

**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

MIKE FRANCE CT2

ADDRESS (number and street)

PO BOX 222

Check if different
than previously
reported. (ACC)

GALES FERRY

CT

06335-0222

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00915322

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

CT

02

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

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

01

D D /

01

Y Y Y Y

2026

through

M M /

03

D D /

31

Y Y Y Y

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 /

04

D D /

13

Y Y Y Y

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

MIKE FRANCE CT2

Report Covering the Period:

From:

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

To:

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	8712.50	64114.26
(b) Total Contribution Refunds (from Line 20(d))	7000.00	7000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	1712.50	57114.26
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	28820.53	60115.80
(b) Total Offsets to Operating Expenditures (from Line 14).....	1746.33	1746.33
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	27074.20	58369.47
8. Cash on Hand at Close of Reporting Period (from Line 27).....	- 1255.20	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	2500.00	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

MIKE FRANCE CT2

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2026

To:

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

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

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

2198.59

41448.77

(ii) Unitemized

6513.91

15665.49

(iii) TOTAL of contributions
from individuals ▶

8712.50

57114.26

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

7000.00

(d) The Candidate

0.00

0.00

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

8712.50

64114.26

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

0.00

2500.00

(b) All Other Loans.....

0.00

0.00

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

0.00

2500.00

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

1746.33

1746.33

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

0.00

0.01

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

10458.83

68360.60

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS**COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....

28820.53

60115.80

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES

0.00

0.00

19. LOAN REPAYMENTS:

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

0.00

0.00

(b) Of All Other Loans

0.00

0.00

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

0.00

0.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees

3500.00

3500.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

3500.00

3500.00

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

7000.00

7000.00

21. OTHER DISBURSEMENTS

0.00

2500.00

22. **TOTAL DISBURSEMENTS**

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

35820.53

69615.80

III. CASH SUMMARY

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

24106.50

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

10458.83

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

34565.33

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

35820.53

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

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

- 1255.20

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 21

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

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

NAME OF COMMITTEE (In Full)

MIKE FRANCE CT2

Full Name (Last, First, Middle Initial)

AHLCRONA, STEPHEN, , ,

A.

Mailing Address 5 NORTHWIND CIRCLE

City

LEDYARD

State

CT

Zip Code

06339

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☐ Primary ☐ General
☒ Other (specify) ▼

CONVENTION

Election Cycle-to-Date ▼

260.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 07 2026

Transaction ID : A892A1F1E873241C19E5

Amount of Each Receipt this Period

260.25

☐ 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) ▼

CONVENTION

Election Cycle-to-Date ▼

19995.59

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 07 2026

Transaction ID : A5B1791F53DAE4CD297D

Amount of Each Receipt this Period

260.25

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

C.

Full Name (Last, First, Middle Initial)

ARORA, HARRY, , ,

Mailing Address 80 GREENWICH AVE

City

GREENWICH

State

CT

Zip Code

06830-5504

FEC ID number of contributing
federal political committee.

C

Name of Employer

ALPHASTRAT LLC

Occupation

INVESTMENT MGMT

Receipt For: 2026

☐ Primary ☐ General
☒ Other (specify) ▼

CONVENTION

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 21 2026

Transaction ID : A5E9A255E6DA0495FA78

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

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

760.25

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

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

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NAME OF COMMITTEE (In Full)

MIKE FRANCE CT2

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) ▼

CONVENTION

Election Cycle-to-Date ▼

19995.59

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
01		21		2026

Transaction ID : A560553F4B1FA44499D1

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.Full Name (Last, First, Middle Initial)
BATE, JANE, R, MS.,

Mailing Address 454 RIVERSIDE DR

City
CHESHIREState
CTZip Code
06410FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2026

☐ Primary ☐ General
☒ Other (specify) ▼

CONVENTION

Election Cycle-to-Date ▼

252.05

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
01		15		2026

Transaction ID : AC4FBA00F7C9E450FB6C

Amount of Each Receipt this Period

100.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
HEALY, CHRIS, , ,

Mailing Address 27 DORCHESTER ROAD

City
WETHERSFIELDState
CTZip Code
06109FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

CT CATHOLIC CONFERENCE

EXECUTIVE DIRECTOR

Receipt For: 2026

☐ Primary ☐ General
☒ Other (specify) ▼

CONVENTION

Election Cycle-to-Date ▼

760.25

Date of Receipt

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

Transaction ID : A89B55A041CD2446DA36

Amount of Each Receipt this Period

260.25

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

360.25

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)

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

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NAME OF COMMITTEE (In Full)

MIKE FRANCE CT2

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) ▼

CONVENTION

Election Cycle-to-Date ▼

19995.59

Date of Receipt

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

Transaction ID : AFB97D066E0AD42E9BDC

Amount of Each Receipt this Period

260.25

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)
LEWIS, PRISCILLA, , ,

Mailing Address 116 BOOM BRIDGE RD

City
NORTH STONINGTON

State
CT

Zip Code
06359

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2026

☐ Primary ☐ General
☒ Other (specify) ▼

CONVENTION

Election Cycle-to-Date ▼

202.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 15 2026

Transaction ID : A3FA14996E03B480B87F

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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) ▼

CONVENTION

Election Cycle-to-Date ▼

19995.59

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 15 2026

Transaction ID : ACE30BA6CFB3B403684C

Amount of Each Receipt this Period

50.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

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

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

50.00

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

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NAME OF COMMITTEE (In Full)

MIKE FRANCE CT2

Full Name (Last, First, Middle Initial)

NELSON, THEODORE, , ,

A.

Mailing Address P. O. BOX 824

City

NEW LONDON

State

CT

Zip Code

06320

FEC ID number of contributing
federal political committee.

C

Name of Employer

T. J. N. ENTERPRISES, LTD.

Occupation

CONTRACTOR

Receipt For: 2026

☐ Primary ☐ General
☒ Other (specify) ▼

CONVENTION

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
01		30		2026

Transaction ID : A82B0FB0404C64549AF4

Amount of Each Receipt this Period

50.00

☐ 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) ▼

CONVENTION

Election Cycle-to-Date ▼

19995.59

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
01		30		2026

Transaction ID : A1A9F7242D7FA421280F

Amount of Each Receipt this Period

50.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

C.

Full Name (Last, First, Middle Initial)

SIMMONS, ROBERT, R, COL., USA RET

Mailing Address 268 N MAIN ST

City

STONINGTON

State

CT

Zip Code

06378

FEC ID number of contributing
federal political committee.

C

Name of Employer

ARMY

Occupation

RETIRED

Receipt For: 2026

☐ Primary ☐ General
☒ Other (specify) ▼

CONVENTION

Election Cycle-to-Date ▼

1350.00

Date of Receipt

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

Transaction ID : AC0C17B3654AB4F3B9B6

Amount of Each Receipt this Period

100.00

☐ Memo Item

150.00

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

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE FRANCE CT2

Full Name (Last, First, Middle Initial)

SIMPSON, THOMAS, , ,

A.

Mailing Address 2207 STATE ST

FL 2

City

HAMDEN

State

CT

Zip Code

06517-3704

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☐ Primary☐ General☒ Other (specify) ▼

CONVENTION

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : A40C22ADD0453467585F

Amount of Each Receipt this Period

300.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

SMITH, ELENOR, C, MRS.,

Mailing Address 100 BREEZY HILL RD

City

COLLINSVILLE

State

CT

Zip Code

06019

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☐ Primary☐ General☒ Other (specify) ▼

CONVENTION

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A43D3DD0F4208496CB92

Amount of Each Receipt this Period

250.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

STEENDAM, SINCO, B, MR.,

Mailing Address 92 AYERS POINT RD

City

OLD SAYBROOK

State

CT

Zip Code

06475

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☐ Primary☐ General☒ Other (specify) ▼

CONVENTION

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A23D516FF20974894846

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

800.00

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE FRANCE CT2

Full Name (Last, First, Middle Initial)

WILSON, DAVID, , ,

A. Mailing Address PO BOX 369

City
LITCHFIELDState
CTZip Code
06759FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2026

☐ Primary ☐ General
☒ Other (specify) ▼

CONVENTION

Election Cycle-to-Date ▼

260.30

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
01		02		2026

Transaction ID : A7B9B64007E2F4916ADB

Amount of Each Receipt this Period

26.03

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

WINRED

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) ▼

CONVENTION

Election Cycle-to-Date ▼

19995.59

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
01		02		2026

Transaction ID : A747BCB0E097247B2867

Amount of Each Receipt this Period

26.03

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

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

WILSON, DAVID, , ,

Mailing Address PO BOX 369

City
LITCHFIELDState
CTZip Code
06759FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2026

☐ Primary ☐ General
☒ Other (specify) ▼

CONVENTION

Election Cycle-to-Date ▼

286.33

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
01		25		2026

Transaction ID : A6A1077DF8EED40DC843

Amount of Each Receipt this Period

26.03

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

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

52.06

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

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

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NAME OF COMMITTEE (In Full)

MIKE FRANCE CT2

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) ▼

CONVENTION

Election Cycle-to-Date ▼

19995.59

Date of Receipt

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

Transaction ID : ACA4E9DA16008446C9B2

Amount of Each Receipt this Period

26.03

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

B.

Full Name (Last, First, Middle Initial)
WILSON, DAVID, , ,

Mailing Address PO BOX 369

City
LITCHFIELDState
CTZip Code
06759FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2026

☐ Primary ☐ General
☒ Other (specify) ▼

CONVENTION

Election Cycle-to-Date ▼

312.36

Date of Receipt

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

Transaction ID : A2BA04130E3CE4B84A50

Amount of Each Receipt this Period

26.03

☐ 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) ▼

CONVENTION

Election Cycle-to-Date ▼

19995.59

Date of Receipt

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

Transaction ID : AA3BEB34059E5479BBDA

Amount of Each Receipt this Period

26.03

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

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

26.03

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

2198.59

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 21

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

MIKE FRANCE CT2

Full Name (Last, First, Middle Initial)

POSTAGE FOR DIRECT MAIL FUNDRAISING, LLC

A. Mailing Address 20130 LAKEVIEW CENTER PLAZA, SUITE

City

ASHBURN

State

VA

Zip Code

20147

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☐ General
☒ Other (specify) ▼

CONVENTION

Election Cycle-to-Date ▼

1590.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 11 2026

Transaction ID : AAC45A9157FA5460D840

Amount of Each Receipt this Period

1590.00

☐ Memo Item

DIRECT MAIL REFUND

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

1590.00

1590.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

MIKE FRANCE CT2

Full Name (Last, First, Middle Initial)

A. ARISTOTLE INTERNATIONAL, INC.

Mailing Address PO BOX 716045

City
PHILADELPHIAState
PAZip Code
19171-6045Purpose of Disbursement
DATABASE

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☐	General
☒	Other (specify) ▼		

State:

District:

CONVENTION

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2424.00

Transaction ID : BCA4D1396323C4078ABB

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AXCAPITAL, LLCMailing Address 800 W 47TH ST
STE 200City
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:

CONVENTION

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1555.00

Transaction ID : B1D9ABDE40B73447DA1A

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AXCAPITAL, LLCMailing Address 800 W 47TH ST
STE 200City
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:

CONVENTION

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1555.00

Transaction ID : BCA71F2D7305B48FA9A4

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

5534.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

MIKE FRANCE CT2

Full Name (Last, First, Middle Initial)

A. COLDSPARKMailing Address 3 PPG PL
STE 500City
PITTSBURGHState
PAZip Code
15222-5412Purpose of Disbursement
DIGITAL CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☐	General
☒	Other (specify) ▼		

State:

District:

CONVENTION

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	7		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

5056.49

Transaction ID : B30FA33B23D614B9EA5A

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. COLDSPARKMailing Address 3 PPG PL
STE 500City
PITTSBURGHState
PAZip Code
15222-5412Purpose of Disbursement
DIGITAL CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☐	General
☒	Other (specify) ▼		

State:

District:

CONVENTION

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5189.22

Transaction ID : BF473CDE435E641E49D2

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. COLDSPARKMailing Address 3 PPG PL
STE 500City
PITTSBURGHState
PAZip Code
15222-5412Purpose of Disbursement
DIGITAL CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☐	General
☒	Other (specify) ▼		

State:

District:

CONVENTION

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5172.16

Transaction ID : B854BDE3DCCA941CC98C

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

15417.87

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

MIKE FRANCE CT2

Full Name (Last, First, Middle Initial)

A. DIRECT MAIL PROCESSORS

Mailing Address 1150 CONRAD CT

City
HAGERSTOWNState
MDZip Code
21740-5905Purpose of Disbursement
DIRECT MAIL

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☐	General
☒	Other (specify) ▼		

State:

District:

CONVENTION

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

150.00

Transaction ID : B705B7D8065B44063ADD

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DIRECT MAIL PROCESSORS

Mailing Address 1150 CONRAD CT

City
HAGERSTOWNState
MDZip Code
21740-5905Purpose of Disbursement
DIRECT MAIL

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☐	General
☒	Other (specify) ▼		

State:

District:

CONVENTION

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3835.90

Transaction ID : B3E8D1E3592EC4C5C8AF

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELITE CARD PROCESSINGMailing Address 13701 MAUGANSVILLE RD
SUITE 5City
HAGERSTOWNState
MDZip Code
21740-2479Purpose of Disbursement
DIRECT MAIL

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☐	General
☒	Other (specify) ▼		

State:

District:

CONVENTION

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

118.34

Transaction ID : BD8EA5BE5EFB44A2485B

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

4104.24

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

MIKE FRANCE CT2

Full Name (Last, First, Middle Initial)

A. ELITE CARD PROCESSINGMailing Address 13701 MAUGANSVILLE RD
SUITE 5City
HAGERSTOWNState
MDZip Code
21740-2479Purpose of Disbursement
DIRECT MAIL

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☐	General
☒	Other (specify) ▼		

State:

District:

CONVENTION

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

67.05

Transaction ID : BE6497B0A768C4201B47

☐ Memo Item**B. FULFILLMENT SOLUTIONS INC.**Mailing Address 44970 FALCON PLACE
SUITE 400City
STERLINGState
VAZip Code
20166Purpose of Disbursement
DIRECT MAIL

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☐	General
☒	Other (specify) ▼		

State:

District:

CONVENTION

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1036.69

Transaction ID : B8837591DD51447CEA23

☐ Memo Item**C. POSTAGE FOR DIRECT MAIL FUNDRAISING, LLC**

Mailing Address 20130 LAKEVIEW CENTER PLAZA, SUITE

City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
DIRECT MAIL REFUND

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☐	General
☒	Other (specify) ▼		

State:

District:

CONVENTION

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2483.37

Transaction ID : B4D7FC675474E4700BDD

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

3587.11

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

MIKE FRANCE CT2

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES, LLCMailing Address 4250 FAIRFAX DR
STE 600City
ARLINGTONState
VAZip Code
22203-1665Purpose of Disbursement
CREDIT CARD FEES

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☐	General
☒	Other (specify) ▼		

State:

District:

CONVENTION

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

22.80

Transaction ID : B5218B0F3076849ACAB2

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES, LLCMailing Address 4250 FAIRFAX DR
STE 600City
ARLINGTONState
VAZip Code
22203-1665Purpose of Disbursement
CREDIT CARD FEES

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☐	General
☒	Other (specify) ▼		

State:

District:

CONVENTION

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2.68

Transaction ID : B372BCC56E9A241FD970

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES, LLCMailing Address 4250 FAIRFAX DR
STE 600City
ARLINGTONState
VAZip Code
22203-1665Purpose of Disbursement
CREDIT CARD FEES

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☐	General
☒	Other (specify) ▼		

State:

District:

CONVENTION

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

31.89

Transaction ID : B1887F207D95346199B4

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

57.37

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

MIKE FRANCE CT2

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES, LLCMailing Address 4250 FAIRFAX DR
STE 600City
ARLINGTONState
VAZip Code
22203-1665Purpose of Disbursement
CREDIT CARD FEES

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☐	General
☒	Other (specify) ▼		

State:

District:

CONVENTION

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2.41

Transaction ID : B07FEB669E6C44DD091F

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES, LLCMailing Address 4250 FAIRFAX DR
STE 600City
ARLINGTONState
VAZip Code
22203-1665Purpose of Disbursement
CREDIT CARD FEES

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☐	General
☒	Other (specify) ▼		

State:

District:

CONVENTION

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2.01

Transaction ID : BE0410B8E780147BFBFB

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES, LLCMailing Address 4250 FAIRFAX DR
STE 600City
ARLINGTONState
VAZip Code
22203-1665Purpose of Disbursement
CREDIT CARD FEES

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☐	General
☒	Other (specify) ▼		

State:

District:

CONVENTION

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.03

Transaction ID : BF3E1FAC640914C399A9

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

5.45

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

28706.04

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☐ 17	☐ 18	☐ 19a	☐ 19b
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NAME OF COMMITTEE (In Full)

MIKE FRANCE CT2

Full Name (Last, First, Middle Initial)

A. KELSEY, JOHN, DAVID, ,

Mailing Address 76 SILL LN

City
OLD LYMEState
CTZip Code
06371-1134Purpose of Disbursement
REFUND: CONTRIBUTION REFUND

010

Category/
Type

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☐	General
☒	Other (specify) ▼		

State:

District:

CONVENTION

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3500.00

Transaction ID : BB638EF2FABB34FE098D

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

3500.00

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

3500.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☐ 20a	☐ 20b	☒ 20c	☐ 21

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

NAME OF COMMITTEE (In Full)

MIKE FRANCE CT2

Full Name (Last, First, Middle Initial)

A. AMERICA FIRST PATRIOTS PAC

Mailing Address PO BOX 222

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		09		2026

City
GALES FERRYState
CTZip Code
06335-0222

FEC Identification Number

C	C00768689
---	-----------

Purpose of Disbursement
REFUND: CONTRIBUTION REFUND

010

Category/
Type

Amount of Each Disbursement this Period

3500.00

Transaction ID : BFFF4BA71849D4AF0B50

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C	
---	--

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

--

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C	
---	--

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

--

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

3500.00

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

3500.00

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

PAGE 21 OF 21

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

NAME OF COMMITTEE (In Full)

Transaction ID : C0881BEEBBB3D4606909

MIKE FRANCE CT2

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

Election: 2026

☐ Primary☐ General☒ Other (specify) ▼

CONVENTION

Mailing Address

PO BOX 222

City

GALES FERRY

State

CT

ZIP Code

06335-0222

☒ Personal Funds of the Candidate

Original Amount of Loan

2500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2500.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
08 28 / 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).....▶

2500.00

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

2500.00

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