

**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

KATHY SALVI FOR US SENATE

ADDRESS (number and street)

325 W. WASHINGTON STREET

SUITE 401

WAUKEGAN

IL

60085

☐ Check if different than previously reported. (ACC)

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00807222

3. IS THIS REPORT

☐ NEW (N)

OR

☐ AMENDED (A)

STATE ▼ DISTRICT

IL

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☐ January 31 Year-End Report (YE)

☒ Termination Report (TER)

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

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
01 / 01 / 2023

through

M M / D D / Y Y Y Y
03 / 31 / 2023

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Datwyler, Thomas, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Datwyler, Thomas, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y
04 / 06 / 2023

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 05/2016)

PAGE 2 / 12

Write or Type Committee Name
KATHY SALVI FOR US SENATE

Report Covering the Period:

From:

M M / D D / Y Y Y Y
 01 / 01 / 2023

To:

M M / D D / Y Y Y Y
 03 / 31 / 2023

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	0.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	7890.37	0.00
(b) Total Offsets to Operating Expenditures (from Line 14)	1324.55	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	6565.82	0.00
8. Cash on Hand at Close of Reporting Period (from Line 27)	0.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.05	

For further information contact:

Federal Election Commission
 999 E Street, NW
 Washington, DC 20463

Toll Free 800-424-9530
 Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

PAGE 3 / 12

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

KATHY SALVI FOR US SENATE

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2023

To:

MM / DD / YYYY
03 / 31 / 2023**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

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

(ii) Unitemized

(iii) TOTAL of contributions
from individuals ▶

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACs)

(d) The Candidate

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

13. LOANS:

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

(b) All Other Loans.....

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)15. OTHER RECEIPTS
(Dividends, Interest, etc.)16. **TOTAL RECEIPTS** (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

1324.55

0.00

1324.55

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 05/2016)

of Disbursements

PAGE 4 / 12

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

17. OPERATING EXPENDITURES.....

7890.37

0.00

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES

0.00

0.00

19. LOAN REPAYMENTS:

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

1257.95

0.00

(b) Of All Other Loans

0.00

0.00

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

1257.95

0.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees

0.00

0.00

(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)).....

0.00

0.00

21. OTHER DISBURSEMENTS

0.00

0.00

22. **TOTAL DISBURSEMENTS**

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

9148.32

0.00

III. CASH SUMMARY

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

7823.77

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

1324.55

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

9148.32

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

9148.32

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 12

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

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

NAME OF COMMITTEE (In Full)
KATHY SALVI FOR US SENATE

A. Full Name (Last, First, Middle Initial) Direct Mail Fundraising LLC			Date of Receipt M M / D D / Y Y Y Y Y 03 / 07 / 2023		
Mailing Address 20130 Lakeview Center Suite 300			Transaction ID : SA14.4122		
City Ashburn	State VA	Zip Code 20147	Amount of Each Receipt this Period 1324.55		
FEC ID number of contributing federal political committee. C		Name of Employer Occupation			
Receipt For: 2022 ☐ Primary ☒ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼ 1324.55			
B. Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y Y		
Mailing Address			Amount of Each Receipt this Period		
City	State	Zip Code	Memo Item		
FEC ID number of contributing federal political committee. C		Name of Employer Occupation			
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼			
C. Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y Y		
Mailing Address			Amount of Each Receipt this Period		
City	State	Zip Code	Memo Item		
FEC ID number of contributing federal political committee. C		Name of Employer Occupation			
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼			
SUBTOTAL of Receipts This Page (optional)..... ▶			1324.55		
TOTAL This Period (last page this line number only)..... ▶			1324.55		

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

PAGE 6 OF 12

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

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NAME OF COMMITTEE (In Full)

KATHY SALVI FOR US SENATE

Full Name (Last, First, Middle Initial)

A. 9Seven Consulting

Mailing Address PO Box 183

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2023

City
HudsonState
WIZip Code
54016

FEC Identification Number

C C00807222

Purpose of Disbursement
Compliance Consulting

001

Amount of Each Disbursement this Period

2129.90

Transaction ID : SB17.4124

☐ Memo Item

Candidate Name

KATHY SALVI FOR US SENATE

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 00

Full Name (Last, First, Middle Initial)

B. 9Seven Consulting

Mailing Address PO Box 183

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		14		2023

City
HudsonState
WIZip Code
54016

FEC Identification Number

C C00807222

Purpose of Disbursement
Compliance Consulting

001

Amount of Each Disbursement this Period

2050.00

Transaction ID : SB17.4121

☐ Memo Item

Candidate Name

KATHY SALVI FOR US SENATE

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 00

Full Name (Last, First, Middle Initial)

C. 9Seven Consulting

Mailing Address PO Box 183

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		15		2023

City
HudsonState
WIZip Code
54016

FEC Identification Number

C C00807222

Purpose of Disbursement
Compliance Consulting

001

Amount of Each Disbursement this Period

150.00

Transaction ID : SB17.4119

☐ Memo Item

Candidate Name

KATHY SALVI FOR US SENATE

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 00

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

4329.90

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 Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 12

☒ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

KATHY SALVI FOR US SENATE

Full Name (Last, First, Middle Initial)

A. 9Seven Consulting

Mailing Address PO Box 183

City
Hudson

State
WI

Zip Code
54016

Purpose of Disbursement
Compliance Consulting

001

Candidate Name

KATHY SALVI FOR US SENATE

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 00

Date of Disbursement

M M / D D / Y Y Y Y
03 / 28 / 2023

FEC Identification Number

C C00807222

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.4147

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Lambert, Marilyn, , ,

Mailing Address 499 South Capital St SW

City
Washington

State
DC

Zip Code
20004

Purpose of Disbursement
Consulting

001

Candidate Name

KATHY SALVI FOR US SENATE

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 00

Date of Disbursement

M M / D D / Y Y Y Y
01 / 30 / 2023

FEC Identification Number

C C00807222

Amount of Each Disbursement this Period

320.21

Transaction ID : SB17.4128

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARY MILLER FOR CONGRESS

Mailing Address 3710 BROADWAY STREET
BOX 102

City
QUINCY

State
IL

Zip Code
62305

Purpose of Disbursement
Political Contribution

011

Candidate Name

MILLER, MARY, , ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 15

Date of Disbursement

M M / D D / Y Y Y Y
03 / 28 / 2023

FEC Identification Number

C C00723916

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.4137

☐ Memo Item

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

1820.21

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

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

PAGE 8 OF 12

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

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NAME OF COMMITTEE (In Full)

KATHY SALVI FOR US SENATE

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 911 Panorama Trail South

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2023

City
RochesterState
NYZip Code
14625Purpose of Disbursement
Payroll Fees

001

FEC Identification Number

C C00807222

Amount of Each Disbursement this Period

326.50

Transaction ID : SB17.4146

☐ Memo Item

Candidate Name

KATHY SALVI FOR US SENATE

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: IL

District: 00

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 911 Panorama Trail South

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		17		2023

City
RochesterState
NYZip Code
14625Purpose of Disbursement
Payroll Taxes

001

FEC Identification Number

C

Amount of Each Disbursement this Period

110.32

Transaction ID : SB17.4130

☐ Memo Item

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 911 Panorama Trail South

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		15		2023

City
RochesterState
NYZip Code
14625Purpose of Disbursement
Payroll Fees

001

FEC Identification Number

C C00807222

Amount of Each Disbursement this Period

208.00

Transaction ID : SB17.4145

☐ Memo Item

Candidate Name

KATHY SALVI FOR US SENATE

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: IL

District: 00

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

644.82

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

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

PAGE 9 OF 12

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

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NAME OF COMMITTEE (In Full)

KATHY SALVI FOR US SENATE

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 911 Panorama Trail South

City
RochesterState
NYZip Code
14625Purpose of Disbursement
Payroll Fees

001

Candidate Name

KATHY SALVI FOR US SENATE

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: IL

District: 00

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		21		2023

FEC Identification Number

C C00807222

Amount of Each Disbursement this Period

534.50

Transaction ID : SB17.4152

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 911 Panorama Trail South

City
RochesterState
NYZip Code
14625Purpose of Disbursement
Payroll Fees

001

Candidate Name

KATHY SALVI FOR US SENATE

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: IL

District: 00

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		15		2023

FEC Identification Number

C C00807222

Amount of Each Disbursement this Period

240.00

Transaction ID : SB17.4144

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

774.50

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

7569.43

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

PAGE 10 OF 12

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

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NAME OF COMMITTEE (In Full)

KATHY SALVI FOR US SENATE

Full Name (Last, First, Middle Initial)

A. SALVI, KATHY RAYE, , ,Mailing Address 325 W. WASHINGTON STREET
SUITE 401City
WAUKEGANState
ILZip Code
60085Purpose of Disbursement
Loan Repayment

009

Candidate Name

KATHY SALVI FOR US SENATE

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: IL

District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	3

FEC Identification Number

C C00807222

Amount of Each Disbursement this Period

1257.95

Transaction ID : SB19A.4139

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

1257.95

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

1257.95

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

PAGE 11 OF 12

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4101

KATHY SALVI FOR US SENATE

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

SALVI, KATHY RAYE, , ,

Election: 2022

☐ Primary☒ General☐ Other (specify) ▼Mailing Address
325 W. WASHINGTON STREET
SUITE 401

City

State

ZIP Code

WAUKEGAN

IL

60085

☒ Personal Funds of the Candidate

Original Amount of Loan

480000.00

Cumulative Payment To Date

76257.95

Balance Outstanding at Close of This Period

0.05

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 12^MD 31^D

Y 2022 Y

M M

D D

Y 12/31/2022 Y

0.00

% (apr)

☒ Yes ☐ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

0.05

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

0.05

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

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SC/10

Transaction ID : SC/10.4101

(Current loan amount of 80000.00 from a balance of 80000.00 has been forgiven)(A previous settlement amount of 80000.00 has been rescinded)(Current loan amount of 80000.00 from a balance of 80000.00 has been forgiven)(Current loan amount of 403.00 from a balance of 403742.05 has been forgiven)

Form/Schedule:

Transaction ID: