

# 48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

|                                                                                                                                                                             |  |                               |                                                             |                                                                                                                |                                                  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------|-------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|--------------------------------------------------|--|
| <b>1. NAME OF COMMITTEE IN FULL</b><br>Lauren Underwood For Congress                                                                                                        |  |                               |                                                             |                                                                                                                |                                                  |  |
| <b>ADDRESS</b> (number and street) 13400 S Route 59<br>Ste 116 Box 248                                                                                                      |  |                               |                                                             |                                                                                                                |                                                  |  |
| <b>CITY</b><br>Plainfield                                                                                                                                                   |  | <b>STATE</b><br>IL            |                                                             | <b>ZIP CODE</b><br>60585                                                                                       |                                                  |  |
| <b>2. NAME OF CANDIDATE</b><br>Underwood, Lauren, , ,                                                                                                                       |  |                               | <b>3. OFFICE SOUGHT</b> (State and District)<br>House IL 14 |                                                                                                                | <b>4. FEC IDENTIFICATION NUMBER</b><br>C00652719 |  |
| <b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____ |  |                               |                                                             |                                                                                                                |                                                  |  |
| <b>A. FULL NAME</b><br>Kopchak, Barbara, C., ,<br><b>MAILING ADDRESS</b><br>2556 Brockton Cir<br><b>CITY</b><br>Naperville                                                  |  |                               |                                                             | <b>Name of Employer</b><br>Amita<br><b>Transaction ID : 8674427</b><br><b>Occupation</b><br>Nurse Practitioner |                                                  |  |
| <b>STATE</b><br>IL                                                                                                                                                          |  | <b>ZIP CODE</b><br>60565-3194 |                                                             | <b>Date (month, day, year)</b><br>03/08/2026                                                                   | <b>Amount</b><br>1300.00                         |  |
| <b>B. FULL NAME</b><br>Pritzker, Penny, S., ,<br><b>MAILING ADDRESS</b><br>444 W Lake St<br>Ste 2400<br><b>CITY</b><br>Chicago                                              |  |                               |                                                             | <b>Name of Employer</b><br>PSP Partners<br><b>Transaction ID : 8674911</b><br><b>Occupation</b><br>Chairman    |                                                  |  |
| <b>STATE</b><br>IL                                                                                                                                                          |  | <b>ZIP CODE</b><br>60606-0090 |                                                             | <b>Date (month, day, year)</b><br>03/08/2026                                                                   | <b>Amount</b><br>3500.00                         |  |
| <b>C. FULL NAME</b><br>Pritzker, Penny, S., ,<br><b>MAILING ADDRESS</b><br>444 W Lake St<br>Ste 2400<br><b>CITY</b><br>Chicago                                              |  |                               |                                                             | <b>Name of Employer</b><br>PSP Partners<br><b>Transaction ID : 8674912</b><br><b>Occupation</b><br>Chairman    |                                                  |  |
| <b>STATE</b><br>IL                                                                                                                                                          |  | <b>ZIP CODE</b><br>60606-0090 |                                                             | <b>Date (month, day, year)</b><br>03/08/2026                                                                   | <b>Amount</b><br>3500.00                         |  |
| <b>D. FULL NAME</b><br><br><b>MAILING ADDRESS</b><br><br><b>CITY</b><br><br><b>STATE</b><br><br><b>ZIP CODE</b><br><br><b>CITY</b><br><br>                                  |  |                               |                                                             | <b>Name of Employer</b><br><br><br><b>Occupation</b><br><br>                                                   |                                                  |  |
| <b>E. FULL NAME</b><br><br><b>MAILING ADDRESS</b><br><br><b>CITY</b><br><br><b>STATE</b><br><br><b>ZIP CODE</b><br><br><b>CITY</b><br><br>                                  |  |                               |                                                             | <b>Name of Employer</b><br><br><br><b>Occupation</b><br><br>                                                   |                                                  |  |
| <b>SIGNATURE (optional)</b><br>Nissen, Melissa, , ,                                                                                                                         |  |                               |                                                             | <b>DATE</b><br>03/10/2026                                                                                      |                                                  |  |
| For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov                                                                       |  |                               |                                                             |                                                                                                                |                                                  |  |

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Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

**FEC FORM 6**  
(Revised 03/2016)