

**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

Wilson For Congress

ADDRESS (number and street)

1603 Beaver Lake Dr

Check if different
than previously
reported. (ACC)

Mahomet

IL

61853

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00898288

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
03 / 17 / 2026in the
State of

IL

(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 / 2026

through

M M / D D / Y Y Y Y
02 / 25 / 2026*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 Kesler, Mark, , ,

Signature of Treasurer

Kesler, Mark, , ,

Date

M M / D D / Y Y Y Y
08 / 20 / 2026

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

Wilson For Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	2	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	2	6

	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))	15948.91	134742.66
(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))	15948.91	134742.66
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	40514.40	210818.92
(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))	40514.40	210818.92
8. Cash on Hand at Close of Reporting Period (from Line 27)	9623.74	
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)	85700.00	

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

Wilson For Congress

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2026

To:

MM / DD / YYYY
02 / 25 / 2026**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).....

12611.48

39601.70

(ii) Unitemized

1334.23

7994.80

(iii) TOTAL of contributions
from individuals ▶

13945.71

47596.50

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

1000.00

1000.00

(d) The Candidate

1003.20

86146.16

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

15948.91

134742.66

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

27200.00

85700.00

(b) All Other Loans.....

0.00

0.00

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

27200.00

85700.00

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)..... ▶

43148.91

220442.66

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.....	40514.40	210818.92
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) ►	40514.40	210818.92

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	6989.23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	43148.91
25. SUBTOTAL (add Line 23 and Line 24).....	50138.14
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	40514.40
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	9623.74

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 36

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

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

Albanese, Dennis, , ,

A. Mailing Address 15 Timberhill

City
SpringfieldState
ILZip Code
62704FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	2	6

Transaction ID : SA11AI.4919

Amount of Each Receipt this Period

260.25

☐ Memo Item
Donation

Full Name (Last, First, Middle Initial)

Ballard, Mark, , ,

B. Mailing Address 2307 Phinney Drive

City
ChampaignState
ILZip Code
61821FEC ID number of contributing
federal political committee.

C

Name of Employer
BankChampaignOccupation
officer

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

670.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	0		2	0	2	6

Transaction ID : SA11AI.4875

Amount of Each Receipt this Period

670.00

☐ Memo Item
In-kind - Event Catering

Full Name (Last, First, Middle Initial)

Bechtel, Scott, , ,

C. Mailing Address 4318 Crossgate Drive

City
ChampaignState
ILZip Code
61822FEC ID number of contributing
federal political committee.

C

Name of Employer
Keller WilliamsOccupation
Realtor

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	0		2	0	2	6

Transaction ID : SA11AI.4914

Amount of Each Receipt this Period

750.00

☐ Memo Item
Donation

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

1680.25

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)

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

Brocks, Tracy, , ,

A.

Mailing Address 3006Crossing Ct

City

Champaign

State

IL

Zip Code

61822

FEC ID number of contributing
federal political committee.

C

Name of Employer

Style and Grace Salon

Occupation

Owner

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 22 2026

Transaction ID : SA11AI.4909

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Donation

Full Name (Last, First, Middle Initial)

Comet, Michael, , ,

B.

Mailing Address 805 Dodds Drive

City

Champaign

State

IL

Zip Code

61820

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pepsi-Cola C-U Bottling Co

Occupation

Principal

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 23 2026

Transaction ID : SA11AI.4910

Amount of Each Receipt this Period

260.25

☐ Memo Item

Donation

Full Name (Last, First, Middle Initial)

Doering, Sharmin, , ,

C.

Mailing Address 871 S MaCarthur Blvd

City

Springfield

State

IL

Zip Code

62704

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
01 31 2026

Transaction ID : SA11AI.4917

Amount of Each Receipt this Period

250.00

☐ Memo Item

Donation

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

2010.25

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

Hughes, George, , ,

A.

Mailing Address 913 Meadow View Ct

City

Savoy

State

IL

Zip Code

61874

FEC ID number of contributing
federal political committee.

C

Name of Employer
Constellation EnergyOccupation
Engineer

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

208.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	6		2	0	2	6

Transaction ID : SA11AI.4881

Amount of Each Receipt this Period

104.10

☐ Memo Item
Donation

Full Name (Last, First, Middle Initial)

Iams, Debra, , ,

B.

Mailing Address 2379 Grinnell Dr

City

Springfield

State

IL

Zip Code

62704

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
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
0	2		0	9		2	0	2	6

Transaction ID : SA11AI.4925

Amount of Each Receipt this Period

250.00

☐ Memo Item
Donation

Full Name (Last, First, Middle Initial)

Kimme, Dennis, , ,

C.

Mailing Address 704 South Mahomet Rd

City

Mahomet

State

IL

Zip Code

61853

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
architech

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

510.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	2	6

Transaction ID : SA11AI.4889

Amount of Each Receipt this Period

260.25

☐ Memo Item
onation

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

614.35

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

King, Stuart, , ,

A.

Mailing Address 12 Cedar Cove Ct

City

Dufuskie Island

State

SC

Zip Code

29915

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 10 2026

Transaction ID : SA11AI.4877

Amount of Each Receipt this Period

500.00

☐ Memo Item
donation

Full Name (Last, First, Middle Initial)

Lash, Rhonda, , ,

B.

Mailing Address 4505 Stonebridge Dr

City

Champaign

State

IL

Zip Code

61822

FEC ID number of contributing
federal political committee.

C

Name of Employer
Home Title Group

Occupation
Escrow officer

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

780.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 12 2026

Transaction ID : SA11AI.4884

Amount of Each Receipt this Period

780.76

☐ Memo Item
Donation

Full Name (Last, First, Middle Initial)

Meyer, Eric, , ,

C.

Mailing Address 1704 Sandcherry Dr

City

Champaign

State

IL

Zip Code

61822

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kamsky Associates

Occupation
President

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 30 2026

Transaction ID : SA11AI.4912

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Donation

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

2280.76

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

Rector, Cathy, , ,

A.

Mailing Address 4302 Summer Field Road

City

Champaign

State

IL

Zip Code

61822

FEC ID number of contributing
federal political committee.

C

Name of Employer

Real Estate/Health Care

Occupation

Management

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 30 2026

Transaction ID : SA11AI.4868

Amount of Each Receipt this Period

350.00

☐ Memo Item

In-kind - Event Catering

Full Name (Last, First, Middle Initial)

Rector, Jon, , ,

B.

Mailing Address 4302 Summer Field Road

City

Champaign

State

IL

Zip Code

61822

FEC ID number of contributing
federal political committee.

C

Name of Employer

self employed

Occupation

insurance

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 30 2026

Transaction ID : SA11AI.4871

Amount of Each Receipt this Period

350.00

☐ Memo Item

In-kind - Event Catering

Full Name (Last, First, Middle Initial)

Reichard, Scott, , ,

C.

Mailing Address 2835 East Stone Creek Blvd

City

Urbana

State

IL

Zip Code

61802

FEC ID number of contributing
federal political committee.

C

Name of Employer

self employed

Occupation

business owner

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 04 2026

Transaction ID : SA11AI.4887

Amount of Each Receipt this Period

200.00

☐ Memo Item

Donation

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

900.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

Reichard, Scott, , ,

A.

Mailing Address 2835 East Stone Creek Blvd

City

Urbana

State

IL

Zip Code

61802

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employed

Occupation
business owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 04 2026

Transaction ID : SA11AI.4888

Amount of Each Receipt this Period

200.00

☐ Memo Item
Donation

Full Name (Last, First, Middle Initial)

Roadcap, Janet, , ,

B.

Mailing Address 1013 W Clark St

City

Champaign

State

IL

Zip Code

61821

FEC ID number of contributing
federal political committee.

C

Name of Employer
UIUC

Occupation
Pharmacist

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

204.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 11 2026

Transaction ID : SA11AI.5471

Amount of Each Receipt this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

Rodgers, Barbara, , ,

C.

Mailing Address 2003 Hagan Blvd

City

Urbana

State

IL

Zip Code

61801

FEC ID number of contributing
federal political committee.

C

Name of Employer
Harrington Law Office

Occupation
Bookkeeper

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

660.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 01 2026

Transaction ID : SA11AI.4921

Amount of Each Receipt this Period

260.25

☐ Memo Item
Donation

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

564.35

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

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

PAGE 11 OF 36

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

Silverman, Helaine, , ,

A.

Mailing Address 407 W University Ave

City

Champaign

State

IL

Zip Code

61822

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 ▼

854.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 30 2026

Transaction ID : SA11AI.4885

Amount of Each Receipt this Period

750.00



Memo Item

Donation

Full Name (Last, First, Middle Initial)

Slade, Robert, , ,

B.

Mailing Address 2110 Gunn Drive

City

Champaign

State

IL

Zip Code

61821

FEC ID number of contributing
federal political committee.

C

Name of Employer

University Of Illinois

Occupation

Supervisor of Catering Events

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
02 08 2026

Transaction ID : SA11AI.5474

Amount of Each Receipt this Period

250.00



Memo Item

Full Name (Last, First, Middle Initial)

Stubblefield, Dennis, , ,

C.

Mailing Address 608 W Champaign

City

Rantoul

State

IL

Zip Code

61866

FEC ID number of contributing
federal political committee.

C

Name of Employer

Acre Hills Vetinary

Occupation

Owner

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 01 2026

Transaction ID : SA11AI.4920

Amount of Each Receipt this Period

1500.00



Memo Item

Donation

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

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

2500.00

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

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

Tarrant, Steve, , ,

A.

Mailing Address 601 Lake Falls Blvd

City

Savoy

State

IL

Zip Code

61874

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Farm

Occupation
Manager

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2602.54

Date of Receipt

M M / D D / Y Y Y Y Y
01 26 2026

Transaction ID : SA11AI.4882

Amount of Each Receipt this Period

1561.52

☐ Memo Item
Donation

Full Name (Last, First, Middle Initial)

Webb, Ross, , ,

B.

Mailing Address 12 Rock Garden Ct

City

Bloomington

State

IL

Zip Code

61704

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 06 2026

Transaction ID : SA11AI.5477

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

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 Y

Amount of Each Receipt this Period

☐ Memo Item

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

2061.52

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

12611.48

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)

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

Regan for Illinois

A.

Mailing Address PO Box 922

City

Decatur

State

IL

Zip Code

62525

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 26 2026

Transaction ID : SA11C.5045

Amount of Each Receipt this Period

1000.00

☐ Memo Item

campaign committee donation / permissible funds

Full Name (Last, First, Middle Initial)

B.

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 Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

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 Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

1000.00

1000.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

Wilson, Jeff, , ,

A. Mailing Address 1603 Beaver Lake Dr

City

Mahomet

State

IL

Zip Code

61853

FEC ID number of contributing
federal political committee.

C H6IL13154

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

111146.16

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 25 2026

Transaction ID : SA11D.5505

Amount of Each Receipt this Period

1003.20

☐ Memo Item
Donation

Full Name (Last, First, Middle Initial)

B. 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 Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. 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 Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

1003.20

1003.20

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

Use separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

Wilson, Jeff, , ,

A.

Mailing Address 1603 Beaver Lake Dr

City

Mahomet

State

IL

Zip Code

61853

FEC ID number of contributing
federal political committee.

C H6IL13154

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

110142.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 06 / 2026

Transaction ID : SA13A.5042

Amount of Each Receipt this Period

17000.00

☐ Memo Item
loan to campaign

Full Name (Last, First, Middle Initial)

Wilson, Jeff, , ,

B.

Mailing Address 1603 Beaver Lake Dr

City

Mahomet

State

IL

Zip Code

61853

FEC ID number of contributing
federal political committee.

C H6IL13154

Name of Employer

retired

Occupation

engineer

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

60700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 11 / 2026

Transaction ID : SA13A.5043

Amount of Each Receipt this Period

10200.00

☐ Memo Item
loan to campaign

Full Name (Last, First, Middle Initial)

C.

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 Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

27200.00

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

27200.00

SCHEDULE B (FEC Form 3)
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for each category of the
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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

A. 316 Strategies, LLC

Mailing Address 12506 Crestwood Ct

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		15		2026

City
MontgomeryState
TXZip Code
77356Purpose of Disbursement
Campaign Management

001

Candidate Name
Wilson For CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 13

FEC Identification Number

C C00898288

Amount of Each Disbursement this Period

13000.00

Transaction ID : SB17.4944

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. 316 Strategies, LLC

Mailing Address 12506 Crestwood Ct

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2026

City
MontgomeryState
TXZip Code
77356Purpose of Disbursement
t-shirts

004

Candidate Name
Wilson For CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 13

FEC Identification Number

C C00898288

Amount of Each Disbursement this Period

1250.00

Transaction ID : SB17.4945

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. 316 Strategies, LLC

Mailing Address 12506 Crestwood Ct

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2026

City
MontgomeryState
TXZip Code
77356Purpose of Disbursement
Campaign management

001

Candidate Name
Wilson For CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 13

FEC Identification Number

C C00898288

Amount of Each Disbursement this Period

1031.27

Transaction ID : SB17.4946

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

15281.27

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

A. 316 Strategies, LLC

Mailing Address 12506 Crestwood Ct

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	3		2	0	2	6

City
MontgomeryState
TXZip Code
77356

FEC Identification Number

C	C00898288
---	-----------

Purpose of Disbursement
Fundraising event

006

Amount of Each Disbursement this Period

370.27

Transaction ID : SB17.5017

☐ Memo ItemCandidate Name
Wilson For CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 13

Full Name (Last, First, Middle Initial)

B. 316 Strategies, LLC

Mailing Address 12506 Crestwood Ct

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	7		2	0	2	6

City
MontgomeryState
TXZip Code
77356

FEC Identification Number

C	
---	--

Purpose of Disbursement
Campaign managementCategory/
Type

Amount of Each Disbursement this Period

13000.00

Transaction ID : SB17.5485

☐ Memo Item

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Abate of Illinois

Mailing Address PO Box 2077

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	2	6

City
DecaturState
ILZip Code
62524

FEC Identification Number

C	C00898288
---	-----------

Purpose of Disbursement
Advertising

004

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.4962

☐ Memo ItemCandidate Name
Wilson For CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 13

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

13620.27

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:
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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

A. Amazon

Mailing Address 5 Manhattan West

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		09		2026

City
New YorkState
NYZip Code
10001

FEC Identification Number

C

Purpose of Disbursement
office supplies

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

30.29

Transaction ID : SB17.5480

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Amazon

Mailing Address 5 Manhattan West

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		21		2026

City
New YorkState
NYZip Code
10001

FEC Identification Number

C C00898288

Purpose of Disbursement
advertising

Candidate Name

Wilson For Congress

Category/
Type

Amount of Each Disbursement this Period

52.65

Transaction ID : SB17.5072

☐ Memo Item

Office Sought:

☒	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State: IL

District: 13

Full Name (Last, First, Middle Initial)

C. Ballard, Mark, , ,

Mailing Address 2307 Phinney Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		30		2026

City
ChampaignState
ILZip Code
61821

FEC Identification Number

C

Purpose of Disbursement
In-kind - Event Catering

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

670.00

Transaction ID : SB17.4876

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

752.94

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

A. Bella Malano

Mailing Address 455 Regency Park

City
OFallonState
ILZip Code
62269Purpose of Disbursement
dinner for supporters

007

Candidate Name
Wilson For CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	2	6

FEC Identification Number

C C00898288

Amount of Each Disbursement this Period

208.72

Transaction ID : SB17.5012

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Go Big Media, LLC

Mailing Address 44 Canal Center Plaza

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Website

004

Candidate Name
Wilson For CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	2	6

FEC Identification Number

C C00898288

Amount of Each Disbursement this Period

350.00

Transaction ID : SB17.4931

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Go Big Media, LLC

Mailing Address 44 Canal Center Plaza

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Website

004

Candidate Name
Wilson For CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	2		2	0	2	6

FEC Identification Number

C C00898288

Amount of Each Disbursement this Period

350.00

Transaction ID : SB17.5010

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

908.72

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

SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

A. Go Big Media, LLC

Mailing Address 44 Canal Center Plaza

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	2	6

City
AlexandriaState
VAZip Code
22314

FEC Identification Number

C

Purpose of Disbursement
Advertising

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

550.00

Transaction ID : SB17.5488

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Go Daddy

Mailing Address 2155 E Go Daddy Way

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	1		2	0	2	6

City
TempeState
AZZip Code
85284

FEC Identification Number

C C00898288

Purpose of Disbursement
Web Domain

Candidate Name

Wilson For Congress

Category/
Type
004

Amount of Each Disbursement this Period

119.88

Transaction ID : SB17.5065

☐ Memo Item

Office Sought:

☒	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State: IL

District: 13

Full Name (Last, First, Middle Initial)

C. Go Daddy

Mailing Address 2155 E Go Daddy Way

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	2		2	0	2	6

City
TempeState
AZZip Code
85284

FEC Identification Number

C C00898288

Purpose of Disbursement
Web Domain

Candidate Name

Wilson For Congress

Category/
Type
004

Amount of Each Disbursement this Period

38.18

Transaction ID : SB17.5066

☐ Memo Item

Office Sought:

☒	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State: IL

District: 13

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

708.06

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:
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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

A. Gun News

Mailing Address PO Box 123

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2026

City
SavoyState
ILZip Code
61874

FEC Identification Number

C	C00898288
---	-----------

Purpose of Disbursement
Advertising

004

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.4963

☐ Memo ItemCandidate Name
Wilson For CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 13

Full Name (Last, First, Middle Initial)

B. Hilton

Mailing Address 3100 S Dirksen Pkwy

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2026

City
SpringfieldState
ILZip Code
62701

FEC Identification Number

C	C00898288
---	-----------

Purpose of Disbursement
hotel

002

Amount of Each Disbursement this Period

243.23

Transaction ID : SB17.5014

☐ Memo ItemCandidate Name
Wilson For CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 13

Full Name (Last, First, Middle Initial)

C. Holiday Inn

Mailing Address 2011 Formosa Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2026

City
TroyState
ILZip Code
62294

FEC Identification Number

C	C00898288
---	-----------

Purpose of Disbursement
Chamber Meeting

007

Amount of Each Disbursement this Period

79.35

Transaction ID : SB17.4938

☐ Memo ItemCandidate Name
Wilson For CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 13

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

622.58

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

A. Holiday Inn

Mailing Address 2011 Formosa Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		29		2026

City
TroyState
ILZip Code
62294

FEC Identification Number

C C00898288

Purpose of Disbursement
Town Hall meeting

007

Amount of Each Disbursement this Period

79.35

Transaction ID : SB17.4947

☐ Memo ItemCandidate Name
Wilson For CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 13

Full Name (Last, First, Middle Initial)

B. Holiday Inn

Mailing Address 2011 Formosa Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2026

City
TroyState
ILZip Code
62294

FEC Identification Number

C C00898288

Purpose of Disbursement
hotel

002

Amount of Each Disbursement this Period

79.35

Transaction ID : SB17.5013

☐ Memo ItemCandidate Name
Wilson For CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 13

Full Name (Last, First, Middle Initial)

C. Holiday Inn

Mailing Address 2011 Formosa Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		06		2026

City
TroyState
ILZip Code
62294

FEC Identification Number

C C00898288

Purpose of Disbursement
hotel

002

Amount of Each Disbursement this Period

79.35

Transaction ID : SB17.5023

☐ Memo ItemCandidate Name
Wilson For CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 13

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

238.05

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)

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

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

A. Holiday Inn

Mailing Address 2011 Formosa Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		18		2026

City

Troy

State

IL

Zip Code

62294

FEC Identification Number

C

Purpose of Disbursement

Meeting

Category/
Type

Amount of Each Disbursement this Period

79.35

Transaction ID : SB17.5490

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Holiday Inn

Mailing Address 2011 Formosa Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2026

City

Troy

State

IL

Zip Code

62294

FEC Identification Number

C C00898288

Purpose of Disbursement

meeting

007
Category/
Type

Amount of Each Disbursement this Period

238.05

Transaction ID : SB17.5063

☐ Memo Item

Office Sought:

☒	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State: IL

District: 13

Full Name (Last, First, Middle Initial)

C. Menards

Mailing Address 620 W Town Center Blvd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		09		2026

City

Champaign

State

IL

Zip Code

61820

FEC Identification Number

C C00898288

Purpose of Disbursement

signs

004
Category/
Type

Amount of Each Disbursement this Period

98.19

Transaction ID : SB17.5036

☐ Memo Item

Office Sought:

☒	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State: IL

District: 13

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

415.59

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

A. Numinar Analysis

Mailing Address One Parkway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		07		2026

City
ArlingtonState
VAZip Code
22201

FEC Identification Number

C	C00898288
---	-----------

Purpose of Disbursement
software

006

Category/
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.4965

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 13

Full Name (Last, First, Middle Initial)

B. Numinar Analysis

Mailing Address One Parkway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		06		2026

City
ArlingtonState
VAZip Code
22201

FEC Identification Number

C	C00898288
---	-----------

Purpose of Disbursement
software

004

Category/
Type

Amount of Each Disbursement this Period

15.25

Transaction ID : SB17.5022

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 13

Full Name (Last, First, Middle Initial)

C. Numinar Analysis

Mailing Address One Parkway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		07		2026

City
ArlingtonState
VAZip Code
22201

FEC Identification Number

C	C00898288
---	-----------

Purpose of Disbursement
software

001

Category/
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.5018

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 13

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

1015.25

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

A. Numinar Analysis

Mailing Address One Parkway

City
ArlingtonState
VAZip Code
22201Purpose of Disbursement
Canvassing Software

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
0	2		0	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

2992.90

Transaction ID : SB17.5483

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Panera

Mailing Address 1765 W Kirby Ave

City
ChampaignState
ILZip Code
61821Purpose of Disbursement
Meal

Candidate Name

Wilson For Congress

Office Sought:

☒	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State: IL

District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	6		2	0	2	6

FEC Identification Number

C C00898288

Amount of Each Disbursement this Period

29.60

Transaction ID : SB17.5015

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Rector, Cathy, , ,

Mailing Address 4302 Summer Field Road

City
ChampaignState
ILZip Code
61822Purpose of Disbursement
In-kind - Event Catering

Candidate Name

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	1		3	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

350.00

Transaction ID : SB17.4869

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

3372.50

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:
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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

A. Rector, Jon, , ,

Mailing Address 4302 Summer Field Road

City
ChampaignState
ILZip Code
61822Purpose of Disbursement
In-kind - Event Catering

Candidate Name

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	1		3	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

350.00

Transaction ID : SB17.4872

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. St. Clair GOP

Mailing Address 4510 N Illinois St

City
BellevilleState
ILZip Code
62220Purpose of Disbursement
parking

Candidate Name

Wilson For Congress

Office Sought:

☒	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State: IL

District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	2	6

FEC Identification Number

C C00898288

Amount of Each Disbursement this Period

1.00

Transaction ID : SB17.5067

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. St. Clair GOP

Mailing Address 4510 N Illinois St

City
BellevilleState
ILZip Code
62220Purpose of Disbursement
Event Sponsorship

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
0	2		2	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

600.00

Transaction ID : SB17.5489

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

951.00

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)

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

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address 2005 North Prospect Ave

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	6		2	0	2	6

City
ChampaignState
ILZip Code
61820

FEC Identification Number

C	C00898288
---	-----------

Purpose of Disbursement
officesupplies

006

Amount of Each Disbursement this Period

197.69

Candidate Name
Wilson For CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID : SB17.4937

☐ Memo Item

State: IL District: 13

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 304 E Main St

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	1		2	0	2	6

City
MahometState
ILZip Code
61853

FEC Identification Number

C	C00898288
---	-----------

Purpose of Disbursement
stamps

004

Amount of Each Disbursement this Period

78.00

Candidate Name
Wilson For CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID : SB17.5016

☐ Memo Item

State: IL District: 13

Full Name (Last, First, Middle Initial)

C. Walmart

Mailing Address 702 SW 8th St

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	2	6

City
BentonvilleState
ARZip Code
72716

FEC Identification Number

C	C00898288
---	-----------

Purpose of Disbursement
Office supplies

006

Amount of Each Disbursement this Period

14.75

Candidate Name
Wilson For CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID : SB17.5069

☐ Memo Item

State: IL District: 13

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

290.44

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

A. Win Red

Mailing Address 1776 Wilson Flvd, Suite 530

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		25		2026

City
ArlingtonState
VAZip Code
22209

FEC Identification Number

C C00898288

Purpose of Disbursement
donation fee

003

Amount of Each Disbursement this Period

154.65

Candidate Name
Wilson For CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID : SB17.5182

☐ Memo Item

State: IL District: 13

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼☐ Memo Item

State:

District:

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

154.65

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

38331.32

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

PAGE 29 OF 36

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4206

Wilson For Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Wilson, Jeff, , ,

Mailing Address

1603 Beaver Lake Dr

City

Mahomet

State

IL

ZIP Code

61853

☐ Personal Funds of the Candidate

Original Amount of Loan

500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

500.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
01 29 / 2025

M M / D D / Y Y Y Y

11/30/28

3.00 % (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).....▶

500.00

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

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

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

PAGE 30 OF 36

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4107

Wilson For Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Wilson, Jeff, , ,

Mailing Address

1603 Beaver Lake Dr

City

Mahomet

State

IL

ZIP Code

61853

☒ Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 14 / 2025

M M / D D / Y Y Y Y

12/31/2027

3.00 % (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).....▶

10000.00

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

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

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

PAGE 31 OF 36

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4099

Wilson For Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Wilson, Jeff, , ,

Mailing Address

1603 Beaver Lake Dr

City

Mahomet

State

IL

ZIP Code

61853

☒ Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 21 / 2025M M / D D / Y Y Y Y
12/31/2027

3.00 % (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).....▶

10000.00

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

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

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

PAGE 32 OF 36

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4306

Wilson For Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Wilson, Jeff, , ,

Mailing Address

1603 Beaver Lake Dr

City

Mahomet

State

IL

ZIP Code

61853

☒ Personal Funds of the Candidate

Original Amount of Loan

15000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 15 / 2025

M M / D D / Y Y Y Y

1/1/2027

3.00 % (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).....▶

15000.00

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

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4330

Wilson For Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Wilson, Jeff, , ,

Mailing Address

1603 Beaver Lake Dr

City

Mahomet

State

IL

ZIP Code

61853

☒ Personal Funds of the Candidate

Original Amount of Loan

15000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
06 06 / 2025

M M / D D / Y Y Y Y

1/1/27

3.00 % (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).....▶

15000.00

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

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

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

PAGE 34 OF 36

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4387

Wilson For Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Wilson, Jeff, , ,

Mailing Address

1603 Beaver Lake Dr

City

Mahomet

State

IL

ZIP Code

61853

☐ Personal Funds of the Candidate

Original Amount of Loan

8000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

8000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 12 / 2025

M M / D D / Y Y Y Y

11/7/26

3.00 % (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).....▶

8000.00

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

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

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

PAGE 35 OF 36

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5042

Wilson For Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Wilson, Jeff, , ,

Mailing Address

1603 Beaver Lake Dr

City

Mahomet

State

IL

ZIP Code

61853

☒ Personal Funds of the Candidate

Original Amount of Loan

17000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

17000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
01 06 / 2026

M M / D D / Y Y Y Y

11/4/26

3.00 % (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).....▶

17000.00

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

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

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

PAGE 36 OF 36

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5043

Wilson For Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Wilson, Jeff, , ,

Mailing Address

1603 Beaver Lake Dr

City

Mahomet

State

IL

ZIP Code

61853

☒ Personal Funds of the Candidate

Original Amount of Loan

10200.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10200.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 11 / 2026

M M / D D / Y Y Y Y

11/4/26

3.00 % (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).....▶

10200.00

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

85700.00

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