

**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

LOYD FOR CONGRESS

ADDRESS (number and street)

331 N CHURCH ST

Check if different  
than previously  
reported. (ACC)

VIRDEN

IL

62690

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

C00834960

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

IL

13

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

D D / Y Y Y Y

01

Y Y Y Y

2025

through

M M / D D / Y Y Y Y

03

D D / Y Y Y Y

31

Y Y Y Y

2025

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

Type or Print Name of Treasurer LOYD, JOSHUA, , ,

Signature of Treasurer

LOYD, JOSHUA, , ,

Date

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

15

Y Y Y Y

2025

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

LOYD FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY  
01 / 01 / 2025

To:

MM / DD / YYYY  
03 / 31 / 2025

|                                                                                                                  | 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)) ....                                             | 4563.20                 | 5568.20                            |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....                                                        | 0.00                    | 0.00                               |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 4563.20                 | 5568.20                            |
| 7. Net Operating Expenditures                                                                                    |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....                                                         | 1700.39                 | 1788.09                            |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14) .....                                              | 0.00                    | 0.00                               |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 1700.39                 | 1788.09                            |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27) .....                                             | 3232.19                 |                                    |
| 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) ..... | 0.00                    |                                    |

For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov).

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

LOYD FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY  
01 / 01 / 2025

To:

MM / DD / YYYY  
03 / 31 / 2025**I. RECEIPTS****COLUMN A**  
Total This Period**COLUMN B**  
Election Cycle-to-Date

## 11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than  
Political Committees

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

4050.00

5050.00

(ii) Unitemized .....

513.20

518.20

(iii) TOTAL of contributions  
from individuals ▶

4563.20

5568.20

(b) Political Party Committees.....

0.00

0.00

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

0.00

0.00

(d) The Candidate .....

0.00

0.00

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

4563.20

5568.20

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

0.00

0.00

## 13. LOANS:

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS  
(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING  
EXPENDITURES  
(Refunds, Rebates, etc.) .....

0.00

0.00

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)..... ▶

4563.20

5568.20

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

| II. DISBURSEMENTS                                                            | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....                                              | 1700.39                       | 1788.09                            |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:                                                         |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....                                                 | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:                                             |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 0.00                               |
| (b) Political Party Committees.....                                          | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs) .....                       | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 0.00                               |
| 21. OTHER DISBURSEMENTS .....                                                | 0.00                          | 0.00                               |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 1700.39                       | 1788.09                            |

## **III. CASH SUMMARY**

|                                                                                       |         |
|---------------------------------------------------------------------------------------|---------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 369.38  |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 4563.20 |
| 25. SUBTOTAL (add Line 23 and Line 24).....                                           | 4932.58 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 1700.39 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 3232.19 |

# **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 7

☒ 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)

**LOYD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Brown, Cindy, , ,

**A.**

Mailing Address 3707 Cottage Reserve Rd NE

City  
Solon

State  
IA

Zip Code  
52333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 05 2025

Transaction ID : SA11AI.4126

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Cleaver, Laird, , ,

**B.**

Mailing Address 730 Reef Rd

City  
Vero Beach

State  
FL

Zip Code  
32963

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 05 2025

Transaction ID : SA11AI.4134

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Yoder, Merv, , ,

**C.**

Mailing Address 403 E County Road 200n

City  
ARCOLA

State  
IL

Zip Code  
61910

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Okaw Valley Woodworking

Occupation  
Carpenter

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 25 2025

Transaction ID : SA11AI.4124

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

4050.00

4050.00

**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 6 OF 7

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

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NAME OF COMMITTEE (In Full)

LOYD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. McShane LLC**

Mailing Address 6950 O'Bannon Dr

City  
Las VegasState  
NVZip Code  
89117Purpose of Disbursement  
Strategic Management 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 |
| 0 | 2 |   | 0 | 7 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

709.68

Transaction ID : SB17.4118

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. McShane LLC**

Mailing Address 6950 O'Bannon Dr

City  
Las VegasState  
NVZip Code  
89117Purpose of Disbursement  
Strategic Management 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 |
| 0 | 2 |   | 1 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

153.75

Transaction ID : SB17.4120

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. McShane LLC**

Mailing Address 6950 O'Bannon Dr

City  
Las VegasState  
NVZip Code  
89117Purpose of Disbursement  
Strategic Management 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 |
| 0 | 2 |   | 1 | 2 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.4121

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

1163.43

**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 7 OF 7

|                                               |                             |                              |                              |
|-----------------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

LOYD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. PAC Management Services LLC**Mailing Address 15021 Judicial Dr  
Ste 200-ACity  
FairfaxState  
VAZip Code  
22030Purpose of Disbursement  
Compliance 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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 8 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.4114

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

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

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).....▶

500.00

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

1663.43