

**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.

1 2 F E 4 M 5

Hoeven for Senate

ADDRESS (number and street)

PO BOX 861

Check if different  
than previously  
reported. (ACC)

BISMARCK

ND

58502

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00473371

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

ND

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  
10 / 01 / 2025

through

M M / D D / Y Y Y Y  
12 / 31 / 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 HOBBS, CABELL, , ,

Signature of Treasurer

HOBBS, CABELL, , ,

Date

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

Hoeven for Senate

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
10 / 01 / 2025

To:

M M / D D / Y Y Y Y  
12 / 31 / 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))....	58200.00	700767.65
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	- 1800.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	58200.00	702567.65
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	47460.71	1039872.65
(b) Total Offsets to Operating Expenditures (from Line 14).....	1080.00	1796.21
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	46380.71	1038076.44
8. Cash on Hand at Close of Reporting Period (from Line 27).....	648049.66	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	100000.00	

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

Hoeven for Senate

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
10 / 01 / 2025

To:

M M / D D / Y Y Y Y  
12 / 31 / 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).....

29500.00

346855.00

(ii) Unitemized .....

0.00

26742.65

(iii) TOTAL of contributions  
from individuals ▶

29500.00

373597.65

(b) Political Party Committees.....

0.00

2020.00

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

28700.00

325150.00

(d) The Candidate .....

0.00

0.00

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

58200.00

700767.65

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

0.00

141265.63

## 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.) .....

1080.00

1796.21

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

0.00

9.22

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

59280.00

843838.71

# **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.....	47460.71	1039872.65
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	- 1500.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	- 300.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	- 1800.00
21. OTHER DISBURSEMENTS .....	0.00	26270.80
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	47460.71	1064343.45

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	636230.37
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	59280.00
25. SUBTOTAL (add Line 23 and Line 24).....	695510.37
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	47460.71
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	648049.66

**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 5 OF 32

<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	

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)

Hoeven for Senate

Full Name (Last, First, Middle Initial)

BIFFERT, KEVIN, , ,

A.

Mailing Address 1809 124TH AVE S

City  
HORACEState  
NDZip Code  
58047-FEC ID number of contributing  
federal political committee.

C

Name of Employer  
701XOccupation  
PRESIDENT/CEO

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 03 2025

Transaction ID : SA11A.40122

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

SEE REATTRIBUTION; SEE REDESIGNATION

B.

Full Name (Last, First, Middle Initial)

BIFFERT, KEVIN, , ,

Mailing Address 1809 124TH AVE S

City  
HORACEState  
NDZip Code  
58047-FEC ID number of contributing  
federal political committee.

C

Name of Employer  
701XOccupation  
PRESIDENT/CEO

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 03 2025

Transaction ID : SA11A.40126

Amount of Each Receipt this Period

- 500.00

☒ Memo Item  
CONTRIBUTION

REATTRIBUTION TO SPOUSE

C.

Full Name (Last, First, Middle Initial)

BIFFERT, KEVIN, , ,

Mailing Address 1809 124TH AVE S

City  
HORACEState  
NDZip Code  
58047-FEC ID number of contributing  
federal political committee.

C

Name of Employer  
701XOccupation  
PRESIDENT/CEO

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 03 2025

Transaction ID : SA11A.40127

Amount of Each Receipt this Period

- 1800.00

☒ Memo Item  
CONTRIBUTION

REDESIGNATION TO GENERAL

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

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

2500.00

# **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 6 OF 32

☒ 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)

Hoeven for Senate

Full Name (Last, First, Middle Initial)

BIFFERT, KEVIN, , ,

A.

Mailing Address 1809 124TH AVE S

City  
HORACE

State  
ND

Zip Code  
58047-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
701X

Occupation  
PRESIDENT/CEO

Receipt For: 2028

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 03 2025

Transaction ID : SA11A.40128

Amount of Each Receipt this Period

1800.00

☒ Memo Item  
CONTRIBUTION

REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial)

BIFFERT, STACY, , ,

B.

Mailing Address 1609 124TH AVE S

City  
HORACE

State  
ND

Zip Code  
58047-9558

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LILLY

Occupation  
SALES REP

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 03 2025

Transaction ID : SA11A.40125

Amount of Each Receipt this Period

500.00

☒ Memo Item  
CONTRIBUTION

REATTRIBUTION FROM SPOUSE

Full Name (Last, First, Middle Initial)

BLUE, NEAL, , ,

C.

Mailing Address 9756 LA JOLLA FARMS ROAD

City  
LA JOLLA

State  
CA

Zip Code  
92037-1133

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL ATOMICS

Occupation  
CHAIRMAN AND CEO

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 03 2025

Transaction ID : SA11A.40118

Amount of Each Receipt this Period

7000.00

☐ Memo Item  
CONTRIBUTION

SEE REDESIGNATION

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

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

7000.00

**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 7 OF 32

<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	

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)

Hoeven for Senate

Full Name (Last, First, Middle Initial)

BLUE, NEAL, , ,

A.

Mailing Address 9756 LA JOLLA FARMS ROAD

City

LA JOLLA

State

CA

Zip Code

92037-1133

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL ATOMICSOccupation  
CHAIRMAN AND CEO

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
10		03		2025

Transaction ID : SA11A.40119

Amount of Each Receipt this Period

- 3500.00

☒ Memo Item

CONTRIBUTION

REDESIGNATION TO GENERAL

B.

Full Name (Last, First, Middle Initial)

BLUE, NEAL, , ,

Mailing Address 9756 LA JOLLA FARMS ROAD

City

LA JOLLA

State

CA

Zip Code

92037-1133

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL ATOMICSOccupation  
CHAIRMAN AND CEO

Receipt For: 2028

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
10		03		2025

Transaction ID : SA11A.40120

Amount of Each Receipt this Period

3500.00

☒ Memo Item

CONTRIBUTION

REDESIGNATION FROM PRIMARY

C.

Full Name (Last, First, Middle Initial)

BUTLER, GREGORY, , ,

Mailing Address 114 WEST BEATON DR

City

WEST FARGO

State

ND

Zip Code

58078-2657

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
10		03		2025

Transaction ID : SA11A.40112

Amount of Each Receipt this Period

2000.00

☐ Memo Item

CONTRIBUTION

SEE REDESIGNATION

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

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

2000.00

**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 8 OF 32

<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	

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)

Hoeven for Senate

Full Name (Last, First, Middle Initial)

BUTLER, GREGORY, , ,

A.

Mailing Address 114 WEST BEATON DR

City

WEST FARGO

State

ND

Zip Code

58078-2657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2028



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	2	5

Transaction ID : SA11A.40113

Amount of Each Receipt this Period

- 1800.00



Memo Item

CONTRIBUTION

REDESIGNATION TO GENERAL

B.

Full Name (Last, First, Middle Initial)

BUTLER, GREGORY, , ,

Mailing Address 114 WEST BEATON DR

City

WEST FARGO

State

ND

Zip Code

58078-2657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2028



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	2	5

Transaction ID : SA11A.40114

Amount of Each Receipt this Period

1800.00



Memo Item

CONTRIBUTION

REDESIGNATION FROM PRIMARY

C.

Full Name (Last, First, Middle Initial)

ALEXANDER, DAVID, , ,

Mailing Address 6233 PASEO ALTA RICO

City

CARLSBAD

State

CA

Zip Code

92009-2111

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GENERAL ATOMICS

Occupation

PRESIDENT

Receipt For: 2028



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : SA11A.40144

Amount of Each Receipt this Period

5000.00



Memo Item

CONTRIBUTION

SEE REDESIGNATION

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 9 OF 32

<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	

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)

Hoeven for Senate

Full Name (Last, First, Middle Initial)

ALEXANDER, DAVID, , ,

A. Mailing Address 6233 PASEO ALTA RICO

City  
CARLSBADState  
CAZip Code  
92009-2111FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL ATOMICSOccupation  
PRESIDENT

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : SA11A.40145

Amount of Each Receipt this Period

- 1500.00

☒ Memo Item  
CONTRIBUTION

REDESIGNATION TO GENERAL

B. Full Name (Last, First, Middle Initial)  
ALEXANDER, DAVID, , ,  
Mailing Address 6233 PASEO ALTA RICOCity  
CARLSBADState  
CAZip Code  
92009-2111FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL ATOMICSOccupation  
PRESIDENT

Receipt For: 2028

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : SA11A.40146

Amount of Each Receipt this Period

1500.00

☒ Memo Item  
CONTRIBUTION

REDESIGNATION FROM PRIMARY

C. Full Name (Last, First, Middle Initial)  
BLUE, LINDEN, , ,  
Mailing Address 2611 CROWN CREST LANECity  
LA JOLLAState  
CAZip Code  
92037-1119FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL ATOMICSOccupation  
VICE CHAIRMAN

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : SA11A.40147

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

SEE REDESIGNATION

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 10 OF 32

<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	

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)

Hoeven for Senate

Full Name (Last, First, Middle Initial)

BLUE, LINDEN, , ,

**A.** Mailing Address 2611 CROWN CREST LANECity  
LA JOLLAState  
CAZip Code  
92037-1119FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL ATOMICSOccupation  
VICE CHAIRMAN

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 16 2025

Transaction ID : SA11A.40148

Amount of Each Receipt this Period

- 1500.00

☒ Memo Item  
CONTRIBUTION

REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
BLUE, LINDEN, , ,  
Mailing Address 2611 CROWN CREST LANECity  
LA JOLLAState  
CAZip Code  
92037-1119FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL ATOMICSOccupation  
VICE CHAIRMAN

Receipt For: 2028

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 16 2025

Transaction ID : SA11A.40149

Amount of Each Receipt this Period

1500.00

☒ Memo Item  
CONTRIBUTION

REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
ARTHAUD, JAMES, R., ,  
Mailing Address 14630 RIVER DRIVECity  
MEDORAState  
NDZip Code  
58645-9402FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ND ENERGYOccupation  
CEO

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 22 2025

Transaction ID : SA11A.40151

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

SEE REDESIGNATION

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

1000.00

**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 11 OF 32

<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	

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)

Hoeven for Senate

Full Name (Last, First, Middle Initial)

ARTHAUD, JAMES, R., ,

A. Mailing Address 14630 RIVER DRIVE

City  
MEDORAState  
NDZip Code  
58645-9402FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ND ENERGYOccupation  
CEO

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
10		22		2025

Transaction ID : SA11A.40152

Amount of Each Receipt this Period

- 800.00

☒ Memo Item

CONTRIBUTION

REDESIGNATION TO GENERAL

Full Name (Last, First, Middle Initial)

ARTHAUD, JAMES, R., ,

B. Mailing Address 14630 RIVER DRIVE

City  
MEDORAState  
NDZip Code  
58645-9402FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ND ENERGYOccupation  
CEO

Receipt For: 2028

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
10		22		2025

Transaction ID : SA11A.40153

Amount of Each Receipt this Period

800.00

☒ Memo Item

CONTRIBUTION

REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial)

ONEIDA NATION

C. Mailing Address N7210 SEMINARY RD

City  
ONEIDAState  
WIZip Code  
54155-FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
11		12		2025

Transaction ID : SA11A.40156

Amount of Each Receipt this Period

2000.00

☐ Memo Item

CONTRIBUTION

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

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

2000.00

**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 12 OF 32

<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	

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)

**Hoeven for Senate**

Full Name (Last, First, Middle Initial)

ARNOLD, JOHN, , ,

**A.**

Mailing Address 2950 LAZY LANE BOULEVARD

City

HOUSTON

State

TX

Zip Code

77019-1302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2028

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6800.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
11		24		2025

Transaction ID : SA11A.40158

Amount of Each Receipt this Period

3500.00

☐ Memo Item  
 CONTRIBUTION
**B.**

Full Name (Last, First, Middle Initial)

CARROLL, PATRICK, , ,

Mailing Address 3323 S WAKEFIELD ST  
SUITE 750

City

WASHINGTON

State

DC

Zip Code

20006-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TARPLIN, DOWNS &amp; YOUNG

Occupation

CONSULTANT

Receipt For: 2028

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		05		2025

Transaction ID : SA11A.40160

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION
**C.**

Full Name (Last, First, Middle Initial)

PEOPLE FOR BETTER GOVERNMENT COMMITTEE OF THE YUHA AVIATAM OF SAN MANUEL NATION

Mailing Address 515 S. FIGUEROA ST., STE. 1110

City

LOS ANGELES

State

CA

Zip Code

90071-3314

FEC ID number of contributing  
federal political committee.

C

C00736041

Name of Employer

Occupation

Receipt For: 2028

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		30		2025

Transaction ID : SA11A.41178

Amount of Each Receipt this Period

1000.00

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

5000.00

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

29500.00

**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 13 OF 32

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

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)

**Hoeven for Senate**

Full Name (Last, First, Middle Initial)

**JOBS OPPORTUNITY AND NEW IDEAS PAC**

Mailing Address P.O. BOX 93441

City  
DES MOINESState  
IAZip Code  
50393-3441FEC ID number of contributing  
federal political committee.**C** C00566851

Name of Employer

Occupation

Receipt For: 2028

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		03		2025

Transaction ID : SA11C.40117

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MICROSOFT CORPORATION PAC**

Mailing Address 1 MICROSOFT WAY

City  
REDMONDState  
WAZip Code  
98052-8300FEC ID number of contributing  
federal political committee.**C** C00227546

Name of Employer

Occupation

Receipt For: 2028

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		03		2025

Transaction ID : SA11C.40115

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

**NORTH AMERICAN COAL PAC**

Mailing Address 5340 LEGACY DR. STE 300 BLDG 1

City  
PLANOState  
TXZip Code  
75024-3141FEC ID number of contributing  
federal political committee.**C** C00303685

Name of Employer

Occupation

Receipt For: 2028

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		03		2025

Transaction ID : SA11C.40108

Amount of Each Receipt this Period

1200.00

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

8700.00

**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 14 OF 32

☐ 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)

**Hoeven for Senate**

Full Name (Last, First, Middle Initial)  
CONTINENTAL RESOURCES PAC

Mailing Address 20 N BROADWAY

City  
OKLAHOMA CITY

State  
OK

Zip Code  
73102-9213

FEC ID number of contributing  
federal political committee.

C C00551184

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 16 2025

Transaction ID : SA11C.40150

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
ELI LILLY AND COMPANY PAC

Mailing Address LILLY COPORATE CENTER

City  
INDIANAPOLIS

State  
IN

Zip Code  
46285-0001

FEC ID number of contributing  
federal political committee.

C C00082792

Name of Employer

Occupation

Receipt For: 2028

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 31 2025

Transaction ID : SA11C.40154

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
AMERICAN BAKERS ASSOCIATION PAC

Mailing Address 601 PENNSYLVANIA AVE NW STE 230

City  
WASHINGTON

State  
DC

Zip Code  
20004-2629

FEC ID number of contributing  
federal political committee.

C C00016386

Name of Employer

Occupation

Receipt For: 2028

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 18 2025

Transaction ID : SA11C.40163

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
CONTRIBUTION

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

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

6500.00

**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 15 OF 32

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 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)

**Hoeven for Senate**

Full Name (Last, First, Middle Initial)

**GILEAD SCIENCES PAC****A.**

Mailing Address 333 LAKESIDE DRIVE

City

FOSTER CITY

State

CA

Zip Code

94404-1147

FEC ID number of contributing  
federal political committee.**C** C00396895

Name of Employer

Occupation

Receipt For: 2028

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2025			

Transaction ID : SA11C.40164

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

**PHARMACEUTICAL RESEARCH & MANUFACTURERS OF AMERICA PAC****B.**Mailing Address 670 MAINE AVE SW  
STE 1000

City

WASHINGTON

State

DC

Zip Code

20024-3556

FEC ID number of contributing  
federal political committee.**C** C00021972

Name of Employer

Occupation

Receipt For: 2028

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2025			

Transaction ID : SA11C.40165

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

**AMERICAN VETERINARY MEDICAL ASSOCIATION PAC****C.**

Mailing Address 1910 SUNDERLAND PL NW

City

WASHINGTON

State

DC

Zip Code

20036-1608

FEC ID number of contributing  
federal political committee.**C** C00114132

Name of Employer

Occupation

Receipt For: 2028

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			23			2025			

Transaction ID : SA11C.41175

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION
**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 16 OF 32

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

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)

Hoeven for Senate

Full Name (Last, First, Middle Initial)

AMGEN INC. POLITICAL ACTION COMMITTEE

A.

Mailing Address ONE AMGEN CENTER DRIVE

City

THOUSAND OAKS

State

CA

Zip Code

91320-1730

FEC ID number of contributing  
federal political committee.

C

C00251876

Name of Employer

Occupation

Receipt For: 2028



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 23 2025

Transaction ID : SA11C.41177

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

TEXAS FARM BUREAU AGFUND

Mailing Address PO BOX 2689

City

WACO

State

TX

Zip Code

76702-2689

FEC ID number of contributing  
federal political committee.

C

C00214981

Name of Employer

Occupation

Receipt For: 2028



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 23 2025

Transaction ID : SA11C.41176

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

SANOFI US SERVICES INC. EMPLOYEES' POLITICAL ACTIO

Mailing Address 55 CORPORATE DR

City

BRIDGEWATER

State

NJ

Zip Code

08807-1265

FEC ID number of contributing  
federal political committee.

C

C00144345

Name of Employer

Occupation

Receipt For: 2028



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 30 2025

Transaction ID : SA11C.41179

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

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

9000.00

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

28700.00



# **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 17 OF 32

☐ 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)

**Hoeven for Senate**

Full Name (Last, First, Middle Initial)

USPS

**A.**

Mailing Address 220 E ROSSER AVE ROOM 112

City

BISMARCK

State

ND

Zip Code

58501

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 Y  
10 31 2025

Transaction ID : SA14USPS

Amount of Each Receipt this Period

1080.00

☐ Memo Item

REFUND POSTAGE

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  
☐ Other (specify) ▼

☐ General

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  
☐ Other (specify) ▼

☐ General

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)..... ▶

1080.00

1080.00

**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 18 OF 32

<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

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)

Hoeven for Senate

Full Name (Last, First, Middle Initial)

**A. MICROSOFT**

Mailing Address ONE MICROSOFT WAY

City  
REDMONDState  
WAZip Code  
98052Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

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:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

75.62

Transaction ID : SB.1

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. EBERHARD, TONY, , ,**

Mailing Address PO BOX 861

City  
BISMARCKState  
NDZip Code  
58502Purpose of Disbursement  
TRAVEL - SEE DETAIL

Candidate Name

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:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1651.32

Transaction ID : SB.2

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ENTERPRISE RENT-A-CAR**

Mailing Address 600 CORPORATE PARK DR

City  
ST LOUISState  
MOZip Code  
63105Purpose of Disbursement  
TRAVEL

Candidate Name

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:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

446.71

Transaction ID : SB.2ER1

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

1726.94

**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 19 OF 32

<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

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)

Hoeven for Senate

Full Name (Last, First, Middle Initial)

**A. MARRIOTT HOTELS**

Mailing Address 10400 FERNWOOD RD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2025

City  
BETHESDAState  
MDZip Code  
20817

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1018.47

Transaction ID : SB.2ER2

☒ Memo Item

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:

Full Name (Last, First, Middle Initial)

**B. NATIONAL AIRPORT**

Mailing Address 2401 SMITH BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2025

City  
ARLINGTONState  
VAZip Code  
22202

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

140.00

Transaction ID : SB.2ER3

☒ Memo Item

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:

Full Name (Last, First, Middle Initial)

**C. RIGHTSIDE COMPLIANCE LLC**

Mailing Address PO BOX 341027

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2025

City  
AUSTINState  
TXZip Code  
78734

FEC Identification Number

C

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

150.00

Transaction ID : SB.3

☐ Memo Item

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:

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

150.00

**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 20 OF 32

<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

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)

Hoeven for Senate

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1593 SPRING HILL RD #400

City  
VIENNAState  
VAZip Code  
22182Purpose of Disbursement  
DATABASE MANAGEMENT SERVICE

Candidate Name

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
1	0		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB.4

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. IMAGE PRINTING INC**

Mailing Address PO BOX 696

City  
BISMARCKState  
NDZip Code  
58502Purpose of Disbursement  
PRINTING

Candidate Name

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
1	0		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

59.97

Transaction ID : SB.5

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ODNEY**

Mailing Address PO BOX 2035

City  
BISMARCKState  
NDZip Code  
58502Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

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
1	0		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

4490.00

Transaction ID : SB.6

☐ Memo Item

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

5549.97

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 21 OF 32

<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

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)

Hoeven for Senate

Full Name (Last, First, Middle Initial)

**A. PRESORT PLUS**

Mailing Address PO BOX 1555

City  
BISMARCKState  
NDZip Code  
58502Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		10		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

224.03

Transaction ID : SB.7

☐ Memo Item**B. THE BISMARCK TRIBUNE**

Mailing Address PO BOX 5516

City  
BISMARCKState  
NDZip Code  
58506Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		10		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

39.99

Transaction ID : SB.8

☐ Memo Item**C. SKIES322**

Mailing Address 322 DEMERS AVE

City  
GRAND FORKSState  
NDZip Code  
58201Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

446.10

Transaction ID : SB.10

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

710.12

**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 22 OF 32

<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

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)

Hoeven for Senate

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address 220 E ROSSER AVE ROOM 112

Date of Disbursement

M M	D D	Y Y Y Y
10	14	2025

City  
BISMARCKState  
NDZip Code  
58501-9998Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

1080.00

Transaction ID : SB.11

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. USPS**

Mailing Address 220 E ROSSER AVE ROOM 112

Date of Disbursement

M M	D D	Y Y Y Y
10	14	2025

City  
BISMARCKState  
NDZip Code  
58501-9998Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

370.00

Transaction ID : SB.9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. EM RAHAL AND CO**

Mailing Address 4101 CATHEDRAL AVE NW #707

Date of Disbursement

M M	D D	Y Y Y Y
10	20	2025

City  
WASHINGTONState  
DCZip Code  
20016Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

7018.65

Transaction ID : SB.13

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

8468.65

**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 32

<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

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)

Hoeven for Senate

Full Name (Last, First, Middle Initial)

**A. ODNEY**

Mailing Address PO BOX 2035

City  
BISMARCKState  
NDZip Code  
58502Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		20		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

4490.00

Transaction ID : SB.12

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. VONAGE**

Mailing Address 101 CRAWFORDS CORNER RD

City  
HOLMDELState  
NJZip Code  
07733Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		20		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

48.80

Transaction ID : SB.14

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. INTUIT**

Mailing Address 2700 COAST AVE

City  
MOUNTAIN VIEWState  
CAZip Code  
94043Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		21		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

80.50

Transaction ID : SB.15

☐ Memo Item

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

4619.30

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 32

<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

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)

Hoeven for Senate

Full Name (Last, First, Middle Initial)

**A. SEMINARY, DEBORAH, , ,**

Mailing Address 866 RANIA WAY WEST

City  
WEST FARGOState  
NDZip Code  
58078Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		03		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

10374.07

Transaction ID : SB.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MICROSOFT**

Mailing Address ONE MICROSOFT WAY

City  
REDMONDState  
WAZip Code  
98052Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		03		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

75.62

Transaction ID : SB.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RIGHTSIDE COMPLIANCE LLC**

Mailing Address PO BOX 341027

City  
AUSTINState  
TXZip Code  
78734Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

1320.00

Transaction ID : SB.18

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

11769.69

**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 25 OF 32

<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

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)

Hoeven for Senate

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1593 SPRING HILL RD #400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2025

City  
VIENNAState  
VAZip Code  
22182

FEC Identification Number

C

Purpose of Disbursement  
DATABASE MANAGEMENT SERVICE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB.20

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**B. THE BISMARCK TRIBUNE**

Mailing Address PO BOX 5516

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2025

City  
BISMARCKState  
NDZip Code  
58506

FEC Identification Number

C

Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

39.99

Transaction ID : SB.19

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**C. VONAGE**

Mailing Address 101 CRAWFORDS CORNER RD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		20		2025

City  
HOLMDELState  
NJZip Code  
07733

FEC Identification Number

C

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

48.80

Transaction ID : SB.21

☐ Memo Item

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:

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

1088.79

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 26 OF 32

<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

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)

Hoeven for Senate

Full Name (Last, First, Middle Initial)

**A. INTUIT**

Mailing Address 2700 COAST AVE

City  
MOUNTAIN VIEWState  
CAZip Code  
94043Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

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
1	1		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

80.50

Transaction ID : SB.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT INC**

Mailing Address 1340 POYDRAS ST STE 1770

City  
NEW ORLEANSState  
LAZip Code  
70112Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

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
1	1		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

140.30

Transaction ID : SB.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MICROSOFT**

Mailing Address ONE MICROSOFT WAY

City  
REDMONDState  
WAZip Code  
98052Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

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
1	2		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

75.62

Transaction ID : SB.24

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

296.42

**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 32

<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

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)

Hoeven for Senate

Full Name (Last, First, Middle Initial)

**A. RIGHTSIDE COMPLIANCE LLC**

Mailing Address PO BOX 341027

City  
AUSTINState  
TXZip Code  
78734Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

180.00

Transaction ID : SB.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CONDOLENCES.COM**

Mailing Address 2326 WASHINGTON BLVD #303

City  
OGDENState  
UTZip Code  
84409Purpose of Disbursement  
FLOWERS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		05		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

170.21

Transaction ID : SB.27

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE BISMARCK TRIBUNE**

Mailing Address PO BOX 5516

City  
BISMARCKState  
NDZip Code  
58506Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		05		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

39.99

Transaction ID : SB.26

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

390.20

**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 28 OF 32

<input checked="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

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)

Hoeven for Senate

Full Name (Last, First, Middle Initial)

**A. ANEDOT INC**

Mailing Address 1340 POYDRAS ST STE 1770

City  
NEW ORLEANSState  
LAZip Code  
70112Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

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
12		06		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

20.30

Transaction ID : SB.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BISTRO CACAO**

Mailing Address 320 MASSACHUSETTS AVE NE

City  
WASHINGTONState  
DCZip Code  
20002Purpose of Disbursement  
FACILITY RENTAL

Candidate Name

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
12		09		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

834.00

Transaction ID : SB.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CMDI**

Mailing Address 1593 SPRING HILL RD #400

City  
VIENNAState  
VAZip Code  
22182Purpose of Disbursement  
DATABASE MANAGEMENT SERVICE

Candidate Name

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
12		09		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB.31

☐ Memo Item

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

1854.30

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 32

<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

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)

Hoeven for Senate

Full Name (Last, First, Middle Initial)

**A. IMAGE PRINTING INC**

Mailing Address PO BOX 696

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2025

City  
BISMARCKState  
NDZip Code  
58502Purpose of Disbursement  
PRINTING

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

5217.44

Transaction ID : SB.32

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. USPS**

Mailing Address 220 E ROSSER AVE ROOM 112

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2025

City  
BISMARCKState  
NDZip Code  
58501-9998Purpose of Disbursement  
PO BOX RENTAL

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

268.00

Transaction ID : SB.33

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. ODNEY**

Mailing Address PO BOX 2035

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		17		2025

City  
BISMARCKState  
NDZip Code  
58502Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

4815.00

Transaction ID : SB.34

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

10300.44

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 32

<input checked="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

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)

Hoeven for Senate

Full Name (Last, First, Middle Initial)

**A. WALMART**

Mailing Address 702 SW 8TH ST

City  
BENTONVILLEState  
AKZip Code  
72716Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

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
1	2		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

208.72

Transaction ID : SB.35

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. INTUIT**

Mailing Address 2700 COAST AVE

City  
MOUNTAIN VIEWState  
CAZip Code  
94043Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

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
1	2		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

80.50

Transaction ID : SB.38

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LEX POLITICA**

Mailing Address #129 7415 SW PKWY BLDG 6 STE 500

City  
AUSTINState  
TXZip Code  
78735Purpose of Disbursement  
LEGAL CONSULTING

Candidate Name

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
1	2		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

187.50

Transaction ID : SB.36

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

476.72

**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 32

<input checked="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

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)

Hoeven for Senate

Full Name (Last, First, Middle Initial)

**A. VONAGE**

Mailing Address 101 CRAWFORDS CORNER RD

Date of Disbursement

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

City  
HOLMDELState  
NJZip Code  
07733

FEC Identification Number

C

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

49.17

Transaction ID : SB.37

☐ Memo Item

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:

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:

<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:

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:

<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:

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

49.17

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

47450.71

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

PAGE 32 OF 32

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L1

Hoeven for Senate

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

Election: 2010

☒ Primary☐ General☐ Other (specify) ▼

Hoeven, John, , ,

Mailing Address

PO Box 2572

City

Bismarck

State

ND

ZIP Code

58502-2572

☒ 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  
01 12 / 2010

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).....▶

100000.00

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