

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Matt Conroy for Congress

Report Covering the Period: From: / / To: / /

	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))....	<input type="text" value="16792.26"/>	<input type="text" value="16792.26"/>
(b) Total Contribution Refunds (from Line 20(d))	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	<input type="text" value="16792.26"/>	<input type="text" value="16792.26"/>
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	<input type="text" value="14595.50"/>	<input type="text" value="14595.50"/>
(b) Total Offsets to Operating Expenditures (from Line 14).....	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	<input type="text" value="14595.50"/>	<input type="text" value="14595.50"/>
8. Cash on Hand at Close of Reporting Period (from Line 27).....	<input type="text" value="2196.76"/>	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="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

Matt Conroy for Congress

Report Covering the Period: From: / / To: / /

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).....	12750.00	12750.00
(ii) Unitemized.....	4042.26	4042.26
(iii) TOTAL of contributions from individuals ▶	16792.26	16792.26
(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))..	16792.26	16792.26
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)..... ▶	16792.26	16792.26

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.....	14595.50	14595.50
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) ►	14595.50	14595.50

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	16792.26
25. SUBTOTAL (add Line 23 and Line 24).....	16792.26
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	14595.50
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2196.76

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 16
(check only one)
 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)
Matt Conroy for Congress

A. Full Name (Last, First, Middle Initial)
Conroy, Georgette, , ,

Mailing Address 89 Chester Avenue

City: Brooklyn State: NY Zip Code: 11228

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation: n/a

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 3500.00

Date of Receipt: 11 / 12 / 2025

Transaction ID : SA11AI.4134

Amount of Each Receipt this Period: 3500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Conroy, Jamie, , ,

Mailing Address 89 chester ave

City: brooklyn State: NY Zip Code: 11218

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation: n/a

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 1000.00

Date of Receipt: 01 / 24 / 2026

Transaction ID : SA11AI.4203

Amount of Each Receipt this Period: 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Cook, D, , ,

Mailing Address 535 Elm Road

City: Barrington State: IL Zip Code: 60010

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation: n/a

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 300.00

Date of Receipt: 02 / 17 / 2026

Transaction ID : SA11AI.4101

Amount of Each Receipt this Period: 300.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 4800.00

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

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 16	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Matt Conroy for Congress

A. Full Name (Last, First, Middle Initial)
Dolan, Jacob, , ,

Mailing Address 202 W 88th Street 7

City New York	State NY	Zip Code 10024
------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer	Occupation n/a
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Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4153

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
Igasaki, David, , ,

Mailing Address 3232 n halsted street

City chicago	State IL	Zip Code 60657
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FEC ID number of contributing federal political committee.

Name of Employer	Occupation n/a
------------------	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4267

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
Igasaki, David, , ,

Mailing Address 3232 n halsted street

City chicago	State IL	Zip Code 60657
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FEC ID number of contributing federal political committee.

Name of Employer	Occupation n/a
------------------	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4289

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="450.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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 7 OF 16	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Matt Conroy for Congress

A. Full Name (Last, First, Middle Initial)
Kapitan, Rima, , ,

Mailing Address 161 w harrison st unit 502

City chicago	State IL	Zip Code 60605
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FEC ID number of contributing federal political committee.

Name of Employer	Occupation n/a
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Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4295

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
Krumpack, Chris, , ,

Mailing Address 34 w briarwood drive

City streamwood	State IL	Zip Code 60107
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FEC ID number of contributing federal political committee.

Name of Employer	Occupation n/a
------------------	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4238

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
Nykanen, Kim, , ,

Mailing Address 675 Northwestern Drive

City Claremond	State CA	Zip Code 91711
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FEC ID number of contributing federal political committee.

Name of Employer	Occupation n/a
------------------	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4132

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="1250.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value=""/>

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 8 OF 16	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Matt Conroy for Congress

A. Full Name (Last, First, Middle Initial)
Nykanen, Kim, , ,

Mailing Address 675 Northwestern Drive

City Claremond	State CA	Zip Code 91711
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FEC ID number of contributing federal political committee.

Name of Employer	Occupation n/a
------------------	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4176

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
Rand, Evan, , ,

Mailing Address 335 East Ohio Apartment 902

City Chicago	State IL	Zip Code 60612
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FEC ID number of contributing federal political committee.

Name of Employer	Occupation n/a
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Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4143

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
Ryan, Virginia, , ,

Mailing Address 131 riverside drive apt 2 B

City manhattan	State NY	Zip Code 10024
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FEC ID number of contributing federal political committee.

Name of Employer	Occupation n/a
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Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4263

Amount of Each Receipt this Period

Memo Item

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 16
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Matt Conroy for Congress

A. Full Name (Last, First, Middle Initial)
Sholeen, Todd, , ,

Mailing Address 437 Washington st

City barrington State IL Zip Code 60010

FEC ID number of contributing federal political committee. C

Name of Employer Occupation n/a

Receipt For:
 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 / 2026

Transaction ID : SA11AI.4283

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
stanford, David, , ,

Mailing Address 165 n canal #1119

City Chicago State IL Zip Code 60606

FEC ID number of contributing federal political committee. C

Name of Employer Occupation n/a

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 16 / 2026

Transaction ID : SA11AI.4180

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Troeller, Michael, , ,

Mailing Address 24 Chester Ave

City Brooklyn State NY Zip Code 11218

FEC ID number of contributing federal political committee. C

Name of Employer Occupation n/a

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 07 / 2026

Transaction ID : SA11AI.4155

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00

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

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 10 OF 16	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Matt Conroy for Congress

A. Full Name (Last, First, Middle Initial)
Vagenas, Martine, J, ,

Mailing Address 705 e 92nd ave

City marrillville	State IN	Zip Code 46410
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FEC ID number of contributing federal political committee.

Name of Employer	Occupation n/a
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Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4099

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
Valentine, Robert, , ,

Mailing Address 5211 San Joaquin plaza

City newport beach	State CA	Zip Code 92660
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FEC ID number of contributing federal political committee.

Name of Employer	Occupation n/a
------------------	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4166

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
Witzel, Steven, , ,

Mailing Address 164 Bank Street

City New York	State NY	Zip Code 10014
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FEC ID number of contributing federal political committee.

Name of Employer	Occupation n/a
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Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4145

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="3250.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value="12750.00"/>

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 11 OF 16	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Matt Conroy for Congress

Full Name (Last, First, Middle Initial) A. Blue Collar Strategies LLC		Date of Disbursement MM / DD / YYYY 03 / 27 / 2026
Mailing Address 800 Wharf Street unit 83		FEC Identification Number C
City washington	State DC	Zip Code 20024
Purpose of Disbursement		Amount of Each Disbursement this Period 5000.00
Candidate Name		Transaction ID : SB17.4190
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Meta		Date of Disbursement MM / DD / YYYY 03 / 04 / 2026
Mailing Address 1 Meta Way		FEC Identification Number C
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement ads		Amount of Each Disbursement this Period 236.00
Candidate Name		Transaction ID : SB17.4122
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Meta		Date of Disbursement MM / DD / YYYY 03 / 05 / 2026
Mailing Address 1 Meta Way		FEC Identification Number C
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement ads		Amount of Each Disbursement this Period 170.00
Candidate Name		Transaction ID : SB17.4121
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	5406.00
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 12 OF 16			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Matt Conroy for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Meta		M M / D D / Y Y Y Y 03 / 06 / 2026
Mailing Address 1 Meta Way		FEC Identification Number
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement ads		<input type="text" value="C"/>
Candidate Name		Amount of Each Disbursement this Period
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) ▼	<input type="text" value="232.00"/>
State: District:		Transaction ID : SB17.4120
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Meta		M M / D D / Y Y Y Y 03 / 07 / 2026
Mailing Address 1 Meta Way		FEC Identification Number
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement ads		<input type="text" value="C"/>
Candidate Name		Amount of Each Disbursement this Period
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) ▼	<input type="text" value="282.00"/>
State: District:		Transaction ID : SB17.4119
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Meta		M M / D D / Y Y Y Y 03 / 08 / 2026
Mailing Address 1 Meta Way		FEC Identification Number
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement ads		<input type="text" value="C"/>
Candidate Name		Amount of Each Disbursement this Period
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) ▼	<input type="text" value="256.00"/>
State: District:		Transaction ID : SB17.4118
		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	<input type="text" value="770.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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 14 OF 16	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Matt Conroy for Congress

Full Name (Last, First, Middle Initial)

A. Meta

Mailing Address 1 Meta Way

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement ads

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 12 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 624.00

Transaction ID : SB17.4114

Memo Item

Full Name (Last, First, Middle Initial)

B. Meta

Mailing Address 1 Meta Way

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement ads

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 13 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB17.4113

Memo Item

Full Name (Last, First, Middle Initial)

C. Meta

Mailing Address 1 Meta Way

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement ads

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 14 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 1060.00

Transaction ID : SB17.4112

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 2684.00

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 15 OF 16	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Matt Conroy for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Meta		<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2026"/>
Mailing Address 1 Meta Way		FEC Identification Number
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement Ads		<input type="text" value="C"/>
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="text" value="1221.00"/>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID : SB17.4111
State: _____ District: _____		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Meta		<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2026"/>
Mailing Address 1 Meta Way		FEC Identification Number
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement		<input type="text" value="C"/>
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="text" value="578.00"/>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID : SB17.4109
State: _____ District: _____		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Minuteman Press		<input type="text" value="02"/> / <input type="text" value="17"/> / <input type="text" value="2026"/>
Mailing Address 1249 North Clybourn Ave		FEC Identification Number
City Chicago	State IL	Zip Code 60610
Purpose of Disbursement Campaign Signs		<input type="text" value="C"/>
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="text" value="835.00"/>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID : SB17.4106
State: _____ District: _____		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	<input type="text" value="2634.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 16 OF 16			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Matt Conroy for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. Minuteman Press		M M / D D / Y Y Y Y 02 / 25 / 2026	
Mailing Address 1249 North Clybourn Ave		FEC Identification Number	
City Chicago	State IL	Zip Code 60610	C
Purpose of Disbursement Campaign Signs		Category/ Type	Amount of Each Disbursement this Period
Candidate Name			1612.50
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For:	Transaction ID : SB17.4108
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B.		M M / D D / Y Y Y Y	
Mailing Address		FEC Identification Number	
City	State	Zip Code	C
Purpose of Disbursement		Category/ Type	Amount of Each Disbursement this Period
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For:	<input type="checkbox"/> Memo Item
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C.		M M / D D / Y Y Y Y	
Mailing Address		FEC Identification Number	
City	State	Zip Code	C
Purpose of Disbursement		Category/ Type	Amount of Each Disbursement this Period
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For:	<input type="checkbox"/> Memo Item
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	1612.50
TOTAL This Period (last page this line number only).....▶	14563.50