

**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

CHRIS ARMSTRONG FOR CONGRESS

ADDRESS (number and street)

811 E WASHINGTON AVE

UNIT 400

MADISON

WI

53703

☐ Check if different
than previously
reported. (ACC)

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00901702

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

WI

07

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

through

M M /

D D /

Y Y Y Y

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

ARMSTRONG, CHRISTOPHER, CAMPBELL, ,

Signature of Treasurer

ARMSTRONG, CHRISTOPHER,
CAMPBELL, ,

Date

M M /

D D /

Y Y Y Y

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

CHRIS ARMSTRONG FOR CONGRESS

Report Covering the Period:

From:

M M / D D / Y Y Y Y
07 01 2025

To:

M M / D D / Y Y Y Y
09 30 2025

	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))	3640.00	10315.00
(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))	3640.00	10315.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	1688.32	5184.73
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	1688.32	5184.73
8. Cash on Hand at Close of Reporting Period (from Line 27)	5130.27	
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)	0.00	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

CHRIS ARMSTRONG FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
07 / 01 / 2025

To:

MM / DD / YYYY
09 / 30 / 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).....**

2200.00

5750.00

(ii) Unitemized

1440.00

4565.00

**(iii) TOTAL of contributions
from individuals**

3640.00

10315.00

(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))..**

3640.00

10315.00

**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).....**

3640.00

10315.00

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.....	1688.32	5184.73
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	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) ►	1688.32	5184.73

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	3178.59
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	3640.00
25. SUBTOTAL (add Line 23 and Line 24).....	6818.59
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1688.32
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	5130.27

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

PAGE 5 OF 9

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

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)

CHRIS ARMSTRONG FOR CONGRESS

Full Name (Last, First, Middle Initial)

Armstrong, Nicholas, , ,

A.

Mailing Address 8500 W Hawthorne Rd

City

Mequon

State

WI

Zip Code

53097

FEC ID number of contributing
federal political committee.

C

Name of Employer

Advocate Aurora Health

Occupation

M.D.

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	2	5

Transaction ID : SA11AI.4266

Amount of Each Receipt this Period

500.00



Memo Item

Full Name (Last, First, Middle Initial)

Armstrong-Dorau, Martha, , ,

B.

Mailing Address 31 Hwy 65

City

Star Prairie

State

WI

Zip Code

54026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Retired

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	2	5

Transaction ID : SA11AI.4264

Amount of Each Receipt this Period

200.00



Memo Item

Full Name (Last, First, Middle Initial)

Armstrong-Dorau, Martha, , ,

C.

Mailing Address 31 Hwy 65

City

Star Prairie

State

WI

Zip Code

54026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Retired

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	5		2	0	2	5

Transaction ID : SA11AI.4265

Amount of Each Receipt this Period

200.00



Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

900.00

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 6 OF 9

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

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NAME OF COMMITTEE (In Full)

CHRIS ARMSTRONG FOR CONGRESS

Full Name (Last, First, Middle Initial)

Fischer, Ed, , ,

A.

Mailing Address W5851 Honey Hill Rd

City

Spooner

State

WI

Zip Code

54801

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

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
09 04 2025

Transaction ID : SA11AI.4290

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Reed Bosworth, Wendy, , ,

B.

Mailing Address 1858 N Prospect Ave
Apt 18K

City

Milwaukee

State

WI

Zip Code

53202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

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
07 04 2025

Transaction ID : SA11AI.4234

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Schottler, Sherrill, , ,

C.

Mailing Address 458 Rice Lake Rd

City

Somerset

State

WI

Zip Code

54025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 28 2025

Transaction ID : SA11AI.4241

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

1100.00

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

PAGE 7 OF 9

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

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NAME OF COMMITTEE (In Full)

CHRIS ARMSTRONG FOR CONGRESS

Full Name (Last, First, Middle Initial)

Schottler, Sherrill, , ,

A.

Mailing Address 458 Rice Lake Rd

City

Somerset

State

WI

Zip Code

54025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	2	5

Transaction ID : SA11AI.4249

Amount of Each Receipt this Period

100.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Schottler, Sherrill, , ,

Mailing Address 458 Rice Lake Rd

City

Somerset

State

WI

Zip Code

54025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	2	5

Transaction ID : SA11AI.4262

Amount of Each Receipt this Period

100.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

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

Amount of Each Receipt this Period

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

200.00

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

2200.00

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 9

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

CHRIS ARMSTRONG FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ActBlue

Mailing Address PO Box 962017

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2025

City
BostonState
MAZip Code
02196

FEC Identification Number

C

Purpose of Disbursement
Convenience Fee

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

53.20

Transaction ID : SB17.4305

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. GRASSROOTS ANALYTICS

Mailing Address 806 7TH ST NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		28		2025

City
WASHINGTONState
DCZip Code
20001

FEC Identification Number

C

Purpose of Disbursement
Call List

003

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

53.80

Transaction ID : SB17.4301

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Johnson Litho Graphics

Mailing Address 2219 Galloway St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		25		2025

City
Eau ClaireState
WIZip Code
54703

FEC Identification Number

C

Purpose of Disbursement
Printing: Posters

006

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

236.32

Transaction ID : SB17.4302

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

343.32

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 9

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

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NAME OF COMMITTEE (In Full)

CHRIS ARMSTRONG FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. RAHMAN, MOHAMMAD, , ,

Mailing Address 1286 7TH ST W

City
SAINT PAULState
MNZip Code
55102Purpose of Disbursement
Consultant Fee

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1275.00

Transaction ID : SB17.4299

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RAHMAN, MOHAMMAD, , ,

Mailing Address 1286 7TH ST W

City
SAINT PAULState
MNZip Code
55102Purpose of Disbursement
PO Box Rental

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

70.00

Transaction ID : SB17.4304

☐ 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).....▶

1345.00

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

1688.32