

**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

Angie Craig for Congress

ADDRESS (number and street)

P.O. Box 22116

Check if different
than previously
reported. (ACC)

Eagan

MN

55122

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00575209

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

MN

02

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

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y

07 / 01 / 2025

through

M M / D D / Y Y Y Y

09 / 30 / 2025

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

Swenson, Scott, , ,

Signature of Treasurer

Swenson, Scott, , ,

Date

M M / D D / Y Y Y Y

10 / 15 / 2025

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

Angie Craig for Congress

Report Covering the Period:

From:

M M / D D / Y Y Y Y
07 01 2025

To:

M M / D D / Y Y Y Y
09 30 2025

	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))	0.00	1390295.95
(b) Total Contribution Refunds (from Line 20(d))	0.00	61955.05
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	1328340.90
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	2409.70	517217.01
(b) Total Offsets to Operating Expenditures (from Line 14)	290.49	27291.76
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	2119.21	489925.25
8. Cash on Hand at Close of Reporting Period (from Line 27)	24256.06	
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)	0.00	

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

Angie Craig for Congress

Report Covering the Period:

From:

MM / DD / YYYY
07 / 01 / 2025

To:

MM / DD / YYYY
09 / 30 / 2025**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).....

0.00

841211.07

(ii) Unitemized

0.00

54812.21

(iii) TOTAL of contributions
from individuals ▶

0.00

896023.28

(b) Political Party Committees.....

0.00

1032.67

(c) Other Political Committees
(such as PACs)

0.00

493240.00

(d) The Candidate

0.00

0.00

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

0.00

1390295.95

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

1975.94

13. LOANS:

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

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

0.00

0.00

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

290.49

27291.76

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

344.66

2300.78

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

635.15

1421864.43

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.....	2409.70	517217.01
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	588595.47
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	373000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	373000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	29955.05
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	32000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	61955.05
21. OTHER DISBURSEMENTS	0.00	15000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	2409.70	1555767.53

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	26030.61
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	635.15
25. SUBTOTAL (add Line 23 and Line 24).....	26665.76
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	2409.70
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	24256.06

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

PAGE 5 OF 11

☐ 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)

Angie Craig for Congress

Full Name (Last, First, Middle Initial)
Grasshopper Bank, N.A.Mailing Address 261 5Th Ave
FI 610City
New YorkState
NYZip Code
10016-7638FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2288.46

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 05 2025

Transaction ID : 5744755

Amount of Each Receipt this Period

339.54

☐ Memo Item

Interest

Full Name (Last, First, Middle Initial)
Grasshopper Bank, N.A.Mailing Address 261 5Th Ave
FI 610City
New YorkState
NYZip Code
10016-7638FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2288.46

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 05 2025

Transaction ID : 5744756

Amount of Each Receipt this Period

2.56

☐ Memo Item

Interest

Full Name (Last, First, Middle Initial)
Grasshopper Bank, N.A.Mailing Address 261 5Th Ave
FI 610City
New YorkState
NYZip Code
10016-7638FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2288.46

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 05 2025

Transaction ID : 5744757

Amount of Each Receipt this Period

2.56

☐ Memo Item

Interest

SUBTOTAL of Receipts This Page (optional) ▶

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

344.66

344.66

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

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

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NAME OF COMMITTEE (In Full)

Angie Craig for Congress

Full Name (Last, First, Middle Initial)

A. Amalgamated Bank

Mailing Address 1825 K St NW

City
WashingtonState
DCZip Code
20006-1202Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

15.25

Transaction ID : 500171296

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amalgamated Bank

Mailing Address 1825 K St NW

City
WashingtonState
DCZip Code
20006-1202Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

29.00

Transaction ID : 500171297

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Amalgamated Bank

Mailing Address 1825 K St NW

City
WashingtonState
DCZip Code
20006-1202Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

29.00

Transaction ID : 500171298

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

73.25

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Angie Craig for Congress

Full Name (Last, First, Middle Initial)

A. City Of St Cloud

Mailing Address 1201 7Th St S

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		14		2025

City
Saint CloudState
MNZip Code
56301-7516

FEC Identification Number

C

Purpose of Disbursement
Facility Rental

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

760.00

Transaction ID : 500171291

☐ Memo Item Testing the Waters Expense

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Employers Assurance Co

Mailing Address PO Box 842111

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		11		2025

City
Los AngelesState
CAZip Code
90084-2111

FEC Identification Number

C

Purpose of Disbursement
Insurance - Health

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

206.00

Transaction ID : 500171293

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. Ford Motor Company

Mailing Address 1 American Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2025

City
DearbornState
MIZip Code
48126-2701

FEC Identification Number

C

Purpose of Disbursement
Auto Lease

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

242.83

Transaction ID : 500171305

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

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

1208.83

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Angie Craig for Congress

Full Name (Last, First, Middle Initial)

A. Gusto

Mailing Address 525 20Th St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		07		2025

City
San FranciscoState
CAZip Code
94107-4345

FEC Identification Number

C

Purpose of Disbursement
Payroll Fees

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

84.80

Transaction ID : 500171294

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Gusto

Mailing Address 525 20Th St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		05		2025

City
San FranciscoState
CAZip Code
94107-4345

FEC Identification Number

C

Purpose of Disbursement
Payroll Fees

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

84.80

Transaction ID : 500171295

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Intuit

Mailing Address 2632 Marine Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		21		2025

City
Mountain ViewState
CAZip Code
94043-1126

FEC Identification Number

C

Purpose of Disbursement
Subscriptions

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

115.00

Transaction ID : 500171302

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

284.60

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

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

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

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NAME OF COMMITTEE (In Full)

Angie Craig for Congress

Full Name (Last, First, Middle Initial)

A. Intuit

Mailing Address 2632 Marine Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2025

City
Mountain ViewState
CAZip Code
94043-1126

FEC Identification Number

C

Purpose of Disbursement
Subscriptions

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

115.00

Transaction ID : 500171303

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Intuit

Mailing Address 2632 Marine Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		19		2025

City
Mountain ViewState
CAZip Code
94043-1126

FEC Identification Number

C

Purpose of Disbursement
Subscriptions

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

115.00

Transaction ID : 500171304

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Low Voltage Integrators Inc

Mailing Address 6592 Hudson Blvd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		22		2025

City
Saint PaulState
MNZip Code
55128-7093

FEC Identification Number

C

Purpose of Disbursement
Security Services

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

130.02

Transaction ID : 500171299

☐ Memo Item Testing the Waters Expense

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

360.02

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

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

PAGE 10 OF 11

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

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NAME OF COMMITTEE (In Full)

Angie Craig for Congress

Full Name (Last, First, Middle Initial)

A. The Reif Center

Mailing Address 720 NW Conifer Dr

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		17		2025

City
Grand RapidsState
MNZip Code
55744-2475

FEC Identification Number

C

Purpose of Disbursement
Facility Rental

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

475.00

Transaction ID : 500171292

☐ Memo Item Testing the Waters Expense

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

Candidate Name

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

Candidate Name

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).....▶

475.00

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

2401.70

**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 11 OF 11

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

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NAME OF COMMITTEE (In Full)

Angie Craig for Congress

Full Name (Last, First, Middle Initial)

A. ANGIE CRAIG FOR MINNESOTA

Mailing Address PO Box 580439

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2025

City
MinneapolisState
MNZip Code
55458-0439

FEC Identification Number

C C00903690

Purpose of Disbursement
Asset Transfer - Use of VehicleCandidate Name
CRAIG, ANGIE, , ,Category/
Type

Amount of Each Disbursement this Period

242.83

Transaction ID : 500171734

☒ Memo Item *

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: MN

District: 00

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

Candidate Name

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

Candidate Name

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).....▶

0.00

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

0.00