

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

**C.**Full Name (Last, First, Middle Initial)  
WINREDMailing Address 4250 FAIRFAX DR  
STE 600City  
ARLINGTONState  
VAZip Code  
22203-1665FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

38292.95

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 09  |   | 2026    |

Transaction ID : A258AADB167864C8DBF4

Amount of Each Receipt this Period

260.25

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

260.25

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

PAGE 18 OF 94

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

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NAME OF COMMITTEE (In Full)

**DAVID FLIPPO FOR NEVADA**

Full Name (Last, First, Middle Initial)

WANG, JOSEPH, , ,

**A.**

Mailing Address 5509 SINGING HILLS DR

City

LAS VEGAS

State

NV

Zip Code

89130

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 ▼

510.09

Date of Receipt

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

Transaction ID : AD658A146735C4447A9D

Amount of Each Receipt this Period

104.10

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

**B.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address 4250 FAIRFAX DR  
STE 600

City

ARLINGTON

State

VA

Zip Code

22203-1665

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

38292.95

Date of Receipt

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

Transaction ID : A7C046152056A434EAA0

Amount of Each Receipt this Period

104.10

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

WANG, JOSEPH, , ,

Mailing Address 5509 SINGING HILLS DR

City

LAS VEGAS

State

NV

Zip Code

89130

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 ▼

614.19

Date of Receipt

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

Transaction ID : A94502C71D1E842CFB19

Amount of Each Receipt this Period

104.10

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

208.20

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

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

PAGE 19 OF 94

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

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NAME OF COMMITTEE (In Full)

**DAVID FLIPPO FOR NEVADA**Full Name (Last, First, Middle Initial)  
WINRED**A.**Mailing Address 4250 FAIRFAX DR  
STE 600City  
ARLINGTONState  
VAZip Code  
22203-1665FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

38292.95

Date of Receipt

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

Transaction ID : ABB44543FBED84AB99E1

Amount of Each Receipt this Period

104.10

☒ Memo Item

INTERMEDIARY

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

Mailing Address 4785 CAUGHLIN PKWY

City  
RENOState  
NVZip Code  
89519-0906FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

MAUPIN COX &amp; LEGOY

ATTORNEY

Receipt For: 2026

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A165E40185D204E81ABA

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

Amount of Each Receipt this Period

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

|          |
|----------|
| 1000.00  |
| 26102.47 |

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

PAGE 20 OF 94

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

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NAME OF COMMITTEE (In Full)

**DAVID FLIPPO FOR NEVADA**

Full Name (Last, First, Middle Initial)

FREEDOM CAUCUS FUND

**A.**

Mailing Address PO BOX 96006

City

WASHINGTON

State

DC

Zip Code

20090-6006

FEC ID number of contributing  
federal political committee.**C** C00552851

Name of Employer

Occupation

Receipt For: 2026

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

18610.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 05  |   | 12  |   | 2026        |

Transaction ID : AC73DB48C582E4AC0981

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION FOR GUN RIGHTS INC PAC

**B.**Mailing Address 201 COMMONWEALTH DR  
# 201

City

GREENVILLE

State

SC

Zip Code

29615-4814

FEC ID number of contributing  
federal political committee.**C** C00481200

Name of Employer

Occupation

Receipt For: 2026

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 05  |   | 14  |   | 2026        |

Transaction ID : AB9326FB34FBB4AB6A14

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

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

Name of Employer

Occupation

Receipt For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
|-----|---|-----|---|-------------|

Amount of Each Receipt this Period

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

5500.00

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

5500.00

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

PAGE 21 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

FIRST RESOURCE BANK

A.

Mailing Address 7449 VILLAGE DR

City

LINO LAKES

State

MN

Zip Code

55014-1181

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

4851.82

Date of Receipt

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

D D / Y Y Y Y Y

Y Y Y Y Y

Transaction ID : A61A98A076A704BCFBB1

Amount of Each Receipt this Period

5.55

☐ Memo Item

INTEREST INCOME

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

D D / Y Y Y Y Y

Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

D D / Y Y Y Y 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)..... ▶

5.55

5.55

**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 22 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. 7-ELEVEN**

Mailing Address 3200 HACKBERRY RD

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 04  |   | 2026    |

City  
IRVINGState  
TXZip Code  
75063-0131

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

115.03

Transaction ID : B68DC3139C1A84524B4B

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. 7-ELEVEN**

Mailing Address 3200 HACKBERRY RD

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 07  |   | 2026    |

City  
IRVINGState  
TXZip Code  
75063-0131

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

95.61

Transaction ID : B241C7B0826D84EDB891

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. 7-ELEVEN**

Mailing Address 3200 HACKBERRY RD

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 18  |   | 2026    |

City  
IRVINGState  
TXZip Code  
75063-0131

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

108.89

Transaction ID : BA55E2B33253644E3BC3

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

319.53

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

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

PAGE 23 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. ACE HARDWARE**

Mailing Address 2915 JORIE BLVD

City  
OAK BROOKState  
ILZip Code  
60523-2126Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 3 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

143.69

Transaction ID : B8A5C99F52872448D8E8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ACE HARDWARE**

Mailing Address 2915 JORIE BLVD

City  
OAK BROOKState  
ILZip Code  
60523-2126Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 3 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

30.33

Transaction ID : BCE97E216524E403A95C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ACE HARDWARE**

Mailing Address 2915 JORIE BLVD

City  
OAK BROOKState  
ILZip Code  
60523-2126Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 7 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

128.77

Transaction ID : B0C7ED732067841BA823

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

302.79

**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 24 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. ACE HARDWARE**

Mailing Address 2915 JORIE BLVD

City  
OAK BROOKState  
ILZip Code  
60523-2126Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 7 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

54.12

Transaction ID : B4034A56FE07D4489BE3

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ACE HARDWARE**

Mailing Address 2915 JORIE BLVD

City  
OAK BROOKState  
ILZip Code  
60523-2126Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 7 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

152.13

Transaction ID : B6C540D392E01454391B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ACE HARDWARE**

Mailing Address 2915 JORIE BLVD

City  
OAK BROOKState  
ILZip Code  
60523-2126Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

103.60

Transaction ID : B2C0070CC03CD44D8B8A

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

309.85

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

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

PAGE 25 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. ACE HARDWARE**

Mailing Address 2915 JORIE BLVD

City  
OAK BROOKState  
ILZip Code  
60523-2126Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

22.47

Transaction ID : BCEADD57441C94B92A0E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 1 SKYVIEW DR

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

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 5 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

346.50

Transaction ID : B88A3C00DFE454C1582D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN AIRLINES**

Mailing Address 1 SKYVIEW DR

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

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

645.20

Transaction ID : B2AB1113EDC3F4147869

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

1014.17

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

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

PAGE 26 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. ANEDOT**Mailing Address 1340 POYDRAS ST  
STE 1770City  
NEW ORLEANSState  
LAZip Code  
70112-5204Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5.20

Transaction ID : BB1EE9789F6B5470EAA5

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**Mailing Address 1340 POYDRAS ST  
STE 1770City  
NEW ORLEANSState  
LAZip Code  
70112-5204Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4.48

Transaction ID : B1F19C64B5B744195A13

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**Mailing Address 1340 POYDRAS ST  
STE 1770City  
NEW ORLEANSState  
LAZip Code  
70112-5204Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 8 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

40.30

Transaction ID : BE9FC50A0877F4623AC1

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

49.98

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

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

PAGE 27 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. ANEDOT**Mailing Address 1340 POYDRAS ST  
STE 1770City  
NEW ORLEANSState  
LAZip Code  
70112-5204Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4.48

Transaction ID : BD0674C4EE83E4AD0AF5

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**Mailing Address 1340 POYDRAS ST  
STE 1770City  
NEW ORLEANSState  
LAZip Code  
70112-5204Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

13.26

Transaction ID : B960650A919514D11B8D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**Mailing Address 1340 POYDRAS ST  
STE 1770City  
NEW ORLEANSState  
LAZip Code  
70112-5204Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

8.96

Transaction ID : B25335F0C758542748C8

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

26.70

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

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

PAGE 28 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. ANEDOT**Mailing Address 1340 POYDRAS ST  
STE 1770City  
NEW ORLEANSState  
LAZip Code  
70112-5204Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4.26

Transaction ID : BBE9A4BA6207C4EA198E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**Mailing Address 1340 POYDRAS ST  
STE 1770City  
NEW ORLEANSState  
LAZip Code  
70112-5204Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4.30

Transaction ID : B3EDA8ED6C43D47E6BD8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**Mailing Address 1340 POYDRAS ST  
STE 1770City  
NEW ORLEANSState  
LAZip Code  
70112-5204Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 4 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

40.30

Transaction ID : B9F3EA90A47CE48A59CE

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

48.86

**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 29 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. ANEDOT**Mailing Address 1340 POYDRAS ST  
STE 1770City  
NEW ORLEANSState  
LAZip Code  
70112-5204Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

8.60

Transaction ID : B400513BFE3E944C58F6

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ARCO**

Mailing Address 4161 ST ROSE PKWY

City  
HENDERSONState  
NVZip Code  
89044-8751Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

79.19

Transaction ID : B6053C4210F7E41DE91E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ARCO**

Mailing Address 4161 ST ROSE PKWY

City  
HENDERSONState  
NVZip Code  
89044-8751Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

41.06

Transaction ID : B727766C1FBA044AB91D

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

128.85

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

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

PAGE 30 OF 94

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

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NAME OF COMMITTEE (In Full)

**DAVID FLIPPO FOR NEVADA**

Full Name (Last, First, Middle Initial)

**A. ARCO**

Mailing Address 4161 ST ROSE PKWY

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 05  | 19  | 2026    |

City  
HENDERSONState  
NVZip Code  
89044-8751Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

91.25

Transaction ID : BC42C9B7196564532A48

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AXCAPITAL, LLC**Mailing Address 800 W 47TH ST  
STE 200

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 08  | 2026    |

City  
KANSAS CITYState  
MOZip Code  
64112-1244Purpose of Disbursement  
COMPLIANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

1555.00

Transaction ID : B805A87304A9149C587B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AXCAPITAL, LLC**Mailing Address 800 W 47TH ST  
STE 200

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 05  | 19  | 2026    |

City  
KANSAS CITYState  
MOZip Code  
64112-1244Purpose of Disbursement  
COMPLIANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

1855.00

Transaction ID : B28FC72EC8CB14826BFF

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

3501.25

**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 31 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. BJ'S RESTAURANT**

Mailing Address 13999 S VIRGINIA ST

City  
RENOState  
NVZip Code  
89511-8917Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

63.21

Transaction ID : B29ACBFEC92194C45AAD

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BJ'S RESTAURANT**

Mailing Address 13999 S VIRGINIA ST

City  
RENOState  
NVZip Code  
89511-8917Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

142.79

Transaction ID : B095A249EE12C4078A69

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BLACK BEAR DINER FERNLEY**Mailing Address 1190 E MAIN ST  
STE BCity  
FERNLEYState  
NVZip Code  
89408-9869Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

117.00

Transaction ID : B96D69A6E2D174C33A9A

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

323.00

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

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

PAGE 32 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. BLUE SIERRA REALTY**

Mailing Address 702 PLUMAS ST

City  
RENOState  
NVZip Code  
89509-1734Purpose of Disbursement  
RENT

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 3 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

8805.65

Transaction ID : B6271EDCCE01A44ABBC6

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BLUE SIERRA REALTY**

Mailing Address 702 PLUMAS ST

City  
RENOState  
NVZip Code  
89509-1734Purpose of Disbursement  
RENT

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 3 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1493.35

Transaction ID : B265B9C968E334E639E1

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BLUE SIERRA REALTY**

Mailing Address 702 PLUMAS ST

City  
RENOState  
NVZip Code  
89509-1734Purpose of Disbursement  
RENT

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 3 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

6883.16

Transaction ID : B16EC405F11B844AC861

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

17182.16

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

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

PAGE 33 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. BROTHERS BARBECUE**

Mailing Address 618 S CENTER ST

City  
RENOState  
NVZip Code  
89501-2302Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 7 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

511.97

Transaction ID : BB048C270243B41BF9CC

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVE

City  
MCLEANState  
VAZip Code  
22101-5709Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 7 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

35.00

Transaction ID : B13057E1C6686494FBCE

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVE

City  
MCLEANState  
VAZip Code  
22101-5709Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 3 | 0 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

7.00

Transaction ID : B7D7CF4CDEF274F7D947

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

553.97

**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 34 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. CHEVRON**

Mailing Address 1400 SMITH ST

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 3 |   | 2 | 0 | 2 | 6 |

City  
HOUSTONState  
TXZip Code  
77002-7311

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

104.67

Transaction ID : B8A4F1E94811A429AAA2

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. CHEVRON**

Mailing Address 1400 SMITH ST

Date of Disbursement

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

City  
HOUSTONState  
TXZip Code  
77002-7311

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

95.88

Transaction ID : BF6C4F3AEC68E4454B8F

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. CHEVRON**

Mailing Address 1400 SMITH ST

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 9 |   | 2 | 0 | 2 | 6 |

City  
HOUSTONState  
TXZip Code  
77002-7311

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

68.41

Transaction ID : B52086F2562204038B5C

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

268.96

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

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

PAGE 35 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. CHEVRON**

Mailing Address 1400 SMITH ST

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 7 |   | 2 | 0 | 2 | 6 |

City  
HOUSTONState  
TXZip Code  
77002-7311

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

100.98

Transaction ID : BD1DA8EDFB1C745E3BD3

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. CHEVRON**

Mailing Address 1400 SMITH ST

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 3 |   | 2 | 0 | 2 | 6 |

City  
HOUSTONState  
TXZip Code  
77002-7311

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

96.37

Transaction ID : B48CA8D3CB2414F8CAEB

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. CHEVRON**

Mailing Address 1400 SMITH ST

Date of Disbursement

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

City  
HOUSTONState  
TXZip Code  
77002-7311

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

99.59

Transaction ID : BDD2BE42134184F63B81

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

296.94

**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 36 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. CHEVRON**

Mailing Address 1400 SMITH ST

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 7 |   | 2 | 0 | 2 | 6 |

City  
HOUSTONState  
TXZip Code  
77002-7311

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

101.45

Transaction ID : BE9D7BC0381FD400BA20

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. COMFORT INN**

Mailing Address 915 MEETING ST

Date of Disbursement

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

City  
NORTH BETHESDAState  
MDZip Code  
20852-2375

FEC Identification Number

C

Purpose of Disbursement  
LODGING

001

Amount of Each Disbursement this Period

164.25

Transaction ID : B1CD2CE915FD345BE922

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. COMFORT INN**

Mailing Address 915 MEETING ST

Date of Disbursement

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

City  
NORTH BETHESDAState  
MDZip Code  
20852-2375

FEC Identification Number

C

Purpose of Disbursement  
LODGING

001

Amount of Each Disbursement this Period

164.25

Transaction ID : BBB6944CBF1FC429F9D8

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

429.95

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

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

PAGE 37 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. COMFORT INN**

Mailing Address 915 MEETING ST

City  
NORTH BETHESDAState  
MDZip Code  
20852-2375Purpose of Disbursement  
LODGING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

164.25

Transaction ID : BE766CBD9978F49D59E9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. COMFORT INN**

Mailing Address 915 MEETING ST

City  
NORTH BETHESDAState  
MDZip Code  
20852-2375Purpose of Disbursement  
LODGING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

164.25

Transaction ID : B86399694B13349EBAD0

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. COX COMMUNICATIONS**

Mailing Address 1700 VEGAS DR

City  
LAS VEGASState  
NVZip Code  
89106-2111Purpose of Disbursement  
UTILITIES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 3 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

169.88

Transaction ID : B7AFC70276E8148BD95D

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

498.38

**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 38 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. D&R EVENT RENTALS LLC**

Mailing Address 2540 SUTRO ST

City  
RENOState  
NVZip Code  
89512-1613Purpose of Disbursement  
EVENT SITE RENTAL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

289.43

Transaction ID : B78F1F23232FE4F81A22

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 1501 S VIRGINIA ST

City  
RENOState  
NVZip Code  
89502-2807Purpose of Disbursement  
SHIPPING AND POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

149.41

Transaction ID : BA44CBD93B535448B814

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FEDEX**

Mailing Address 1501 S VIRGINIA ST

City  
RENOState  
NVZip Code  
89502-2807Purpose of Disbursement  
SHIPPING AND POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 3 | 0 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

158.06

Transaction ID : B347080BDE9CD41E297C

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

596.90

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

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

PAGE 39 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. FEDEX**

Mailing Address 1501 S VIRGINIA ST

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 07  |   | 2026    |

City  
RENOState  
NVZip Code  
89502-2807

FEC Identification Number

C

Purpose of Disbursement  
SHIPPING AND POSTAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

126.44

Transaction ID : B800217B07FF74B65B85

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 1501 S VIRGINIA ST

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 11  |   | 2026    |

City  
RENOState  
NVZip Code  
89502-2807

FEC Identification Number

C

Purpose of Disbursement  
SHIPPING AND POSTAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

44.42

Transaction ID : B96C5251C399841069A8

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. FEDEX**

Mailing Address 1501 S VIRGINIA ST

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 12  |   | 2026    |

City  
RENOState  
NVZip Code  
89502-2807

FEC Identification Number

C

Purpose of Disbursement  
SHIPPING AND POSTAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

49.95

Transaction ID : B16C17E7453C543DFBC1

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

220.81

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

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

PAGE 40 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. FIRST RESOURCE BANK**

Mailing Address 7449 VILLAGE DR

City  
LINO LAKESState  
MNZip Code  
55014-1181Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

17.00

Transaction ID : BA9516D6B0CEF448D925

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FIRST RESOURCE BANK**

Mailing Address 7449 VILLAGE DR

City  
LINO LAKESState  
MNZip Code  
55014-1181Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

17.00

Transaction ID : B2C90E37236A64BB0AF7

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FIRST RESOURCE BANK**

Mailing Address 7449 VILLAGE DR

City  
LINO LAKESState  
MNZip Code  
55014-1181Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 8 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

17.00

Transaction ID : B542CFBBE43624A47BA5

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

51.00

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

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

PAGE 41 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. FIRST RESOURCE BANK**

Mailing Address 7449 VILLAGE DR

City  
LINO LAKESState  
MNZip Code  
55014-1181Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

17.00

Transaction ID : BA5BD1E4851D6489395D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FIRST RESOURCE BANK**

Mailing Address 7449 VILLAGE DR

City  
LINO LAKESState  
MNZip Code  
55014-1181Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

17.00

Transaction ID : B28BD356AFDD44D68F3

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FIRST RESOURCE BANK**

Mailing Address 7449 VILLAGE DR

City  
LINO LAKESState  
MNZip Code  
55014-1181Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

17.00

Transaction ID : BEC2CA355DEDD4173ACF

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

51.00

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

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

PAGE 42 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. FIRST RESOURCE BANK**

Mailing Address 7449 VILLAGE DR

City  
LINO LAKESState  
MNZip Code  
55014-1181Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

17.00

Transaction ID : BFFDE2755FC604207A39

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FIRST RESOURCE BANK**

Mailing Address 7449 VILLAGE DR

City  
LINO LAKESState  
MNZip Code  
55014-1181Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

17.00

Transaction ID : B3F6C23E668754CD4A4C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FIRST RESOURCE BANK**

Mailing Address 7449 VILLAGE DR

City  
LINO LAKESState  
MNZip Code  
55014-1181Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

17.00

Transaction ID : BCDF024F3FF004B27A92

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

51.00

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

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

PAGE 43 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. FUNDRAISING, LLC**Mailing Address 800 W 47TH ST  
STE 200City  
KANSAS CITYState  
MOZip Code  
64112-1244Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : BF070C580B3C84FDDAA9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FUNDRAISING, LLC**Mailing Address 800 W 47TH ST  
STE 200City  
KANSAS CITYState  
MOZip Code  
64112-1244Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : B470316F311E140AAA8E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GAGNON, MATT, , ,**Mailing Address 193 BENEFIT ST  
FL 1City  
PAWTUCKETState  
RIZip Code  
02861-1157Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : BD83A3116FDDE4B66A1B

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

5000.00

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

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

PAGE 44 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. HERTZ CAR RENTAL**

Mailing Address 8501 WILLIAMS RD

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 01  |   | 2026    |

City  
ESTEROState  
FLZip Code  
33928-3325

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

484.71

Transaction ID : B487727BA426E4EE0B81

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. HOME DEPOT**

Mailing Address 2455 PACES FERRY RD SE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 04  |   | 2026    |

City  
ATLANTAState  
GAZip Code  
30339-6444

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

161.91

Transaction ID : BAC9F15BE45114B5CAC5

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. HOME DEPOT**

Mailing Address 2455 PACES FERRY RD SE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 04  |   | 2026    |

City  
ATLANTAState  
GAZip Code  
30339-6444

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

140.75

Transaction ID : B90160F0E8C6643D2B57

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

787.37

**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 45 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. HOME DEPOT**

Mailing Address 2455 PACES FERRY RD SE

City  
ATLANTAState  
GAZip Code  
30339-6444Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

120.80

Transaction ID : B0095191155FE4931A94

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HOME DEPOT**

Mailing Address 2455 PACES FERRY RD SE

City  
ATLANTAState  
GAZip Code  
30339-6444Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

174.85

Transaction ID : BAABE615C047B4A01B2E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HOTEL NEVADA**

Mailing Address 501 E AULTMAN ST

City  
ELYState  
NVZip Code  
89301-1554Purpose of Disbursement  
LODGING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

118.04

Transaction ID : B8CA61E0CE22246A3AAD

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

413.69

**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 46 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. HOTEL NEVADA**

Mailing Address 501 E AULTMAN ST

City  
ELYState  
NVZip Code  
89301-1554Purpose of Disbursement  
LODGING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

118.04

Transaction ID : BEB1FFC0925954CE1B8E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HOTEL NEVADA**

Mailing Address 501 E AULTMAN ST

City  
ELYState  
NVZip Code  
89301-1554Purpose of Disbursement  
LODGING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

118.04

Transaction ID : B8EA4E93CEB1542D582F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HOTEL NEVADA**

Mailing Address 501 E AULTMAN ST

City  
ELYState  
NVZip Code  
89301-1554Purpose of Disbursement  
LODGING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

118.04

Transaction ID : BBDC6CE30256647D5ACC

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

354.12

**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 47 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. LANDAU, EVA, SARA, ,**

Mailing Address 2203 RED BUD ST

City  
LAS VEGASState  
NVZip Code  
89135-1130Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4015.00

Transaction ID : B4F9FF0EE74404AB899F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LANDAU, EVA, SARA, ,**

Mailing Address 2203 RED BUD ST

City  
LAS VEGASState  
NVZip Code  
89135-1130Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4015.00

Transaction ID : BF0C3EB094A0340C8B77

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LOPEZ, MELISSA, , ,**Mailing Address 565 SPARKS BLVD  
STE 127City  
SPARKSState  
NVZip Code  
89434-8912Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

726.75

Transaction ID : BD522C86AB9034F72A20

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

8756.75

**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 48 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. LYFT**Mailing Address 185 BERRY ST  
STE 400City  
SAN FRANCISCOState  
CAZip Code  
94107-1725Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

56.30

Transaction ID : BB06FD2176DB34B3382D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LYFT**Mailing Address 185 BERRY ST  
STE 400City  
SAN FRANCISCOState  
CAZip Code  
94107-1725Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5.00

Transaction ID : B992C4C367EB24F95BD9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MANHATTAN DELI**

Mailing Address 3800 S VIRGINIA ST

City  
RENOState  
NVZip Code  
89502-6005Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

155.25

Transaction ID : B6AE24BEEC55E400F9A8

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

216.55

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

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

PAGE 49 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. MANHATTAN DELI**

Mailing Address 3800 S VIRGINIA ST

City  
RENOState  
NVZip Code  
89502-6005Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

66.00

Transaction ID : B3EB0C7BE04C94805B91

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MAVERIK**

Mailing Address 185 S STATE ST

City  
SALT LAKE CITYState  
UTZip Code  
84111-1505Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

86.92

Transaction ID : B8633447A29774656BE0

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MAVERIK**

Mailing Address 185 S STATE ST

City  
SALT LAKE CITYState  
UTZip Code  
84111-1505Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

62.77

Transaction ID : BA9F2D42676E74B67AB3

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

215.69

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

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

PAGE 50 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. MAVERIK**

Mailing Address 185 S STATE ST

City  
SALT LAKE CITYState  
UTZip Code  
84111-1505Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

96.43

Transaction ID : BB00A1B6BA2E14C8A8B2

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NV ENERGY**

Mailing Address 6226 W SAHARA AVE

City  
LAS VEGASState  
NVZip Code  
89151-0001Purpose of Disbursement  
UTILITIES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 3 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

48.30

Transaction ID : B5DAB1D8B0132417283F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. OFFICE DEPOT**

Mailing Address 6600 N MILITARY TRL

City  
BOCA RATONState  
FLZip Code  
33496-2434Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 7 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

253.29

Transaction ID : B4D374578ACD541C1A18

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

398.02

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

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

PAGE 51 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. O'NEILL, MIKALA, , ,**

Mailing Address 355 E PLUMB LN

City  
RENOState  
NVZip Code  
89502-3405Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5926.83

Transaction ID : B1C39570E91074FD2B11

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PLAZA SOUTH**

Mailing Address 50 S JONES BLVD

City  
LAS VEGASState  
NVZip Code  
89107-2613Purpose of Disbursement  
OFFICE RENT

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 7 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2320.80

Transaction ID : BC60AD32EE1954F778B8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RALEY'S**

Mailing Address 701 KEYSTONE AVE

City  
RENOState  
NVZip Code  
89503-4103Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 3 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

219.88

Transaction ID : B588F24B378AF41CCB5C

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

8467.51

**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 52 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. RALEY'S**

Mailing Address 701 KEYSTONE AVE

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 7 |   | 2 | 0 | 2 | 6 |

City  
RENOState  
NVZip Code  
89503-4103

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

81.53

Transaction ID : B04CFE4E838044407BB9

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. REVERE SOLUTIONS LLC**

Mailing Address 292 CAYDEN WAY

Date of Disbursement

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

City  
CANTONMENTState  
FLZip Code  
32533-4751

FEC Identification Number

C

Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1484.51

Transaction ID : BAE902134BBC64AB981A

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. REVERE SOLUTIONS LLC**

Mailing Address 292 CAYDEN WAY

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 8 |   | 2 | 0 | 2 | 6 |

City  
CANTONMENTState  
FLZip Code  
32533-4751

FEC Identification Number

C

Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

4717.81

Transaction ID : BF0FDC0EC06654F058A6

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

6283.85

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

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

PAGE 53 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. REVERE SOLUTIONS LLC**

Mailing Address 292 CAYDEN WAY

City  
CANTONMENTState  
FLZip Code  
32533-4751Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

12972.50

Transaction ID : B8C0CEE9E2F304478B40

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. REVERE SOLUTIONS LLC**

Mailing Address 292 CAYDEN WAY

City  
CANTONMENTState  
FLZip Code  
32533-4751Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 5 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

5483.92

Transaction ID : B2F9A72A72BA04401923

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. REVERE SOLUTIONS LLC**

Mailing Address 292 CAYDEN WAY

City  
CANTONMENTState  
FLZip Code  
32533-4751Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 3 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

355.28

Transaction ID : BACDC0E8E71564AE3BDA

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

18811.70

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

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

PAGE 54 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. REVERE SOLUTIONS LLC**

Mailing Address 292 CAYDEN WAY

City  
CANTONMENTState  
FLZip Code  
32533-4751Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 3 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

17205.57

Transaction ID : B47416DD356AB4D75A98

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. REVERE SOLUTIONS LLC**

Mailing Address 292 CAYDEN WAY

City  
CANTONMENTState  
FLZip Code  
32533-4751Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 3 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

662.69

Transaction ID : BD38EB6511F224D1393B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. REVERE SOLUTIONS LLC**

Mailing Address 292 CAYDEN WAY

City  
CANTONMENTState  
FLZip Code  
32533-4751Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 3 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2723.03

Transaction ID : B01F11BFFF6874223B42

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

20591.29

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

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

PAGE 55 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. REVERE SOLUTIONS LLC**

Mailing Address 292 CAYDEN WAY

City  
CANTONMENTState  
FLZip Code  
32533-4751Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 3 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

926.88

Transaction ID : BAF976193A5E04F16A3C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. REVERE SOLUTIONS LLC**

Mailing Address 292 CAYDEN WAY

City  
CANTONMENTState  
FLZip Code  
32533-4751Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 3 | 0 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3446.93

Transaction ID : BA676CD3E751F4C37B1A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
EMAIL BROADCASTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 8 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1650.00

Transaction ID : BF939640194184FFB824

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

6023.81

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

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

PAGE 56 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
TEXTING AND WEB ADS

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 8 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3029.39

Transaction ID : BC992C57E2545421C84E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 8 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

6679.00

Transaction ID : B60312C37DDB540FF817

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 8 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1113.84

Transaction ID : B8EBF4568EF2F4BF3B66

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

10822.23

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

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

PAGE 57 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
VIDEO PRODUCTION

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 8 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : BFE928B21DB2A4F29B84

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 8 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

153.08

Transaction ID : B7D5B5C7377D047AAA2D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
WEB ADS, TEXTING AND PHONE CALLS

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 8 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2642.24

Transaction ID : B999B6DF3E4B94317BC0

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

3295.32

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

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

PAGE 58 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
WEB ADS, VIDEO PRODUCTION AND MEDIA PLACEMENT

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 8 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

28216.76

Transaction ID : B235C3A6C98B6488C8F9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 8 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1552.93

Transaction ID : BD97D9F4120944E55899

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
WEB ADS

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 8 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : BE9DEB499BE204EFDA0E

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

30769.69

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

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

PAGE 59 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
WEB ADS

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

740.00

Transaction ID : B815DF02B61024AE0897

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

654.00

Transaction ID : B3772C6CD51304DB1AC7

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
WEB ADS

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4908.33

Transaction ID : B8118D727841F41F192D

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

6302.33

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

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

PAGE 60 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
WEB ADS AND TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 5 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

951.98

Transaction ID : B2C4B8B6BB5E14C05902

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
WEBSITE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

65.00

Transaction ID : B1ADB99EAF3AC495AB6F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
WEB ADS AND TEXTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3463.22

Transaction ID : B78DC17BD1CD9493BA1E

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

4480.20

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

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

PAGE 61 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
VOTER DATA

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1656.00

Transaction ID : B5C5309495B354BC5BA6

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
RADIO ADS

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 3 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

472.50

Transaction ID : B75D5AD07183549FB86A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 3 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

6374.00

Transaction ID : B5CA802E4C622410B96F

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

8502.50

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

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

PAGE 62 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
WEB ADS

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 3 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

6737.90

Transaction ID : B37D900A57AA54AD9B01

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
WEB ADS

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 3 | 0 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : BC9D3E3BF3C534CE9BD6

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
WEB ADS

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

139889.00

Transaction ID : BE53E26F0FFD04ABDB9E

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

147626.90

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

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

PAGE 63 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
WEB ADS

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

14742.00

Transaction ID : BD11D7FA414DB45FF9F2

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
WEB ADS

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

49995.00

Transaction ID : BAD723F1FB9DA43B09F8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
WEB ADS

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 8 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1521.46

Transaction ID : B2D96D38A07104D918E8

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

66258.46

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

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

PAGE 64 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
WEB ADS

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

15000.00

Transaction ID : B6C5ED69BB461403DB8E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
WEB ADS

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

7179.00

Transaction ID : B6B7DC0C2D5964E83941

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
WEB ADS

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

6000.00

Transaction ID : BA3E38BE2F897474BB67

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

28179.00

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

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

PAGE 65 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
MEDIA PLACEMENT

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

10200.00

Transaction ID : B0B3E495E59604319BF7

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
TEXTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

11008.62

Transaction ID : BDA7F2C1582EB448EB76

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

125.00

Transaction ID : B64466C0328FB422DABA

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

21333.62

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

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

PAGE 66 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
DIRECT MAIL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

15896.32

Transaction ID : B3CD4041704E747D9B0A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

752.00

Transaction ID : BDFD0819023F845D1859

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

7500.00

Transaction ID : B7890D316E87A4B80BC5

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

24148.32

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

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

PAGE 67 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 4 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : BC96F1CCF451541F19D9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

27320.14

Transaction ID : B1E6B9DD656D54EB9BEC

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

16393.08

Transaction ID : B3495FCA338AA4498B89

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

44213.22

**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 68 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. RMC**Mailing Address 6950 O'BANNON DR  
STE 100City  
LAS VEGASState  
NVZip Code  
89117-2157Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

99940.00

Transaction ID : B93820D9D58F048B0920

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ROSS POLITICAL**

Mailing Address 2041 TUSTIN AVE. APT A

City  
COSTA MESAState  
CAZip Code  
92627-9359Purpose of Disbursement  
LEGAL CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : BACAD74126E2D4947A2E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SAME DAY PROCESSING**

Mailing Address 502 6TH ST

City  
HUDSONState  
WIZip Code  
54016-1783Purpose of Disbursement  
CAGING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

29.75

Transaction ID : BEDC846DE8F524E829B6

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

102469.75

**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 69 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. SAME DAY PROCESSING**

Mailing Address 502 6TH ST

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 3 |   | 2 | 0 | 2 | 6 |

City  
HUDSONState  
WIZip Code  
54016-1783

FEC Identification Number

C

Purpose of Disbursement  
CAGING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

80.00

Transaction ID : BC342D1CE6E3341C4A5D

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. SAME DAY PROCESSING**

Mailing Address 502 6TH ST

Date of Disbursement

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

City  
HUDSONState  
WIZip Code  
54016-1783

FEC Identification Number

C

Purpose of Disbursement  
CAGING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

24.50

Transaction ID : B09AFA5675E1146209C1

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. SONIC AUTOMOTIVE, INC.**

Mailing Address 4401 COLWICK RD

Date of Disbursement

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

City  
CHARLOTTEState  
NCZip Code  
28211-2311

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

10145.30

Transaction ID : B5F579D1932F14178955

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

10249.80

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

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

PAGE 70 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DR

City  
DALLASState  
TXZip Code  
75235-1908Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 7 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

385.40

Transaction ID : B99C4ABF3997D4EA1BB8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DR

City  
DALLASState  
TXZip Code  
75235-1908Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 7 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

385.40

Transaction ID : B99790704AF7346B896A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DR

City  
DALLASState  
TXZip Code  
75235-1908Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

55.00

Transaction ID : B1F143309D1D94F4C891

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

825.80

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

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

PAGE 71 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. SOUTHWEST GAS**

Mailing Address PO BOX 24531

City  
OAKLANDState  
CAZip Code  
94623-1531Purpose of Disbursement  
UTILITIES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 3 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

27.09

Transaction ID : B86974589D6024F1783A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. THE STEVE SANCHEZ SHOW**

Mailing Address 4802 E RAY RD. STE 23

City  
PHOENIXState  
AZZip Code  
85044-6410Purpose of Disbursement  
RADIO AD

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 8 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2300.00

Transaction ID : BA84310C24C1C41A29F2

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE STEVE SANCHEZ SHOW**

Mailing Address 4802 E RAY RD. STE 23

City  
PHOENIXState  
AZZip Code  
85044-6410Purpose of Disbursement  
RADIO AD

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2300.00

Transaction ID : BB85314EE2E5B4F16A78

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

4627.09

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

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

PAGE 72 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. THE STEVE SANCHEZ SHOW**

Mailing Address 4802 E RAY RD. STE 23

City  
PHOENIXState  
AZZip Code  
85044-6410Purpose of Disbursement  
RADIO AD

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2300.00

Transaction ID : B990B2B75AF6A41B7882

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. THREADENDZ**

Mailing Address 908 ASPEN CLIFF DR

City  
HENDERSONState  
NVZip Code  
89011-2519Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

221.99

Transaction ID : B9C47670E85EE4E46BD0

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. UNITED AIRLINES**

Mailing Address 233 S WACKER DR

City  
CHICAGOState  
ILZip Code  
60606-6311Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

368.80

Transaction ID : B53140D70D1FA45D4890

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

2890.79

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

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

PAGE 73 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. VISTAPRINT**

Mailing Address 275 WYMAN ST

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 27  |   | 2026    |

City  
WALTHAMState  
MAZip Code  
02451-1220

FEC Identification Number

C

Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1211.04

Transaction ID : B66D42A363A2949C98F0

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. VISTAPRINT**

Mailing Address 275 WYMAN ST

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 30  |   | 2026    |

City  
WALTHAMState  
MAZip Code  
02451-1220

FEC Identification Number

C

Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

382.15

Transaction ID : B7662A060AF4145C5933

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. VISTAPRINT**

Mailing Address 275 WYMAN ST

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 04  |   | 2026    |

City  
WALTHAMState  
MAZip Code  
02451-1220

FEC Identification Number

C

Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

737.54

Transaction ID : BBFBC0B2419FA40D684D

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

2330.73

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

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

PAGE 74 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. VISTAPRINT**

Mailing Address 275 WYMAN ST

City  
WALTHAMState  
MAZip Code  
02451-1220Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

825.87

Transaction ID : B38AE29DD928D4E2A8D4

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. VISTAPRINT**

Mailing Address 275 WYMAN ST

City  
WALTHAMState  
MAZip Code  
02451-1220Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

790.26

Transaction ID : B109A58345A62453AB48

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. VISTAPRINT**

Mailing Address 275 WYMAN ST

City  
WALTHAMState  
MAZip Code  
02451-1220Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

790.26

Transaction ID : BA2CD98283AEB48BB856

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

2406.39

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

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

PAGE 75 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. VISTAPRINT**

Mailing Address 275 WYMAN ST

City  
WALTHAMState  
MAZip Code  
02451-1220Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

719.90

Transaction ID : BDCCD6AF54BE048C3B13

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. VISTAPRINT**

Mailing Address 275 WYMAN ST

City  
WALTHAMState  
MAZip Code  
02451-1220Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

382.15

Transaction ID : B025EE0C2E3FE486D9CC

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. VOTTIV CAMPAIGNS**Mailing Address 4801 N UNIVERSITY AVE  
STE 900City  
PROVOState  
UTZip Code  
84604-5582Purpose of Disbursement  
OFFICE SUBSCRIPTIONS

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 8 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

473.00

Transaction ID : BCB0530D4F0A74248959

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

1575.05

**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 76 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. VOTTIV CAMPAIGNS**Mailing Address 4801 N UNIVERSITY AVE  
STE 900City  
PROVOState  
UTZip Code  
84604-5582Purpose of Disbursement  
OFFICE SUBSCRIPTIONS

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 9 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : B509241DFD6C1404D805

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. VOTTIV CAMPAIGNS**Mailing Address 4801 N UNIVERSITY AVE  
STE 900City  
PROVOState  
UTZip Code  
84604-5582Purpose of Disbursement  
OFFICE SUBSCRIPTIONS

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 3 | 0 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : B7B87588EA2E643239CB

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. VOTTIV CAMPAIGNS**Mailing Address 4801 N UNIVERSITY AVE  
STE 900City  
PROVOState  
UTZip Code  
84604-5582Purpose of Disbursement  
OFFICE SUBSCRIPTIONS

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B2618D9A6C08B4F92822

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

850.00

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

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

PAGE 77 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. VOTTIV CAMPAIGNS**Mailing Address 4801 N UNIVERSITY AVE  
STE 900City  
PROVOState  
UTZip Code  
84604-5582Purpose of Disbursement  
OFFICE SUBSCRIPTIONS

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

473.00

Transaction ID : BBD9E3694B76C46C6A04

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WALMART**

Mailing Address 702 SW 8TH ST

City  
BENTONVILLEState  
ARZip Code  
72716-6209Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

10.41

Transaction ID : B14B5873CBAAB4B278EB

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES, LLC**Mailing Address 4250 FAIRFAX DR  
STE 600City  
ARLINGTONState  
VAZip Code  
22203-1665Purpose of Disbursement  
CREDIT CARD PROCESSING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4.10

Transaction ID : BB3F143870E754F7BA16

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

487.51

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

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

PAGE 78 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES, LLC**Mailing Address 4250 FAIRFAX DR  
STE 600City  
ARLINGTONState  
VAZip Code  
22203-1665Purpose of Disbursement  
CREDIT CARD PROCESSING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 9 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

23.55

Transaction ID : B3E99DB5784FF4D7A905

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES, LLC**Mailing Address 4250 FAIRFAX DR  
STE 600City  
ARLINGTONState  
VAZip Code  
22203-1665Purpose of Disbursement  
CREDIT CARD PROCESSING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

11.41

Transaction ID : B984A0E8132AF4D63A54

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES, LLC**Mailing Address 4250 FAIRFAX DR  
STE 600City  
ARLINGTONState  
VAZip Code  
22203-1665Purpose of Disbursement  
CREDIT CARD PROCESSING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 3 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

45.93

Transaction ID : B36A2823B49994D41B0C

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

80.89

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

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

PAGE 79 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES, LLC**Mailing Address 4250 FAIRFAX DR  
STE 600City  
ARLINGTONState  
VAZip Code  
22203-1665Purpose of Disbursement  
CREDIT CARD PROCESSING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 3 | 0 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

7.94

Transaction ID : BC24B3AAC95CD476C8DE

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES, LLC**Mailing Address 4250 FAIRFAX DR  
STE 600City  
ARLINGTONState  
VAZip Code  
22203-1665Purpose of Disbursement  
CREDIT CARD PROCESSING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

49.19

Transaction ID : BA27D6CC0B6364AACB1B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES, LLC**Mailing Address 4250 FAIRFAX DR  
STE 600City  
ARLINGTONState  
VAZip Code  
22203-1665Purpose of Disbursement  
CREDIT CARD PROCESSING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 4 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

213.40

Transaction ID : BD4E6F8F836624740B72

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

270.53

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

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

PAGE 80 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES, LLC**Mailing Address 4250 FAIRFAX DR  
STE 600City  
ARLINGTONState  
VAZip Code  
22203-1665Purpose of Disbursement  
CREDIT CARD PROCESSING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

11.49

Transaction ID : BB4DFF457DE494B3BB70

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. YATES, AARON, , ,**Mailing Address 1550 TRENT BLVD  
STE 909City  
LEXINGTONState  
KYZip Code  
40515-1911Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3329.61

Transaction ID : BF8EE295F636A4755B57

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

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

3341.10

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

630883.62

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

PAGE 81 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. FLIPPO, DAVID, , ,**Mailing Address 355 E PLUMB LN  
#1157City  
RENOState  
NVZip Code  
89502-3405Purpose of Disbursement  
LOAN REPAYMENT: LOAN RECEIVEDCandidate Name  
FLIPPO, DAVID, , ,Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NV District: 02

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 8 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

**C** C00830471

Amount of Each Disbursement this Period

12000.00

Transaction ID : B9FED04BE7A0B43FC986

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

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

12000.00

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

12000.00

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

PAGE 82 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. DOUGLAS COUNTY REPUBLICAN WOMEN NEVADA**Mailing Address 1362 US HWY 395 N,  
SUITE 102City  
GARDNERVILLEState  
NVZip Code  
89410-7374Purpose of Disbursement  
DONATIONS

012

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

124.00

Transaction ID : B7911EC5052C24CA39D6

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DOUGLAS COUNTY REPUBLICAN WOMEN NEVADA**Mailing Address 1362 US HWY 395 N,  
SUITE 102City  
GARDNERVILLEState  
NVZip Code  
89410-7374Purpose of Disbursement  
DONATIONS

012

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

42.00

Transaction ID : B93B24A40888E46119AB

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MT. ROSE REPUBLICAN WOMEN**

Mailing Address PO BOX 18446

City  
RENOState  
NVZip Code  
89511-0446Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

228.50

Transaction ID : B94285BC7B3B04BE4BF0

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

394.50

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

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

PAGE 83 OF 94

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

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NAME OF COMMITTEE (In Full)

DAVID FLIPPO FOR NEVADA

Full Name (Last, First, Middle Initial)

**A. NEVADA REPUBLICAN CENTRAL COMMITTEE**Mailing Address 840 S RANCHO DR  
STE 4City  
LAS VEGASState  
NVZip Code  
89106-3800Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Candidate Name  
NEVADA REPUBLICAN CENTRAL COMMITTEECategory/  
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 |   | 2 | 8 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C C00082925

Amount of Each Disbursement this Period

150.00

Transaction ID : BE414E93F5C244345BE3

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WCRP**Mailing Address 3652 S VIRGINIA ST  
STE C8City  
RENOState  
NVZip Code  
89502-6049Purpose of Disbursement  
DONATIONS

012

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 |
| 0 | 5 |   | 0 | 1 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1300.00

Transaction ID : BBA3913D28F224B8B9DC

☐ 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).....▶

1450.00

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

1844.50

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

PAGE 84 OF 94

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

NAME OF COMMITTEE (In Full)

Transaction ID : CC8D21DD9287F48A799C

DAVID FLIPPO FOR NEVADA

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

FLIPPO, DAVID, , ,

Mailing Address

355 E PLUMB LN  
#1157

City

RENO

State

NV

ZIP Code

89502-3405

☒ Personal Funds of the Candidate

Original Amount of Loan

20000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

20000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
03 31 / 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).....▶

20000.00

**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 85 OF 94

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 : C25DE4A5C89AE4E9397E

DAVID FLIPPO FOR NEVADA

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

FLIPPO, DAVID, , ,

Mailing Address

355 E PLUMB LN  
#1157

City

RENO

State

NV

ZIP Code

89502-3405

☒ Personal Funds of the Candidate

Original Amount of Loan

80000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

80000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
03 09 / 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).....▶

80000.00

**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 86 OF 94

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 : C8EAF2AC2EA634773848

DAVID FLIPPO FOR NEVADA

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

FLIPPO, DAVID, , ,

Mailing Address

355 E PLUMB LN  
#1157

City

RENO

State

NV

ZIP Code

89502-3405

☒ Personal Funds of the Candidate

Original Amount of Loan

60000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

60000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
12 31 / 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).....▶

60000.00

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

PAGE 87 OF 94

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

NAME OF COMMITTEE (In Full)

Transaction ID : C70FD8AFAD9974AF2843

DAVID FLIPPO FOR NEVADA

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

FLIPPO, DAVID, , ,

Mailing Address

355 E PLUMB LN  
#1157

City

RENO

State

NV

ZIP Code

89502-3405

☒ Personal Funds of the Candidate

Original Amount of Loan

380000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

380000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
03 31 / 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).....▶

380000.00

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

PAGE 88 OF 94

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

NAME OF COMMITTEE (In Full)

Transaction ID : C1E0E07D1D85D465EAC5

DAVID FLIPPO FOR NEVADA

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

FLIPPO, DAVID, , ,

Mailing Address

355 E PLUMB LN  
#1157

City

RENO

State

NV

ZIP Code

89502-3405

☒ 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  
06 30 / 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).....▶

250000.00

**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 89 OF 94

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 : C08A14F8B7DAA481B8B1

DAVID FLIPPO FOR NEVADA

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

FLIPPO, DAVID, , ,

Mailing Address

355 E PLUMB LN  
#1157

City

RENO

State

NV

ZIP Code

89502-3405

☒ Personal Funds of the Candidate

Original Amount of Loan

200000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

200000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
03 31 / 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).....▶

200000.00

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

PAGE 90 OF 94

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

NAME OF COMMITTEE (In Full)

Transaction ID : C626E053B0BFA4206AF4

DAVID FLIPPO FOR NEVADA

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

FLIPPO, DAVID, , ,

Mailing Address

355 E PLUMB LN  
#1157

City

RENO

State

NV

ZIP Code

89502-3405

☒ Personal Funds of the Candidate

Original Amount of Loan

80000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

80000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
03 23 / 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).....▶

80000.00

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

PAGE 91 OF 94

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

NAME OF COMMITTEE (In Full)

Transaction ID : C3BBBA19D83B544FEA89

DAVID FLIPPO FOR NEVADA

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

FLIPPO, DAVID, , ,

Mailing Address

355 E PLUMB LN  
#1157

City

RENO

State

NV

ZIP Code

89502-3405

☒ Personal Funds of the Candidate

Original Amount of Loan

100000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
09 30 / 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).....▶

100000.00

**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 92 OF 94

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 : CDB2454D58EBF401BBC0

DAVID FLIPPO FOR NEVADA

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

FLIPPO, DAVID, , ,

Mailing Address

355 E PLUMB LN  
#1157

City

RENO

State

NV

ZIP Code

89502-3405

☒ Personal Funds of the Candidate

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
12 31 / 2025M M / D D / Y Y Y Y  
NONEY 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).....▶

50000.00

**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 93 OF 94

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 : C79C6635EAE1444BE809

DAVID FLIPPO FOR NEVADA

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

FLIPPO, DAVID, , ,

Mailing Address

355 E PLUMB LN  
#1157

City

RENO

State

NV

ZIP Code

89502-3405

☒ Personal Funds of the Candidate

Original Amount of Loan

30000.00

Cumulative Payment To Date

23500.00

Balance Outstanding at Close of This Period

6500.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
04 01 / 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).....▶

6500.00

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

PAGE 94 OF 94

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

NAME OF COMMITTEE (In Full)

Transaction ID : C98DC12A05DEE43BC85B

DAVID FLIPPO FOR NEVADA

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

355 E PLUMB LN  
#1157

City

RENO

State

NV

ZIP Code

89502-3405

☒ Personal Funds of the Candidate

Original Amount of Loan

30000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

30000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
05 14 / 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).....▶

30000.00

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

1256500.00

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