



FINANCIAL DISCLOSURE REPORT

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FILER INFORMATION

Name: Rachel Grage
Status: Congressional Candidate
State/District: FL05

FILING INFORMATION

Filing Type: Candidate Report
Filing Year: 2026
Filing Date: 04/29/2026
Period Covered: 01/01/2025– 04/15/2026

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
529 Portfolio [5F] LOCATION: NY	SP	\$50,001 - \$100,000	None		
Fidelity NASDAQ Composite Index (FNCMX) [MF]	JT	\$15,001 - \$50,000	None		
Key Bank Checking Account [BA]	JT	\$15,001 - \$50,000	None		
Life Insurance [WU]	SP	\$250,001 - \$500,000	None		
Primary Residence [RP] LOCATION: Jacksonville Beach/Duval, FL, US	JT	\$1,000,001 - \$5,000,000	None		
T. Rowe Price Global Technology Fd Inc (PRGTX) [MF]	SP	\$100,001 - \$250,000	None		
T. Rowe Price Growth Stock Fd (PRGFX) [MF]	SP	\$100,001 - \$250,000	None		

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
T. Rowe Price Health Sciences Fund Inc. (PRHSX) [MF]	SP	\$100,001 - \$250,000	None		
T. Rowe Price New Horizons Fund (PRNHX) [MF]	SP	\$100,001 - \$250,000	None		
Work Pension [PE]	SP	Undetermined	None		

* For the complete list of asset type abbreviations, please visit <https://fd.house.gov/reference/asset-type-codes.aspx>.

SCHEDULE C: EARNED INCOME

Source	Type	Amount Current Year to Filing	Amount Preceding Year
Mayo Clinic	spouse salary	\$780,000.00	\$750,000.00

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
JT	Pennymac	November 2021	Primary residence	\$1,000,001 - \$5,000,000

SCHEDULE E: POSITIONS

None disclosed.

SCHEDULE F: AGREEMENTS

None disclosed.

SCHEDULE J: COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

None disclosed.

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

Trusts: Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?

Yes No

Exemption: Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?

Yes No

CERTIFICATION AND SIGNATURE

I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.

Digitally Signed: Rachel Grage , 04/29/2026