

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Mike Haridopolos for Congress

ADDRESS (number and street)

610 S Boulevard

Check if different  
than previously  
reported. (ACC)

Tampa

FL

33606-2647

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00877324

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

FL

08

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  
11 / 05 / 2024in the  
State of

FL

(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 / 2024

through

M M / D D / Y Y Y Y  
10 / 16 / 2024*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

Watkins, Nancy, H., ,

Signature of Treasurer

Watkins, Nancy, H., ,

Date

M M / D D / Y Y Y Y  
10 / 22 / 2024

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office  
Use  
Only**FEC FORM 3**  
(Revised 05/2016)

SUMMARY PAGE  
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Mike Haridopolos for Congress

Report Covering the Period: From: 10 / 01 / 2024 To: 10 / 16 / 2024

|                                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)                                                                          |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e)) ....                                             | 26855.23                | 1552013.69                         |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....                                                        | 633.29                  | 6683.77                            |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 26221.94                | 1545329.92                         |
| 7. Net Operating Expenditures                                                                                    |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....                                                         | 82694.58                | 1039471.06                         |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14) .....                                              | 0.00                    | 40042.35                           |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 82694.58                | 999428.71                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27) .....                                             | 367501.21               |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 14279.65                |                                    |

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

Mike Haridopolos for Congress

Report Covering the Period:

From:

M M

/

D D

/

Y Y Y Y

To:

M M

/

D D

/

Y Y Y Y

| I. RECEIPTS                                                                                       | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|---------------------------------------------------------------------------------------------------|-------------------------------|------------------------------------|
| 11. CONTRIBUTIONS (other than loans) FROM:                                                        |                               |                                    |
| (a) Individuals/Persons Other Than Political Committees                                           |                               |                                    |
| (i) Itemized (use Schedule A).....                                                                | 17540.72                      | 1193671.44                         |
| (ii) Unitemized .....                                                                             | 814.51                        | 14342.25                           |
| (iii) TOTAL of contributions from individuals .....                                               | 18355.23                      | 1208013.69                         |
| (b) Political Party Committees.....                                                               | 0.00                          | 0.00                               |
| (c) Other Political Committees (such as PACs) .....                                               | 8500.00                       | 344000.00                          |
| (d) The Candidate .....                                                                           | 0.00                          | 0.00                               |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..            | 26855.23                      | 1552013.69                         |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....                                              | 0.00                          | 14800.00                           |
| 13. LOANS:                                                                                        |                               |                                    |
| (a) Made or Guaranteed by the Candidate.....                                                      | 0.00                          | 15000.00                           |
| (b) All Other Loans.....                                                                          | 0.00                          | 0.00                               |
| (c) TOTAL LOANS (add Lines 13(a) and (b)).....                                                    | 0.00                          | 15000.00                           |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....                              | 0.00                          | 40042.35                           |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) .....                                              | 0.00                          | 0.00                               |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... | 26855.23                      | 1621856.04                         |

# **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.....

82694.58

1039471.06

18. TRANSFERS TO OTHER  
AUTHORIZED COMMITTEES .....

0.00

0.00

19. LOAN REPAYMENTS:

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

0.00

15000.00

(b) Of All Other Loans .....

0.00

0.00

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

0.00

15000.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other  
Than Political Committees .....

633.29

6683.77

(b) Political Party Committees.....

0.00

0.00

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

0.00

0.00

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

633.29

6683.77

21. OTHER DISBURSEMENTS .....

10000.00

193200.00

22. **TOTAL DISBURSEMENTS**

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

93327.87

1254354.83

**III. CASH SUMMARY**

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

433973.85

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

26855.23

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

460829.08

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

93327.87

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

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

367501.21

**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 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)

Baugher, Robert, A., ,

A.

Mailing Address 2210 S. Atlantic Avenue

City

Cocoa Beach

State

FL

Zip Code

32931

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self-employedOccupation  
hotelier

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3200.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 07 |   |   | 2024 |   |   |   |

Transaction ID : A533B91B6A11A4A90958

Amount of Each Receipt this Period

3200.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Bowen, John, , ,

Mailing Address 746 Loggerhead Island Dr

City

Satellite Beach

State

FL

Zip Code

32937-3847

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retiredOccupation  
retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

6600.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 09 |   |   | 30 |   |   | 2024 |   |   |   |

Transaction ID : AF37AC12234F2451C84C

Amount of Each Receipt this Period

800.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

C.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

567112.17

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 02 |   |   | 2024 |   |   |   |

Transaction ID : A79840FC115864AE1A65

Amount of Each Receipt this Period

800.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

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

4000.00

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 6 OF 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)

Castillo, Ricardo, , ,

A.

Mailing Address 9349 Barbizon Ln

City

Melbourne

State

FL

Zip Code

32940-6560

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MegaMentis GroupOccupation  
owner

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

364.36

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 7 |   | 2 | 0 | 2 | 4 |

Transaction ID : AE1C6885F25654954B45

Amount of Each Receipt this Period

364.36

☐ Memo Item

Earmarked (Non-Directed) through WinRed

B.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

567112.17

Date of Receipt

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

Transaction ID : ADDF7E3EB392949E5AD6

Amount of Each Receipt this Period

364.36

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

C.

Full Name (Last, First, Middle Initial)

Chappell, Michael, , ,

Mailing Address 2818 University Ter NW

City

Washington

State

DC

Zip Code

20016-3459

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Fierce Government Relations

Occupation

Consultant

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 2 | 4 |

Transaction ID : AE5EE3C7DA7B8408C972

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

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

864.36

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 7 OF 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)  
WinRed**A.** Mailing Address PO Box 9891City  
ArlingtonState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

567112.17

Date of Receipt

M M / D D / Y Y Y Y Y  
10 02 2024

Transaction ID : A567F51604FDA41BFB0A

Amount of Each Receipt this Period

500.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.**B.** Full Name (Last, First, Middle Initial)  
Coonrod, Melinda, , ,

Mailing Address 2105 Trianon Ct

City  
TallahasseeState  
FLZip Code  
32308-5820FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
attorney

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

520.51

Date of Receipt

M M / D D / Y Y Y Y Y  
10 03 2024

Transaction ID : AF3B3BB94A8EB4D8E99D

Amount of Each Receipt this Period

520.51

☐ Memo Item

Earmarked (Non-Directed) through WinRed

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

Mailing Address PO Box 9891

City  
ArlingtonState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

567112.17

Date of Receipt

M M / D D / Y Y Y Y Y  
10 08 2024

Transaction ID : ADFB8BE0214C64FE69FB

Amount of Each Receipt this Period

520.51

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.**SUBTOTAL** of Receipts This Page (optional)..... ▶

520.51

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

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

PAGE 8 OF 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)

Erwin, Carol, , ,

A.

Mailing Address 1700 Commodore Blvd  
Apt 1402

City

Cocoa Beach

State

FL

Zip Code

32931-3264

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retiredOccupation  
retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

250.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 02  |   | 2024    |

Transaction ID : A483A603744694102884

Amount of Each Receipt this Period

50.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

B.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

567112.17

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 04  |   | 2024    |

Transaction ID : ACFC897AA3FD9495CA11

Amount of Each Receipt this Period

50.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

C.

Full Name (Last, First, Middle Initial)

Genoni, John, P., ,

Mailing Address 758 Glengarry Drive

City

Melbourne

State

FL

Zip Code

32940-1866

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/aOccupation  
retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3300.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 16  |   | 2024    |

Transaction ID : AF0DD0A161076468CBAC

Amount of Each Receipt this Period

3300.00

☐ Memo Item

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

3350.00

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

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

PAGE 9 OF 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)

Hanson, Bruce, , ,

A. Mailing Address 511 N John Rodes Blvd

City

Melbourne

State

FL

Zip Code

32934-9112

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Maritime Tactical Systems, Inc.

Occupation

CEO

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

520.50

Date of Receipt

M M / D D / Y Y Y Y Y  
09 30 2024

Transaction ID : A035C4A14D3B54F7F8A9

Amount of Each Receipt this Period

260.25

☐ Memo Item

Earmarked (Non-Directed) through WinRed

Full Name (Last, First, Middle Initial)

WinRed

B. Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

567112.17

Date of Receipt

M M / D D / Y Y Y Y Y  
10 02 2024

Transaction ID : A85C3D15ACD784FCF8E0

Amount of Each Receipt this Period

260.25

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

Full Name (Last, First, Middle Initial)

Harrington, Steve, , ,

C. Mailing Address 451 Dempsey Dr

City

Cocoa Beach

State

FL

Zip Code

32931-2805

FEC ID number of contributing  
federal political committee.

C

Name of Employer

retired

Occupation

retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1093.07

Date of Receipt

M M / D D / Y Y Y Y Y  
09 30 2024

Transaction ID : A95E1660103D8406E847

Amount of Each Receipt this Period

52.05

☐ Memo Item

Earmarked (Non-Directed) through WinRed

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

312.30

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

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

PAGE 10 OF 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)

WinRed

A.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

567112.17

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 02  |   | 2024        |

Transaction ID : A1F1A811A2321494DA23

Amount of Each Receipt this Period

52.05

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

B.

Full Name (Last, First, Middle Initial)

Hilton, Nick, , ,

Mailing Address 445 Desoto Pkwy

City

Satellite Beach

State

FL

Zip Code

32937-4011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self

Medical Device Manufacturer

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

260.25

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 28  |   | 2024        |

Transaction ID : ABE2B5110F11B4966BFC

Amount of Each Receipt this Period

260.25

☐ Memo Item

Earmarked (Non-Directed) through WinRed

C.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

567112.17

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 02  |   | 2024        |

Transaction ID : A467A8F7C23AB41909B5

Amount of Each Receipt this Period

260.25

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

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

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

260.25

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

PAGE 11 OF 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)

Hutton, Douglas, , ,

A.

Mailing Address 4317 Stonehill Ct

City

Temple

State

TX

Zip Code

76502-3133

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retiredOccupation  
retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 08 2024

Transaction ID : AD6F22E1AE83F41C7A5D

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

B.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

567112.17

Date of Receipt

M M / D D / Y Y Y Y Y  
10 11 2024

Transaction ID : A1F5EC6D8D3B84F9FB5B

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

C.

Full Name (Last, First, Middle Initial)

Lutian, Taylor, , ,

Mailing Address 2155 Judge Fran Jamieson Way

City

Melbourne

State

FL

Zip Code

32940-6167

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Goal SolutionsOccupation  
System Admin

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 27 2024

Transaction ID : AFF5F54F115E542D7B1A

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

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

1500.00

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 12 OF 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)

WinRed

A.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

567112.17

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 02 |   |   | 2024 |   |   |   |

Transaction ID : A17453C5F2EF14A47A86

Amount of Each Receipt this Period

500.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

B.

Full Name (Last, First, Middle Initial)

McNeight, Angela, , ,

Mailing Address 344 S Lakeside Dr

City

Satellite Beach

State

FL

Zip Code

32937-3821

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Caudill McNeight Orthodontics

Orthodontist

Receipt For: 2024

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.25

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 08 |   |   | 2024 |   |   |   |

Transaction ID : A8321779D317B42A6BDD

Amount of Each Receipt this Period

260.25

☐ Memo Item

Earmarked (Non-Directed) through WinRed

C.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

567112.17

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 11 |   |   | 2024 |   |   |   |

Transaction ID : A136F701B9B644B20A4A

Amount of Each Receipt this Period

260.25

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

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

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

260.25

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

PAGE 13 OF 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)

MILLER, ROBERT, , ,

A.

Mailing Address 700 Nicklaus Dr

City

Melbourne

State

FL

Zip Code

32940-1790

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retiredOccupation  
retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

545.51

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 2 | 4 |

Transaction ID : A75D8C345A8D24A4ABC0

Amount of Each Receipt this Period

25.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

B.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

567112.17

Date of Receipt

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

Transaction ID : A17134E52F7AE4B9C845

Amount of Each Receipt this Period

25.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

C.

Full Name (Last, First, Middle Initial)

Moeller, Thomas M, , ,

Mailing Address 281 S Blue Wave Ln

City

Vero Beach

State

FL

Zip Code

32963-3186

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retiredOccupation  
retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1020.51

Date of Receipt

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

Transaction ID : A7C134B7ED54A4828975

Amount of Each Receipt this Period

520.51

☐ Memo Item

Earmarked (Non-Directed) through WinRed

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

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

545.51

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

PAGE 14 OF 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)

WinRed

A.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

567112.17

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 08 2024

Transaction ID : A1F28F37C64CF4B49B73

Amount of Each Receipt this Period

520.51

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

B.

Full Name (Last, First, Middle Initial)

Moyles, Kyle, , ,

Mailing Address 283 Peregrine Dr

City

Melbourne

State

FL

Zip Code

32903-4743

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Melbourne hand center

Occupation

Surgeon

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 27 2024

Transaction ID : AB5E37AAE3BD24F638D2

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

C.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

567112.17

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 01 2024

Transaction ID : AFC381B93224A4891BC7

Amount of Each Receipt this Period

3300.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

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

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

3300.00

**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 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)

Simonian, Rick, , ,

A.

Mailing Address 11434 S Tropical Trl

City

Merritt Island

State

FL

Zip Code

32952-7019

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retiredOccupation  
retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

425.00

Date of Receipt

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

Transaction ID : AFE1F80A6F21040E6806

Amount of Each Receipt this Period

25.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

B.

Full Name (Last, First, Middle Initial)  
WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

567112.17

Date of Receipt

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

Transaction ID : A679FE6F1F9F64478919

Amount of Each Receipt this Period

25.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

C.

Full Name (Last, First, Middle Initial)  
Williams, Mike Sr, , ,

Mailing Address 112 Lansing Island Dr

City

Indian Harbour Bea

State

FL

Zip Code

32937-5352

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retiredOccupation  
retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2602.54

Date of Receipt

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

Transaction ID : ADC0845D8FF71421FB53

Amount of Each Receipt this Period

2602.54

☐ Memo Item

Earmarked (Non-Directed) through WinRed

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

2627.54

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 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)  
WinRed

A. Mailing Address PO Box 9891

City  
ArlingtonState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

567112.17

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 02  |   | 2024        |

Transaction ID : A510B7E188D48404A891

Amount of Each Receipt this Period

2602.54

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

0.00

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

17540.72

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

PAGE 17 OF 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)

Chevron Employees Political Action Committee

Mailing Address 5001 Executive Parkway, Room #3W00

City

San Ramon

State

CA

Zip Code

94583

FEC ID number of contributing  
federal political committee.

C C00035006

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 16 2024

Transaction ID : A15496841A1C14158B74

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Clear Channel Outdoor LLC PAC

Mailing Address 2325 E Camelback Rd  
Ste 400

City

Phoenix

State

AZ

Zip Code

85016-3514

FEC ID number of contributing  
federal political committee.

C C00699157

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 07 2024

Transaction ID : A8A9E181322814107B89

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

National Shooting Sports Foundation, Inc. Political Action Committee (NSSF PAC)

Mailing Address 400 N. Capitol Street, N.W., #475

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C C00480863

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 12 2024

Transaction ID : A9E19F3F8D168422CB38

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶

7000.00

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 18 OF 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)

NFIB Federal Political Action Committee

A.

Mailing Address 555 12th St NW  
Ste 1001City  
WashingtonState  
DCZip Code  
20004-1267

Date of Receipt

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

Transaction ID : ADB25ADBBA90642018A1

FEC ID number of contributing  
federal political committee.

C C00101105

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Date of Receipt

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

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Date of Receipt

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

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period

☐ Memo Item

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

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

1500.00

8500.00

**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 19 OF 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)

**A. American Made Media Consultants, LLC**Mailing Address 4040 Fairfax Drive  
Suite 500City  
ArlingtonState  
VAZip Code  
22203-1613Purpose of Disbursement  
digital consulting/website

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

FEC Identification Number

C

Amount of Each Disbursement this Period

8421.27

Transaction ID : BC68D9542D2A148BF818

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Anedot, Inc.**Mailing Address 1340 Podras Street  
Suite 1770City  
New OrleansState  
LAZip Code  
70112-5204Purpose of Disbursement  
credit card fees

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

FEC Identification Number

C

Amount of Each Disbursement this Period

71.20

Transaction ID : B1ACE73FFF41146C3A2D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Ascent Media LLC**Mailing Address 1001 Connecticut Avenue  
Suite 206City  
WashingtonState  
DCZip Code  
20036-5531Purpose of Disbursement  
media 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 |   | 0 | 2 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

7500.00

Transaction ID : BB7007B0D3BDC485882B

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

15992.47

**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 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)

**A. Ascent Media LLC**Mailing Address 1001 Connecticut Avenue  
Suite 206City  
WashingtonState  
DCZip Code  
20036-5531Purpose of Disbursement  
media placement

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 | 4 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

7500.00

Transaction ID : BB6334321510F4FC2B39

☐ Memo Item**B. City of Melbourne**

Mailing Address 625 E. Hibiscus Blvd.

City  
MelbourneState  
FLZip Code  
32901-3234Purpose of Disbursement  
event venue

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 | 3 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : BA28B5B1E54FF46128D0

☐ Memo Item**C. City of Melbourne**

Mailing Address 625 E. Hibiscus Blvd.

City  
MelbourneState  
FLZip Code  
32901-3234Purpose of Disbursement  
event venue

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 | 3 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

973.11

Transaction ID : B8D226A0BCF244097854

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

8973.11

**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 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)

**A. Data Targeting, Inc.**

Mailing Address 6211 N.W. 132nd Street

City  
GainesvilleState  
FLZip Code  
32653Purpose of Disbursement  
direct mail services

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

FEC Identification Number

C

Amount of Each Disbursement this Period

7030.00

Transaction ID : B7D96885E160C4736AC6

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Paychex**

Mailing Address 970 Lake Carillon Dr

City  
Saint PetersburgState  
FLZip Code  
33716-1129Purpose of Disbursement  
payroll taxes

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

FEC Identification Number

C

Amount of Each Disbursement this Period

273.75

Transaction ID : BC45D6BC5781B4708A5E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Paychex**

Mailing Address 970 Lake Carillon Dr

City  
Saint PetersburgState  
FLZip Code  
33716-1129Purpose of Disbursement  
payroll administration

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

FEC Identification Number

C

Amount of Each Disbursement this Period

142.95

Transaction ID : B03DFC96FD07A47D1815

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

7446.70

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

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

PAGE 22 OF 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)

**A. Postmaster**

Mailing Address 2305 Minton Road

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 14  |   | 2024    |

City  
MelbourneState  
FLZip Code  
32904-6607

FEC Identification Number

C

Purpose of Disbursement  
postage

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1971.00

Transaction ID : B144633CDFDC14866A16

☐ 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. Right Aim Media, LLC**Mailing Address 4030 Henderson Blvd.  
Suite 351

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 16  |   | 2024    |

City  
TampaState  
FLZip Code  
33629-4940

FEC Identification Number

C

Purpose of Disbursement  
direct mail services

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

24837.74

Transaction ID : BD67B3945DDA640E9BF8

☐ 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. Robert Watkins & Company, P.A.**

Mailing Address 610 S. Boulevard

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 03  |   | 2024    |

City  
TampaState  
FLZip Code  
33606

FEC Identification Number

C

Purpose of Disbursement  
accounting services

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3000.00

Transaction ID : BB9EEBA1FCD0B484BBC8

☐ 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).....▶

29808.74

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

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

PAGE 23 OF 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)

**A. Rock Paper Simple**

Mailing Address 1335 Gateway Drive, #2007

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 11  |   | 2024    |

City  
MelbourneState  
FLZip Code  
32901Purpose of Disbursement  
website services

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

600.00

Transaction ID : BD2FF960B587546AB9C8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Rock Paper Simple**

Mailing Address 1335 Gateway Drive, #2007

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 11  |   | 2024    |

City  
MelbourneState  
FLZip Code  
32901Purpose of Disbursement  
website services

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

600.00

Transaction ID : B94ACFE50768F4CD7B54

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Steigerwald, Amber, , ,**

Mailing Address 440 Nightingale Drive

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 03  |   | 2024    |

City  
IndialanticState  
FLZip Code  
32903-4706Purpose of Disbursement  
fundraising consulting

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

10000.00

Transaction ID : B777956140F9242F68F4

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

11200.00

**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 24 OF 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)

**A. Unger, Thomas, , ,**

Mailing Address 450 Lakeview Drive

City  
Melbourne BeachState  
FLZip Code  
32951-3231Purpose of Disbursement  
mileage

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 | 2 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

576.20

Transaction ID : BA56DF3C39F7C4BF4A3D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Unger, Thomas, , ,**

Mailing Address 450 Lakeview Drive

City  
Melbourne BeachState  
FLZip Code  
32951-3231Purpose of Disbursement  
payroll

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : B2769C49AB42F4979BC3

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Unger, Thomas, , ,**

Mailing Address 450 Lakeview Drive

City  
Melbourne BeachState  
FLZip Code  
32951-3231Purpose of Disbursement  
reimbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

730.82

Transaction ID : B96FA9B137E76455CB80

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

3807.02

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

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

PAGE 25 OF 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)

**A. United States Postal Service**

Mailing Address 504 Ocean Avenue

City  
Melbourne BeachState  
FLZip Code  
32951Purpose of Disbursement  
postage

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 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

365.00

Transaction ID : B9EE9D13BA68246C7BF2

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Unger, Thomas, , ,**

Mailing Address 450 Lakeview Drive

City  
Melbourne BeachState  
FLZip Code  
32951-3231Purpose of Disbursement  
mileage

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

FEC Identification Number

C

Amount of Each Disbursement this Period

365.82

Transaction ID : B83DC2BBF0B9D4205A52

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd., #530

City  
ArlingtonState  
VAZip Code  
22209-2517Purpose of Disbursement  
processing fees

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

FEC Identification Number

C

Amount of Each Disbursement this Period

132.07

Transaction ID : B606CDA351D8B4D2E8DE

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

132.07

**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 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)

**A. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd., #530

City  
ArlingtonState  
VAZip Code  
22209-2517Purpose of Disbursement  
processing fees

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 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

222.33

Transaction ID : B43BDB2801C644A3387B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd., #530

City  
ArlingtonState  
VAZip Code  
22209-2517Purpose of Disbursement  
processing fees

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 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.82

Transaction ID : B280522ADA40842F89B4

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd., #530

City  
ArlingtonState  
VAZip Code  
22209-2517Purpose of Disbursement  
processing fees

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 | 4 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

8.30

Transaction ID : BD414B59DB66849D6886

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

231.45

**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 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)

**A. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd., #530

City  
ArlingtonState  
VAZip Code  
22209-2517Purpose of Disbursement  
processing fees

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 | 7 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

4.10

Transaction ID : BA9A908F2A4B644C2835

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd., #530

City  
ArlingtonState  
VAZip Code  
22209-2517Purpose of Disbursement  
processing fees

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

FEC Identification Number

C

Amount of Each Disbursement this Period

44.96

Transaction ID : B7A7D2218610A45AEAFB

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd., #530

City  
ArlingtonState  
VAZip Code  
22209-2517Purpose of Disbursement  
processing fees

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

FEC Identification Number

C

Amount of Each Disbursement this Period

49.79

Transaction ID : B7C48EAE801D435AAE6

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

98.85

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

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

PAGE 28 OF 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)

**A. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd., #530

City  
ArlingtonState  
VAZip Code  
22209-2517Purpose of Disbursement  
processing fees

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4.17

Transaction ID : B6ABA2874FC7D425DAB4

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. X Strategies LLC**Mailing Address 340 Royal Poinciana Way  
Suite 317-164City  
Palm BeachState  
FLZip Code  
33480-4154Purpose of Disbursement  
social media 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 |   | 0 | 2 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : BEFC8B5C54EA14483864

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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 |
|   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

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

5004.17

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

82694.58

**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 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)

**A.** Rose, Robert, , ,

Mailing Address 11160 S Tropical Trail

City  
MelbourneState  
FLZip Code  
32904Purpose of Disbursement  
Refund: contribution refund-WinRed

010

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

633.29

Transaction ID : B0BDA2B74660246259A9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

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

633.29

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

633.29

**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 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)

**A. Chandler Langevin Campaign**

Mailing Address 899 Tappen Court, N.E.

City  
Palm BayState  
FLZip Code  
32905Purpose of Disbursement  
non-federal contribution

011

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B345A93B177F642C9975

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Josiah Gattle Campaign**

Mailing Address 1060 Matador Drive

City  
RockledgeState  
FLZip Code  
32955Purpose of Disbursement  
non-federal contribution

011

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B94CD9E19A5B5417AB91

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Kean For Congress, Inc.**

Mailing Address PO Box 999

City  
EdisonState  
NJZip Code  
08818-0999Purpose of Disbursement  
contribution

011

Candidate Name

Kean, Thomas, H., Jr.

Category/  
Type

Office Sought:

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

Disbursement For: 2024

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

State: NJ

District: 07

Date of Disbursement

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

FEC Identification Number

C C00703058

Amount of Each Disbursement this Period

1500.00

Transaction ID : B6ADC9323F5CB459681F

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

3500.00

**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 31 OF 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)

**A. Kiggans For Congress**

Mailing Address PO Box 5042

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 07 |   |   | 2024 |   |   |   |

City  
Virginia BeachState  
VAZip Code  
23471-0042

FEC Identification Number

|   |           |
|---|-----------|
| C | C00776120 |
|---|-----------|

Purpose of Disbursement  
contribution

011

Candidate Name

Kiggans, Jennifer, , ,

Category/  
Type

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Transaction ID : BB306788A109E435BA68

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

State: VA

District: 02

Full Name (Last, First, Middle Initial)

**B. Matt Susin Campaign**

Mailing Address 7331 Office Park Place, #300

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 04 |   |   | 2024 |   |   |   |

City  
MelbourneState  
FLZip Code  
32940

FEC Identification Number

|   |  |
|---|--|
| C |  |
|---|--|

Purpose of Disbursement  
non-federal contribution

011

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Transaction ID : BFF6FA7922B64445C918

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Space Coast GOP Club**

Mailing Address 300 Quail Dr

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 03 |   |   | 2024 |   |   |   |

City  
Merritt IslandState  
FLZip Code  
32953-4674

FEC Identification Number

|   |  |
|---|--|
| C |  |
|---|--|

Purpose of Disbursement  
non-federal contribution

011

Candidate Name

Space Coast GOP Club

Category/  
Type

Amount of Each Disbursement this Period

|        |
|--------|
| 500.00 |
|--------|

Transaction ID : B75D2C22586134586943

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

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

2500.00

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

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

PAGE 32 OF 34

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

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NAME OF COMMITTEE (In Full)

Mike Haridopolos for Congress

Full Name (Last, First, Middle Initial)

**A. Theriault for Congress**

Mailing Address PO Box 291

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 07  |   | 2024    |

City  
Fort KentState  
MEZip Code  
04743-0291

FEC Identification Number

|   |           |
|---|-----------|
| C | C00852061 |
|---|-----------|

Purpose of Disbursement  
contribution

011

Candidate Name

Theriault, Austin, Leo, ,

Category/  
Type

Amount of Each Disbursement this Period

|         |
|---------|
| 2000.00 |
|---------|

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID : BB3A216A1D2C443E8906

☐ Memo Item

State: ME

District: 02

Full Name (Last, First, Middle Initial)

**B. Tony Wied For Congress**

Mailing Address P.O. Box 5003

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 04  |   | 2024    |

City  
De PereState  
WIZip Code  
54115

FEC Identification Number

|   |           |
|---|-----------|
| C | C00875518 |
|---|-----------|

Purpose of Disbursement  
contribution

011

Candidate Name

Wied, Tony, , ,

Category/  
Type

Amount of Each Disbursement this Period

|         |
|---------|
| 2000.00 |
|---------|

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID : BB7686B2C7DD5401CBFE

☐ Memo Item

State: WI

District: 08

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

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

City

State

Zip Code

FEC Identification Number

|   |  |
|---|--|
| C |  |
|---|--|

Purpose of Disbursement

Category/  
Type

Candidate Name

Amount of Each Disbursement this Period

|  |
|--|
|  |
|--|

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼☐ Memo Item

State:

District:

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

|         |
|---------|
| 4000.00 |
|---------|

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

|          |
|----------|
| 10000.00 |
|----------|

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 33 OF 34

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Mike Haridopolos for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Ascent Media LLC**

Nature of Debt (Purpose):

media consulting

Mailing Address 1001 Connecticut Avenue  
Suite 206City  
WashingtonState  
DCZip Code  
20036-5531

Outstanding Balance Beginning This Period

7500.00

Transaction ID : DAA36F81F5D9A4578A92

Amount Incurred This Period

0.00

Payment This Period

7500.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Haridopolos, Mike, , ,**

Nature of Debt (Purpose):

unreimbursed expenses

Mailing Address 139 Lansing Island Drive

City  
Indian Harbour BeaState  
FLZip Code  
32937

Outstanding Balance Beginning This Period

282.00

Transaction ID : DB3F782838EEEE49C8807

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

282.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Haridopolos, Mike, , ,**

Nature of Debt (Purpose):

unreimbursed expenses

Mailing Address 139 Lansing Island Drive

City  
Indian Harbour BeaState  
FLZip Code  
32937

Outstanding Balance Beginning This Period

4460.39

Transaction ID : D5C76C1019A2B4D36A94

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4460.39

1) **SUBTOTALS** This Period This Page (optional) .....

4742.39

2) **TOTALS** This Period (last page this line number only) .....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 34 OF 34

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Mike Haridopolos for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Haridopolos, Mike, , ,

Nature of Debt (Purpose):

unreimbursed expenses

Mailing Address 139 Lansing Island Drive

City

Indian Harbour Bea

State

FL

Zip Code

32937

Outstanding Balance Beginning This Period

3412.86

Transaction ID : D18667A53C3604E80805

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3412.86

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Haridopolos, Mike, , ,

Nature of Debt (Purpose):

unreimbursed expenses

Mailing Address 139 Lansing Island Drive

City

Indian Harbour Bea

State

FL

Zip Code

32937

Outstanding Balance Beginning This Period

0.00

Transaction ID : DE82A2EA09ECB430FB0E

Amount Incurred This Period

6124.40

Payment This Period

0.00

Outstanding Balance at Close of This Period

6124.40

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) .....

9537.26

2) **TOTALS** This Period (last page this line number only) .....

14279.65

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

14279.65