

**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

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

ADDRESS (number and street)

5956 W. Race Avenue

Check if different  
than previously  
reported. (ACC)

Chicago

IL

60644

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00172619

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

IL

07

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
04 / 01 / 2025

through

M M / D D / Y Y Y Y  
06 / 30 / 2025*I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.*

Type or Print Name of Treasurer

Davis, Vera G., , Mrs.,

Signature of Treasurer

Davis, Vera G., , Mrs.,

Date

M M / D D / Y Y Y Y  
07 / 15 / 2025

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office  
Use  
Only**FEC FORM 3**  
(Revised 05/2016)

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Report Covering the Period:

From:

MM / DD / YYYY  
04 / 01 / 2025

To:

MM / DD / YYYY  
06 / 30 / 2025

|                                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)                                                                          |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....                                              | 46445.28                | 330398.07                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....                                                        | 0.00                    | 7500.00                            |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 46445.28                | 322898.07                          |
| 7. Net Operating Expenditures                                                                                    |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....                                                         | 21715.46                | 172779.85                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....                                               | 0.00                    | 0.00                               |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 21715.46                | 172779.85                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27).....                                              | 114932.42               |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 66454.71                |                                    |

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Report Covering the Period:

From:

MM / DD / YYYY  
04 / 01 / 2025

To:

MM / DD / YYYY  
06 / 30 / 2025**I. RECEIPTS****COLUMN A**  
Total This Period**COLUMN B**  
Election Cycle-to-Date

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

(a) Individuals/Persons Other Than  
Political Committees

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

25875.00

82806.40

(ii) Unitemized .....

2470.28

29028.00

(iii) TOTAL of contributions  
from individuals ▶

28345.28

111834.40

(b) Political Party Committees.....

0.00

656.20

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

18100.00

217907.47

(d) The Candidate .....

0.00

0.00

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

46445.28

330398.07

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.) .....

11.63

16590.40

16. TOTAL RECEIPTS (add Lines  
11(e), 12, 13(c), 14, and 15)  
(Carry Total to Line 24, page 4)..... ▶

46456.91

346988.47

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

| II. DISBURSEMENTS                                                            | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....                                              | 21715.46                      | 172779.85                          |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 10000.00                           |
| 19. LOAN REPAYMENTS:                                                         |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....                                                 | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:                                             |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 0.00                               |
| (b) Political Party Committees.....                                          | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs) .....                       | 0.00                          | 7500.00                            |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 7500.00                            |
| 21. OTHER DISBURSEMENTS .....                                                | 950.00                        | 26445.00                           |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 22665.46                      | 216724.85                          |

## **III. CASH SUMMARY**

|                                                                                       |           |
|---------------------------------------------------------------------------------------|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 91140.97  |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 46456.91  |
| 25. SUBTOTAL (add Line 23 and Line 24).....                                           | 137597.88 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 22665.46  |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 114932.42 |

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

PAGE 5 OF 74

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

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NAME OF COMMITTEE (In Full)

**DAVIS FOR CONGRESS/FRIENDS OF DAVIS**

Full Name (Last, First, Middle Initial)

Archibald, Anita, , ,

**A.**

Mailing Address 4117 W 21st St, Apt 1

City

Chicago

State

IL

Zip Code

60623

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Owner

Occupation

Lawndale Community Day Care

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2750.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 9 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.39688

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Betts, Marcus, , ,

**B.**

Mailing Address PO box 8556

City

Chicago

State

IL

Zip Code

60680

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UIC

Occupation

Higher Education

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

950.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 2 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.39501

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Bishop, Jacqueline, , ,

**C.**

Mailing Address 829 S. Lombard

City

Oak Park

State

IL

Zip Code

60304

FEC ID number of contributing  
federal political committee.

C

Name of Employer

National Kidney Foundation of I

Occupation

Health Care Leadership

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 1 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.39493

Amount of Each Receipt this Period

350.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1550.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 74

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

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NAME OF COMMITTEE (In Full)

**DAVIS FOR CONGRESS/FRIENDS OF DAVIS**

Full Name (Last, First, Middle Initial)

Clay, Bernard, , Mr.,

**A.**

Mailing Address 118 S. Mayfield

City

Chicago

State

IL

Zip Code

60644

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Clay & Associates

Occupation

Consultants

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 10 2025

Transaction ID : SA11AI.39452

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Conlon, Kevin J., , ,

**B.**

Mailing Address 155 Laurel Avenue

City

Wilmette

State

IL

Zip Code

60091

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Conlon Public Strategies

Occupation

Lobbying

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 13 2025

Transaction ID : SA11AI.39495

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Cook, Wilbert, , Mr.,

**C.**

Mailing Address 4032 W. Van Buren

City

Chicago

State

IL

Zip Code

60624

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cook County Assessor

Occupation

Appraisal Jr. Analysis

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3560.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 02 2025

Transaction ID : SA11AI.39482

Amount of Each Receipt this Period

100.00

☐ Memo Item

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 74

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

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NAME OF COMMITTEE (In Full)

**DAVIS FOR CONGRESS/FRIENDS OF DAVIS**

Full Name (Last, First, Middle Initial)

Cooper, Pierre E., , ,

**A.**

Mailing Address 1849 S. Prairie

City

Chicago

State

IL

Zip Code

60616

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Best efforts applied

Occupation

Best efforts applied

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 24 2025

Transaction ID : SA11AI.39534

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Cyrus, Rocell, , ,

**B.**

Mailing Address 1804 W. 107th St.

City

Chicago

State

IL

Zip Code

60643

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Indra Energy

Occupation

Legal/Compliance

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 12 2025

Transaction ID : SA11AI.39447

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Deer, Barbara, , ,

**C.**

Mailing Address 3510 W. Arthington St.

City

Chicago

State

IL

Zip Code

60624

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Chicago Public School

Occupation

Speech Language Pathologist

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  
04 08 2025

Transaction ID : SA11AI.39490

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

1200.00

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

PAGE 8 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

Degeratto, Phyllip J., , ,

Mailing Address 3309 Harvey Ave

City

Berwyn

State

IL

Zip Code

60402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self employed

Occupation

CPA

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4772.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 7 |   | 2 | 0 | 5 |   |

Transaction ID : SA11AI.39681

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Dew, Donald J., , Mr.,

Mailing Address 4800 S. Chicago Beach Drive

City

Clhicago

State

IL

Zip Code

60615

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Habilitatives Systems

Occupation

Pres. &amp; CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 0 |   | 2 | 0 | 5 |   |

Transaction ID : SA11AI.39621

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Dew, Donald J., , Mr.,

Mailing Address 4800 S. Chicago Beach Drive

City

Clhicago

State

IL

Zip Code

60615

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Habilitatives Systems

Occupation

Pres. &amp; CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1400.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 3 |   | 2 | 0 | 5 |   |

Transaction ID : SA11AI.39491

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

1200.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 74

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

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NAME OF COMMITTEE (In Full)

**DAVIS FOR CONGRESS/FRIENDS OF DAVIS**

Full Name (Last, First, Middle Initial)

Freeman-Wilson, Karen, , ,

**A.**

Mailing Address 475 Garfield St.

City

Gary

State

IN

Zip Code

46404

FEC ID number of contributing  
federal political committee.

C

Name of Employer

City of Gary

Occupation

Mayor

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 | 4 |   | 1 | 2 |   | 2 | 0 | 5 |   |

Transaction ID : SA11AI.39471

Amount of Each Receipt this Period

250.00



Memo Item

Full Name (Last, First, Middle Initial)

Gardner, Mary Russell, , Ms.,

**B.**

Mailing Address 5930 W. Race Ave.

City

Chicago

State

IL

Zip Code

60644

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cook County Government

Occupation

Administration

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

590.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 2 |   | 2 | 0 | 5 |   |

Transaction ID : SA11AI.39470

Amount of Each Receipt this Period

100.00



Memo Item

Full Name (Last, First, Middle Initial)

Graves, Artina, , ,

**C.**

Mailing Address 1537 S Komensky Ave

City

Chicago

State

IL

Zip Code

60623

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Graves Johnson and Associates

Occupation

Finance

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

205.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 2 |   | 2 | 0 | 5 |   |

Transaction ID : SA11AI.39465

Amount of Each Receipt this Period

100.00



Memo Item

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

450.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 74

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

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NAME OF COMMITTEE (In Full)

**DAVIS FOR CONGRESS/FRIENDS OF DAVIS**

Full Name (Last, First, Middle Initial)

Hendon, Rickey, Jr., ,

**A.**

Mailing Address 1255 S. Michigan

PH

City

Chicago

State

IL

Zip Code

60605

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cisco

Occupation

Sales

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1755.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 07 2025

Transaction ID : SA11AI.39614

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Hendon, Rickey, , ,

**B.**

Mailing Address 2800 W. Washington Blvd.

City

Chicago

State

IL

Zip Code

60612

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self employed

Occupation

Consultant

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1850.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 13 2025

Transaction ID : SA11AI.39488

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Huang, Yu Ge, , ,

**C.**

Mailing Address 501 W 24th Place #297

City

Chicago

State

IL

Zip Code

60616

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Not employed

Occupation

Not employed

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 07 2025

Transaction ID : SA11AI.39683

Amount of Each Receipt this Period

1000.00

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

3000.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DAVIS FOR CONGRESS/FRIENDS OF DAVIS**

Full Name (Last, First, Middle Initial)

Jackson, Marianne, , ,

**A.**

Mailing Address 207 N. Menard Ave.

City

Chicago

State

IL

Zip Code

60644

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Circuit Court of Cook County

Occupation

Judge

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  
06 / 19 / 2025

19

2025

Transaction ID : SA11AI.39692

Amount of Each Receipt this Period

750.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Jirreh, Ahmed A., , Mr.,

Mailing Address 4800 S. Lake Park

Apartment 1502A

City

Chicago

State

IL

Zip Code

60615

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self employed

Occupation

Translator

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

4666.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 12 / 2025

12

2025

Transaction ID : SA11AI.39453

Amount of Each Receipt this Period

200.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Johnson, C. B., , ,

Mailing Address 919 S. Monitor Ave.

City

Chicago

State

IL

Zip Code

60644

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Drugfree Westside

Occupation

Social Service Director

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1950.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 04 / 2025

04

2025

Transaction ID : SA11AI.39483

Amount of Each Receipt this Period

500.00



Memo Item

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

1450.00

**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)

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

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NAME OF COMMITTEE (In Full)

**DAVIS FOR CONGRESS/FRIENDS OF DAVIS**

Full Name (Last, First, Middle Initial)

Jones, Adrienne, , ,

**A.** Mailing Address 6937 S Crandon Ave, 8E

City  
Chicago

State  
IL

Zip Code  
60649

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Illinois State

Occupation  
Consultant

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  
04 12 2025

Transaction ID : SA11AI.39468

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Lane, Deborah, , ,

**B.** Mailing Address 5035 East End, Apt N2601

City  
Chicago

State  
IL

Zip Code  
60615

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ATU

Occupation  
Fin Sec

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 12 2025

Transaction ID : SA11AI.39459

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Lee, Jimmie, , ,

**C.** Mailing Address 500 W 18th St. Suite 405

City  
Chicago

State  
IL

Zip Code  
60616

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not employed

Occupation  
Not employed

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 16 2025

Transaction ID : SA11AI.39679

Amount of Each Receipt this Period

1000.00

☐ Memo Item

1400.00

**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:  
(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)

**DAVIS FOR CONGRESS/FRIENDS OF DAVIS**

Full Name (Last, First, Middle Initial)

Li, Charles, , ,

**A.**

Mailing Address 2812 S Grove St

City

Chicago

State

IL

Zip Code

60608

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Not employed

Occupation

Not employed

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 16 2025

Transaction ID : SA11AI.39676

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Lilly, Camille V., , Ms.,

**B.**

Mailing Address 1945 N. Newcastle

City

Chicago

State

IL

Zip Code

60607

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Loretto Hospital

Occupation

Vice-President

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 12 2025

Transaction ID : SA11AI.39460

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Lopez, Roberto Lopez, , ,

**C.**

Mailing Address 1830 S Lawndale

City

Chicago

State

IL

Zip Code

60623

FEC ID number of contributing  
federal political committee.

C

Name of Employer

United Scaffolding

Occupation

President

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 19 2025

Transaction ID : SA11AI.39690

Amount of Each Receipt this Period

3300.00

☐ Memo Item

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

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

4550.00

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

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NAME OF COMMITTEE (In Full)

**DAVIS FOR CONGRESS/FRIENDS OF DAVIS**

Full Name (Last, First, Middle Initial)

Ma, Sam Chu, , Mr.,

Mailing Address 2146A S. Archer Ave.

City

Chicago

State

IL

Zip Code

60616

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Owner

Occupation

Restaurant

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 9 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.39685

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Maryland, Mary, A. Nero, Ms.,

Mailing Address 420 S. Home Ave.

City

Oak Park

State

IL

Zip Code

60304

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Not employed

Occupation

Not employed

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 5 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.39485

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

McCoy, William, , ,

Mailing Address 210 Gold St.

City

Park Forrest

State

IL

Zip Code

60466

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CEO/Founder

Occupation

My Brother's Keeper

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2757.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 9 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.39521

Amount of Each Receipt this Period

100.00

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

1300.00

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

McCoy, William, , ,

A.

Mailing Address 210 Gold St.

City

Park Forrest

State

IL

Zip Code

60466

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CEO/Founder

Occupation

My Brother's Keeper

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2857.00

Date of Receipt

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

Transaction ID : SA11AI.39743

Amount of Each Receipt this Period

100.00



Memo Item

Full Name (Last, First, Middle Initial)

McCray, Walter, , ,

B.

Mailing Address 2839 W. Wilcox

City

Chicago

State

IL

Zip Code

60612

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Black Light Fellowship

Occupation

Minister

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2400.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 7 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.39489

Amount of Each Receipt this Period

100.00



Memo Item

Full Name (Last, First, Middle Initial)

Melin-Rogovin, Michelle, , ,

C.

Mailing Address 930 Dunlop Ave

City

Forest Park

State

IL

Zip Code

60130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern University

Occupation

Science Grant Writer

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 1 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.39494

Amount of Each Receipt this Period

250.00



Memo Item

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

450.00

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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

mo, Jung, , ,

A.

Mailing Address 343 W Erie St

City

Chicago

State

IL

Zip Code

60654

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ModeOccupation  
Architect

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 | 4 |  | 1 | 1 |  | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.39496

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Moody, James M., , ,

B.

Mailing Address 601 E 32nd St., #1011

City

Chicago

State

IL

Zip Code

60616

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Quinn Chapel AME ChurchOccupation  
Minister

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

975.00

Date of Receipt

|   |   |  |   |   |  |   |   |   |   |
|---|---|--|---|---|--|---|---|---|---|
| M | M |  | D | D |  | Y | Y | Y | Y |
| 0 | 5 |  | 0 | 6 |  | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.39565

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Morgan, Abraham, , Mr.,

C.

Mailing Address 701 S. Taylor

City

Oak Park

State

IL

Zip Code

60304

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not employedOccupation  
Not employed

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

|   |   |  |   |   |  |   |   |   |   |
|---|---|--|---|---|--|---|---|---|---|
| M | M |  | D | D |  | Y | Y | Y | Y |
| 0 | 4 |  | 1 | 5 |  | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.39487

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

375.00

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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DAVIS FOR CONGRESS/FRIENDS OF DAVIS**

Full Name (Last, First, Middle Initial)

Reddy, Sreenivas, , ,

**A.**

Mailing Address 6699 S. County Line Road

City

Burr Ridge

State

IL

Zip Code

60527

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Vein and Vascular Centers

Occupation

Physician

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

4300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 5 |   |

Transaction ID : SA11AI.39686

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

Redmond, Wynona, , ,

**B.**

Mailing Address 161 N Clark St.

City

Chicago

State

IL

Zip Code

60601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wyn-Win Communications

Occupation

Public Relations

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 4 |   | 2 | 0 | 5 |   |

Transaction ID : SA11AI.39535

Amount of Each Receipt this Period

500.00



Memo Item

Full Name (Last, First, Middle Initial)

Reinsdorf, Jerry M., , Mr.,

**C.**

Mailing Address 333 W. 35th St.

City

Chicago

State

IL

Zip Code

60616

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bojer Financial Ltd.

Occupation

Real Estate Exec.

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 9 |   | 2 | 0 | 5 |   |

Transaction ID : SA11AI.39413

Amount of Each Receipt this Period

3500.00



Memo Item

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

5000.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

Roseboroguh, Alexander C., , ,

A.

Mailing Address 6658 N. Damen

City

Chicago

State

IL

Zip Code

60645

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Best efforts applied

Occupation

Best efforts applied

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 2 |   | 2 | 0 | 5 |   |

Transaction ID : SA11AI.39449

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Sanders, David, , ,

B.

Mailing Address 1454 S. Emerald

City

Chicago

State

IL

Zip Code

60607

FEC ID number of contributing  
federal political committee.

C

Name of Employer

City Colleges of Chicago

Occupation

Administrator

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 2 |   | 2 | 0 | 5 |   |

Transaction ID : SA11AI.39500

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Scott, Karen, , ,

C.

Mailing Address 1019 Elm St

City

Flossmoor

State

IL

Zip Code

60422

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Real Estate Investor

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 8 |   | 2 | 0 | 5 |   |

Transaction ID : SA11AI.39752

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

850.00

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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**DAVIS FOR CONGRESS/FRIENDS OF DAVIS**

Full Name (Last, First, Middle Initial)

Sen, Ashish, , ,

Mailing Address 2557 W. Farwell Ave.

City  
ChicagoState  
ILZip Code  
60645FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of ILOccupation  
Professor

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

9143.90

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 04  |   | 12  |   | 2025        |

Transaction ID : SA11AI.39450

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Tucker, Corona, , ,

Mailing Address 301 Thatcher Ave.

City  
River ForestState  
ILZip Code  
60305FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self employedOccupation  
Self employed

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 05  |   | 09  |   | 2025        |

Transaction ID : SA11AI.39545

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Walton, Frank C., , ,

Mailing Address PO Box 23665

City  
Federal WayState  
WAZip Code  
98093FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not employedOccupation  
Not employed

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 04  |   | 12  |   | 2025        |

Transaction ID : SA11AI.39475

Amount of Each Receipt this Period

250.00

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

1000.00

**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)

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

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NAME OF COMMITTEE (In Full)

**DAVIS FOR CONGRESS/FRIENDS OF DAVIS**

Full Name (Last, First, Middle Initial)

Williams, Bertha, L., ,

**A.**

Mailing Address 4011 W. Adams St.

City

Chicago

State

IL

Zip Code

60624

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Not employed

Occupation

Not employed

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1050.00

Date of Receipt

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

Transaction ID : SA11AI.39544

Amount of Each Receipt this Period

850.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Williams, George A., , Mr.,

**B.**

Mailing Address 437 E. 42nd St.

City

Chicago

State

IL

Zip Code

60653

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TASC

Occupation

Social Justice Service

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 11 2025

Transaction ID : SA11AI.39502

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Williams, Lydia, , ,

**C.**

Mailing Address 549 E 91st St.

City

Chicago

State

IL

Zip Code

60619

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SOI

Occupation

Professional

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 12 2025

Transaction ID : SA11AI.39448

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

1100.00

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

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

Wood, Carole, , ,

A. Mailing Address 2639 S. Michigan Ave.

City  
ChicagoState  
ILZip Code  
60616FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern University SettleOccupation  
President

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 04  |   | 04  |   | 2025        |

Transaction ID : SA11AI.39484

Amount of Each Receipt this Period

100.00

☐ Memo ItemB. Full Name (Last, First, Middle Initial)  
Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
|     |   |     |   |             |

Amount of Each Receipt this Period

☐ Memo ItemC. Full Name (Last, First, Middle Initial)  
Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
|     |   |     |   |             |

Amount of Each Receipt this Period

☐ Memo Item

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

100.00

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

25875.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DAVIS FOR CONGRESS/FRIENDS OF DAVIS**

Full Name (Last, First, Middle Initial)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED

**A.**

Mailing Address 1625 L STREET NW

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

**C** C00011114

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

57000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 12 2025

Transaction ID : SA11C.39778

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Carpenters Legislative Improvement Cmte.

**B.**

Mailing Address 101 Constitution Ave. NW

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00001016

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

39000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 14 2025

Transaction ID : SA11C.39542

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Clay, Bernard, , Mr.,

**C.**

Mailing Address 118 S. Mayfield

City

Chicago

State

IL

Zip Code

60644

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Clay & Associates

Occupation

Consultants

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 13 2025

Transaction ID : SA11C.39695

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

8000.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 74

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

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NAME OF COMMITTEE (In Full)

**DAVIS FOR CONGRESS/FRIENDS OF DAVIS**

Full Name (Last, First, Middle Initial)

**FRATERNITY & SORORITY POLITICAL ACTION COMMITTEE****A.**

Mailing Address PO BOX 3435

City

ALEXANDRIA

State

VA

Zip Code

22302

FEC ID number of contributing  
federal political committee.**C** C00410068

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 3 |   | 2 | 0 | 5 |   |

Transaction ID : SA11C.39797

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Hurt, Louverta, , Ms.,

Mailing Address 5664 W. Washington Blvd.  
Apt. 1

City

Chicago

State

IL

Zip Code

60644

FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Retired

Educator

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1150.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 9 |   | 2 | 0 | 5 |   |

Transaction ID : SA11C.39696

Amount of Each Receipt this Period

100.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

**ILLINOIS POLITICAL ACTIVE LETTER CARRIERS**Mailing Address PO BOX 561  
4820 22ND AVENUE

City

ORLAND PARK

State

IL

Zip Code

60462

FEC ID number of contributing  
federal political committee.**C** C00264689

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

29500.00

Date of Receipt

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

Transaction ID : SA11C.39796

Amount of Each Receipt this Period

1000.00

☐ Memo Item

2100.00

**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:  
(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)

**DAVIS FOR CONGRESS/FRIENDS OF DAVIS**

Full Name (Last, First, Middle Initial)

Machinists Non-Partisan Political League

Mailing Address 9000 Machinist Place

City

Upper Marlboro

State

MD

Zip Code

20772

FEC ID number of contributing  
federal political committee.

**C** C00002469

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

61000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 20 2025

Transaction ID : SA11C.39697

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Realtors PAC

Mailing Address 430 N. Michigan Ave.

City

Chicago

State

IL

Zip Code

60611

FEC ID number of contributing  
federal political committee.

**C** C00030718

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

93000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 16 2025

Transaction ID : SA11C.39767

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WINE AND SPIRITS WHOLESALERS OF AMERICA INC. POLITICAL ACTION COMMITTEE

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00147173

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

21500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 20 2025

Transaction ID : SA11C.39694

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

8000.00

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

18100.00

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

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|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input 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 checked="" type="checkbox"/> 15 |                              |                              |                              |

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

Google Inc.

A.

Mailing Address 85 Broad St., Suite 17-034

City  
New YorkState  
NYZip Code  
10004FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2504.33

Date of Receipt

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

Transaction ID : SA15.39794

Amount of Each Receipt this Period

4.33

☐ Memo Item  
Refund

Full Name (Last, First, Middle Initial)

Liberty Bank

B.

Mailing Address PO Box 60131

City  
New OrleansState  
LAZip Code  
70160FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

216.77

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 5 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA15.39760

Amount of Each Receipt this Period

1.46

☐ Memo Item  
Interest

Full Name (Last, First, Middle Initial)

Liberty Bank

C.

Mailing Address PO Box 60131

City  
New OrleansState  
LAZip Code  
70160FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

219.58

Date of Receipt

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

Transaction ID : SA15.39768

Amount of Each Receipt this Period

2.81

☐ Memo Item  
Interest

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

8.60

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 PageFOR LINE NUMBER:  
(check only one)

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|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input 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 checked="" type="checkbox"/> 15 |                              |                              |                              |

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

Liberty Bank

A.

Mailing Address PO Box 60131

City

New Orleans

State

LA

Zip Code

70160

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

222.61

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 7 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA15.39779

Amount of Each Receipt this Period

3.03

☐ Memo Item  
Interest

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 |
|   |   |   |   |   |   |   |   |   |   |

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 |
|   |   |   |   |   |   |   |   |   |   |

Amount of Each Receipt this Period

☐ Memo Item

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

3.03

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

11.63

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

PAGE 27 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. ACTBLUE**

Mailing Address P.O. Box 382110

City  
CambridgeState  
MAZip Code  
02238Purpose of Disbursement  
Processing fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2029

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 6 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C C00401224

Amount of Each Disbursement this Period

39.51

Transaction ID : SB17.39562

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ACTBLUE**

Mailing Address P.O. Box 382110

City  
CambridgeState  
MAZip Code  
02238Purpose of Disbursement  
Processing fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2029

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C C00401224

Amount of Each Disbursement this Period

244.97

Transaction ID : SB17.39561

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ACTBLUE**

Mailing Address P.O. Box 382110

City  
CambridgeState  
MAZip Code  
02238Purpose of Disbursement  
Processing fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2029

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 1 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C C00401224

Amount of Each Disbursement this Period

0.28

Transaction ID : SB17.39560

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

284.76

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

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

PAGE 28 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. ACTBLUE**

Mailing Address P.O. Box 382110

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 7 |   | 2 | 0 | 2 | 5 |

City  
CambridgeState  
MAZip Code  
02238

FEC Identification Number

|   |           |
|---|-----------|
| C | C00401224 |
|---|-----------|

Purpose of Disbursement  
Processing fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

|       |
|-------|
| 55.30 |
|-------|

Transaction ID : SB17.39559

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2029

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**B. ACTBLUE**

Mailing Address P.O. Box 382110

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 9 |   | 2 | 0 | 2 | 5 |

City  
CambridgeState  
MAZip Code  
02238

FEC Identification Number

|   |           |
|---|-----------|
| C | C00401224 |
|---|-----------|

Purpose of Disbursement  
Processing fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

|        |
|--------|
| 340.34 |
|--------|

Transaction ID : SB17.39507

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2029

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**C. ACTBLUE**

Mailing Address P.O. Box 382110

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 4 |   | 2 | 0 | 2 | 5 |

City  
CambridgeState  
MAZip Code  
02238

FEC Identification Number

|   |           |
|---|-----------|
| C | C00401224 |
|---|-----------|

Purpose of Disbursement  
Processing fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

|       |
|-------|
| 12.51 |
|-------|

Transaction ID : SB17.39558

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2029

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

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

|        |
|--------|
| 408.15 |
|--------|

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

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

PAGE 29 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. ACTBLUE**

Mailing Address P.O. Box 382110

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

City  
CambridgeState  
MAZip Code  
02238

FEC Identification Number

C C00401224

Purpose of Disbursement  
Processing fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

401.17

Transaction ID : SB17.39759

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Adobe Systems**

Mailing Address 345 Park Avenue

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 7 |   | 2 | 0 | 2 | 5 |

City  
San JoseState  
CAZip Code  
95110

FEC Identification Number

C

Purpose of Disbursement  
Software subscription/Marketing

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

24.43

Transaction ID : SB17.39512

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Adobe Systems**

Mailing Address 345 Park Avenue

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 9 |   | 2 | 0 | 2 | 5 |

City  
San JoseState  
CAZip Code  
95110

FEC Identification Number

C

Purpose of Disbursement  
Software subscription/Marketing

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

26.51

Transaction ID : SB17.39513

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

401.17

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

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

PAGE 30 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Adobe Systems**

Mailing Address 345 Park Avenue

City  
San JoseState  
CAZip Code  
95110Purpose of Disbursement  
Software subscription/Marketing

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 2 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

21.24

Transaction ID : SB17.39510

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Adobe Systems**

Mailing Address 345 Park Avenue

City  
San JoseState  
CAZip Code  
95110Purpose of Disbursement  
Software subscription/Marketing

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 7 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

21.24

Transaction ID : SB17.39508

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Adobe Systems**

Mailing Address 345 Park Avenue

City  
San JoseState  
CAZip Code  
95110Purpose of Disbursement  
Software subscription/Marketing

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

24.43

Transaction ID : SB17.39711

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Adobe Systems**

Mailing Address 345 Park Avenue

City  
San JoseState  
CAZip Code  
95110Purpose of Disbursement  
Software subscription/Marketing

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 2 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

21.24

Transaction ID : SB17.39705

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Adobe Systems**

Mailing Address 345 Park Avenue

City  
San JoseState  
CAZip Code  
95110Purpose of Disbursement  
Software subscription/Marketing

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 7 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

21.24

Transaction ID : SB17.39728

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Adobe Systems**

Mailing Address 345 Park Avenue

City  
San JoseState  
CAZip Code  
95110Purpose of Disbursement  
Software subscription/Marketing

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

25.35

Transaction ID : SB17.39719

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 32 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Adobe Systems**

Mailing Address 345 Park Avenue

City  
San JoseState  
CAZip Code  
95110Purpose of Disbursement  
Software subscription/Marketing

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 2 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

22.04

Transaction ID : SB17.39741

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Adobe Systems**

Mailing Address 345 Park Avenue

City  
San JoseState  
CAZip Code  
95110Purpose of Disbursement  
Software subscription/Marketing

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 7 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

22.04

Transaction ID : SB17.39738

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Barclay, Dakari, , ,**

Mailing Address 6157 S. Rhodes

City  
ChicagoState  
ILZip Code  
60637Purpose of Disbursement  
Disk Jockey

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

600.00

Transaction ID : SB17.39785

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

600.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 33 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Been Verified**

Mailing Address 48 W 28th Street, 28th Floor

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 15  |   | 2025    |

City  
New YorkState  
NYZip Code  
10018

FEC Identification Number

C

Purpose of Disbursement  
Search engine

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

24.99

Transaction ID : SB17.39761

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Been Verified**

Mailing Address 48 W 28th Street, 28th Floor

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 15  |   | 2025    |

City  
New YorkState  
NYZip Code  
10018

FEC Identification Number

C

Purpose of Disbursement  
Search engine

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

24.99

Transaction ID : SB17.39769

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Been Verified**

Mailing Address 48 W 28th Street, 28th Floor

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 16  |   | 2025    |

City  
New YorkState  
NYZip Code  
10018

FEC Identification Number

C

Purpose of Disbursement  
Search engine

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

24.99

Transaction ID : SB17.39780

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

74.97

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

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

PAGE 34 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Canva**Mailing Address 110 Kippax St  
NSW 2010City  
AustraliaState  
ZZZip Code  
00000Purpose of Disbursement  
Software subscription/marketing

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 1 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.39514

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Canva**Mailing Address 110 Kippax St  
NSW 2010City  
AustraliaState  
ZZZip Code  
00000Purpose of Disbursement  
Software subscription/marketing

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 2 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.39706

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Canva**Mailing Address 110 Kippax St  
NSW 2010City  
AustraliaState  
ZZZip Code  
00000Purpose of Disbursement  
Software subscription/marketing

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

600.00

Transaction ID : SB17.39725

☒ Memo Item

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

0.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 35 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Canva**Mailing Address 110 Kippax St  
NSW 2010City  
AustraliaState  
ZZZip Code  
00000Purpose of Disbursement  
Software subscription/marketing

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 1 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.39716

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. CapitolOne Spark Business Card.**

Mailing Address PO Box 6492

City  
Carol StreamState  
ILZip Code  
60197Purpose of Disbursement  
Credit card fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 9 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

61.66

Transaction ID : SB17.39643

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. CapitolOne Spark Business Card.**

Mailing Address PO Box 6492

City  
Carol StreamState  
ILZip Code  
60197Purpose of Disbursement  
Credit card fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 9 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

39.00

Transaction ID : SB17.39644

☒ Memo Item

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

0.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 36 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. CapitolOne Spark Business Card.**

Mailing Address PO Box 6492

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 0 |   | 2 | 0 | 2 | 5 |

City  
Carol StreamState  
ILZip Code  
60197

FEC Identification Number

C

Purpose of Disbursement  
Credit card payment

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

39.00

Transaction ID : SB17.39792

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. CapitolOne Spark Business Card.**

Mailing Address PO Box 6492

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 1 |   | 2 | 0 | 2 | 5 |

City  
Carol StreamState  
ILZip Code  
60197

FEC Identification Number

C

Purpose of Disbursement  
Credit card payment

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

4361.17

Transaction ID : SB17.39515

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. CapitolOne Spark Business Card.**

Mailing Address PO Box 6492

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 5 |   | 2 | 0 | 2 | 5 |

City  
Carol StreamState  
ILZip Code  
60197

FEC Identification Number

C

Purpose of Disbursement  
Interest fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

61.66

Transaction ID : SB17.39793

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

4361.17

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

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

PAGE 37 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. CapitolOne Spark Business Card.**

Mailing Address PO Box 6492

City  
Carol StreamState  
ILZip Code  
60197Purpose of Disbursement  
Credit card payment

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 | 4 |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2727.68

Transaction ID : SB17.39715

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CapitolOne Spark Business Card.**

Mailing Address PO Box 6492

City  
Carol StreamState  
ILZip Code  
60197Purpose of Disbursement  
Interest fee

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 | 5 |   | 1 | 6 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

10.66

Transaction ID : SB17.39795

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. CapitolOne Spark Business Card.**

Mailing Address PO Box 6492

City  
Carol StreamState  
ILZip Code  
60197Purpose of Disbursement  
Credit card payment

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 | 6 |   | 0 | 4 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

6894.79

Transaction ID : SB17.39721

☐ Memo Item

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

9622.47

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

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

PAGE 38 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Caspio**

Mailing Address 1286 Kifer Rd, Suite 107

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 19  |   | 2025    |

City  
SunnyvaleState  
CAZip Code  
94086Purpose of Disbursement  
Marketing

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

8.00

Transaction ID : SB17.39518

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Caspio**

Mailing Address 1286 Kifer Rd, Suite 107

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 21  |   | 2025    |

City  
SunnyvaleState  
CAZip Code  
94086Purpose of Disbursement  
Marketing

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

600.00

Transaction ID : SB17.39516

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Caspio**

Mailing Address 1286 Kifer Rd, Suite 107

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 20  |   | 2025    |

City  
SunnyvaleState  
CAZip Code  
94086Purpose of Disbursement  
Marketing

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

600.00

Transaction ID : SB17.39733

☒ Memo Item

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

0.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 39 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Cook Political Report**

Mailing Address 2311 Wilson Blvd

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 2 |   | 2 | 0 | 2 | 5 |

City  
ArlingtonState  
VAZip Code  
22201

FEC Identification Number

C

Purpose of Disbursement  
Communication

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

35.00

Transaction ID : SB17.39519

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2026

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Cook Political Report**

Mailing Address 2311 Wilson Blvd

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 8 |   | 2 | 0 | 2 | 5 |

City  
ArlingtonState  
VAZip Code  
22201

FEC Identification Number

C

Purpose of Disbursement  
Communication

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

35.00

Transaction ID : SB17.39639

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2026

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Cook Political Report**

Mailing Address 2311 Wilson Blvd

Date of Disbursement

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

City  
ArlingtonState  
VAZip Code  
22201

FEC Identification Number

C

Purpose of Disbursement  
Communication

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

35.00

Transaction ID : SB17.39707

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2026

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 40 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Cook Political Report**

Mailing Address 2311 Wilson Blvd

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 9 |   | 2 | 0 | 2 | 5 |

City  
ArlingtonState  
VAZip Code  
22201

FEC Identification Number

C

Purpose of Disbursement  
Communication

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

35.00

Transaction ID : SB17.39717

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Davis, Vera G., , Mrs.,**

Mailing Address 5956 W. Race Avenue

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 4 |   | 2 | 0 | 2 | 5 |

City  
ChicagoState  
ILZip Code  
60644

FEC Identification Number

C

Purpose of Disbursement  
Reimbursement for office supplies

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

63.49

Transaction ID : SB17.39547

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Dropbox**

Mailing Address PO Box 402

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 1 |   | 2 | 0 | 2 | 5 |

City  
WorthingtonState  
KYZip Code  
41183

FEC Identification Number

C

Purpose of Disbursement  
Internet storage

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

21.79

Transaction ID : SB17.39520

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

63.49

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

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

PAGE 41 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Dropbox**

Mailing Address PO Box 402

Date of Disbursement

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

City  
WorthingtonState  
KYZip Code  
41183

FEC Identification Number

C

Purpose of Disbursement  
Internet storage

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

21.79

Transaction ID : SB17.39727

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Dropbox**

Mailing Address PO Box 402

Date of Disbursement

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

City  
WorthingtonState  
KYZip Code  
41183

FEC Identification Number

C

Purpose of Disbursement  
Internet storage

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

21.79

Transaction ID : SB17.39736

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. DW Consulting Provision Services**

Mailing Address 2301 Stratford Ave.

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 5 |   | 2 | 0 | 2 | 5 |

City  
West ChesterState  
ILZip Code  
60154

FEC Identification Number

C

Purpose of Disbursement  
Print advertisement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.39765

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

500.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 42 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Google.com**

Mailing Address 1600 Amphitheatre Parkway

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 5 |   | 2 | 0 | 2 | 5 |

City  
MountainviewState  
CAZip Code  
94043

FEC Identification Number

C

Purpose of Disbursement  
Communication

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

18.73

Transaction ID : SB17.39641

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Google.com**

Mailing Address 1600 Amphitheatre Parkway

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 8 |   | 2 | 0 | 2 | 5 |

City  
MountainviewState  
CAZip Code  
94043

FEC Identification Number

C

Purpose of Disbursement  
Communication

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

12.00

Transaction ID : SB17.39800

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Google.com**

Mailing Address 1600 Amphitheatre Parkway

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 9 |   | 2 | 0 | 2 | 5 |

City  
MountainviewState  
CAZip Code  
94043

FEC Identification Number

C

Purpose of Disbursement  
Communication

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

12.00

Transaction ID : SB17.39799

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 43 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Google.com**

Mailing Address 1600 Amphitheatre Parkway

City  
MountainviewState  
CAZip Code  
94043Purpose of Disbursement  
Communication

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 7 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

9.99

Transaction ID : SB17.39540

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Google.com**

Mailing Address 1600 Amphitheatre Parkway

City  
MountainviewState  
CAZip Code  
94043Purpose of Disbursement  
Communication

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

9.99

Transaction ID : SB17.39640

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Google.com**

Mailing Address 1600 Amphitheatre Parkway

City  
MountainviewState  
CAZip Code  
94043Purpose of Disbursement  
Communication

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

18.73

Transaction ID : SB17.39712

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 44 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Google.com**

Mailing Address 1600 Amphitheatre Parkway

Date of Disbursement

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

City  
MountainviewState  
CAZip Code  
94043

FEC Identification Number

C

Purpose of Disbursement  
Reimburse Tumia Romero for email marketing

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

53.12

Transaction ID : SB17.39661

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Google.com**

Mailing Address 1600 Amphitheatre Parkway

Date of Disbursement

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

City  
MountainviewState  
CAZip Code  
94043

FEC Identification Number

C

Purpose of Disbursement  
Communication

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

18.73

Transaction ID : SB17.39720

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. ifax**Mailing Address Suite 22, Churchill House  
137-139 Brent St

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 9 |   | 2 | 0 | 2 | 5 |

City  
Hendon, LondonState  
ZZZip Code  
00000

FEC Identification Number

C

Purpose of Disbursement  
Marketing/Communication

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

29.99

Transaction ID : SB17.39642

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

0.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 45 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. ifax**Mailing Address Suite 22, Churchill House  
137-139 Brent StCity  
Hendon, LondonState  
ZZZip Code  
00000Purpose of Disbursement  
Marketing/Communication

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

29.99

Transaction ID : SB17.39704

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. ifax**Mailing Address Suite 22, Churchill House  
137-139 Brent StCity  
Hendon, LondonState  
ZZZip Code  
00000Purpose of Disbursement  
Marketing/Communication

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

29.99

Transaction ID : SB17.39740

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Instacart**

Mailing Address 50 Beale Street, Suite 600

City  
San FranciscoState  
CAZip Code  
94105Purpose of Disbursement  
Fundraiser

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 2 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

168.17

Transaction ID : SB17.39801

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 46 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Instacart**

Mailing Address 50 Beale Street, Suite 600

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 12  |   | 2025    |

City  
San FranciscoState  
CAZip Code  
94105Purpose of Disbursement  
Fundraiser

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

21.24

Transaction ID : SB17.39803

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Liberty Bank**

Mailing Address PO Box 60131

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 24  |   | 2025    |

City  
New OrleansState  
LAZip Code  
70160Purpose of Disbursement  
Research work

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.39784

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Marios Butcher Shop**

Mailing Address 5825 W. Madison St.

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 17  |   | 2025    |

City  
ChicagoState  
ILZip Code  
60644Purpose of Disbursement  
Office rent

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.39766

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

530.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 47 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Marios Butcher Shop**

Mailing Address 5825 W. Madison St.

Date of Disbursement

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

City  
ChicagoState  
ILZip Code  
60644Purpose of Disbursement  
Office rent

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.39791

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Marios Butcher Shop**

Mailing Address 5825 W. Madison St.

Date of Disbursement

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

City  
ChicagoState  
ILZip Code  
60644Purpose of Disbursement  
Office rent

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.39790

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. McAfee**

Mailing Address 3965 Freedom Circle

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 9 |   | 2 | 0 | 2 | 5 |

City  
Santa ClaraState  
CAZip Code  
95054Purpose of Disbursement  
Virus protection

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

165.36

Transaction ID : SB17.39737

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

1000.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 48 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. McAfee**

Mailing Address 3965 Freedom Circle

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

City  
Santa ClaraState  
CAZip Code  
95054

FEC Identification Number

C

Purpose of Disbursement  
Virus protection

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

297.66

Transaction ID : SB17.39729

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Movavi**

Mailing Address 13207 Cantina Dr.

Date of Disbursement

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

City  
St. LouisState  
MOZip Code  
63141

FEC Identification Number

C

Purpose of Disbursement  
Reimburse Tumia Romero for video marketing

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

168.82

Transaction ID : SB17.39660

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Overton, Crystal, , ,**Mailing Address 4638 S. Cottage Grove Ave.  
Apt. 86

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 7 |   | 2 | 0 | 2 | 5 |

City  
ChicagoState  
ILZip Code  
60619

FEC Identification Number

C

Purpose of Disbursement  
Refreshments

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

255.00

Transaction ID : SB17.39762

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

255.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 49 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Overton, Crystal, , ,**Mailing Address 4638 S. Cottage Grove Ave.  
Apt. 86City  
ChicagoState  
ILZip Code  
60619Purpose of Disbursement  
Refreshments

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 7 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.39763

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Overton, Crystal, , ,**Mailing Address 4638 S. Cottage Grove Ave.  
Apt. 86City  
ChicagoState  
ILZip Code  
60619Purpose of Disbursement  
Refreshments

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

245.29

Transaction ID : SB17.39774

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Paddle.net**

Mailing Address 70 Wilson Finsbury St.

City  
LondonState  
ZZZip Code  
00000Purpose of Disbursement  
Marketing

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

51.82

Transaction ID : SB17.39730

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

345.29

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

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

PAGE 50 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Read, Eddie, , ,**

Mailing Address 5203 S. Ingleside Ave.

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 15  |   | 2025    |

City  
ChicagoState  
ILZip Code  
60615Purpose of Disbursement  
Campaign consultant

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.39781

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Restream**

Mailing Address 8121 Bee Cave Rd. Suite 150

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 21  |   | 2025    |

City  
AustinState  
TXZip Code  
78746Purpose of Disbursement  
Internet subscription/Communiication

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

49.00

Transaction ID : SB17.39645

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Restream**

Mailing Address 8121 Bee Cave Rd. Suite 150

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 20  |   | 2025    |

City  
AustinState  
TXZip Code  
78746Purpose of Disbursement  
Internet subscription/Communiication

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

49.00

Transaction ID : SB17.39726

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

1000.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 51 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Restream**

Mailing Address 8121 Bee Cave Rd. Suite 150

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 20  |   | 2025    |

City  
AustinState  
TXZip Code  
78746

FEC Identification Number

C

Purpose of Disbursement  
Internet subscription/Communiication

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

49.00

Transaction ID : SB17.39735

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Romero, Tumia, , Ms.,**

Mailing Address 105 S. Mayfield Ave.

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 20  |   | 2025    |

City  
ChicagoState  
ILZip Code  
60644

FEC Identification Number

C

Purpose of Disbursement  
Reimbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1363.99

Transaction ID : SB17.39655

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Servitech**

Mailing Address 2321 E 70th

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 29  |   | 2025    |

City  
ChicagoState  
ILZip Code  
60649

FEC Identification Number

C

Purpose of Disbursement  
Maintenance Contract

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

275.00

Transaction ID : SB17.39783

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

1638.99

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

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

PAGE 52 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Servitech**

Mailing Address 2321 E 70th

City  
ChicagoState  
ILZip Code  
60649Purpose of Disbursement  
Malware removal/driver installation/upgrade/activation

Candidate Name

Office Sought:  

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026  

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

350.00

Transaction ID : SB17.39698

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Slicktext.com**

Mailing Address 301 S 2nd Street, Suite 304

City  
JamestownState  
NYZip Code  
14701Purpose of Disbursement  
Communication/Marketing

Candidate Name

Office Sought:  

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026  

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 1 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

793.87

Transaction ID : SB17.39646

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Slicktext.com**

Mailing Address 301 S 2nd Street, Suite 304

City  
JamestownState  
NYZip Code  
14701Purpose of Disbursement  
Communication/Marketing

Candidate Name

Office Sought:  

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026  

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2009.10

Transaction ID : SB17.39713

☒ Memo Item

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

350.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 53 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Slicktext.com**

Mailing Address 301 S 2nd Street, Suite 304

City  
JamestownState  
NYZip Code  
14701Purpose of Disbursement  
Communication/Marketing

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 1 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3379.52

Transaction ID : SB17.39723

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Slicktext.com**

Mailing Address 301 S 2nd Street, Suite 304

City  
JamestownState  
NYZip Code  
14701Purpose of Disbursement  
Communication/Marketing

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2247.34

Transaction ID : SB17.39731

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Squarespace**

Mailing Address 225 Varick Street, 12th Floor

City  
New YorkState  
NYZip Code  
10014Purpose of Disbursement  
Website Commercial Package

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

55.94

Transaction ID : SB17.39806

☒ Memo Item

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

0.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 54 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Squarespace**

Mailing Address 225 Varick Street, 12th Floor

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 09  |   | 2025    |

City  
New YorkState  
NYZip Code  
10014

FEC Identification Number

C

Purpose of Disbursement  
Website Commercial Package

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

55.94

Transaction ID : SB17.39807

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. United States Treasury**

Mailing Address ...

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 08  |   | 2025    |

City  
AustinState  
TXZip Code  
73301

FEC Identification Number

C

Purpose of Disbursement  
FEC Training fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

40.00

Transaction ID : SB17.39709

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Verizon Wireless**

Mailing Address 777 Big Timber Rd.

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 14  |   | 2025    |

City  
Lehigh ValleyState  
PAZip Code  
18002

FEC Identification Number

C

Purpose of Disbursement  
Wireless service/communication

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

827.33

Transaction ID : SB17.39647

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 55 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address 777 Big Timber Rd.

City  
Lehigh ValleyState  
PAZip Code  
18002Purpose of Disbursement  
cables

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

14.16

Transaction ID : SB17.39710

☒ Memo Item**B. Verizon Wireless**

Mailing Address 777 Big Timber Rd.

City  
Lehigh ValleyState  
PAZip Code  
18002Purpose of Disbursement  
Reimbursement for Tumia Romero wireless service

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

409.17

Transaction ID : SB17.39663

☒ Memo Item**C. Verizon Wireless**

Mailing Address 777 Big Timber Rd.

City  
Lehigh ValleyState  
PAZip Code  
18002Purpose of Disbursement  
Reimbursement for Tumia Romero wireless service

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

430.37

Transaction ID : SB17.39722

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 56 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Voice Newspaper**

Mailing Address 5236 W. North Ave.

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 3 |   | 2 | 0 | 2 | 5 |

City  
ChicagoState  
ILZip Code  
60639Purpose of Disbursement  
Print advertising

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

280.00

Transaction ID : SB17.39764

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Wix.com**

Mailing Address 6352 W Gunnison St.

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 8 |   | 2 | 0 | 2 | 5 |

City  
ChicagoState  
ILZip Code  
60630Purpose of Disbursement  
Communication

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

59.00

Transaction ID : SB17.39651

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Wix.com**

Mailing Address 6352 W Gunnison St.

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 8 |   | 2 | 0 | 2 | 5 |

City  
ChicagoState  
ILZip Code  
60630Purpose of Disbursement  
Communication

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

43.00

Transaction ID : SB17.39649

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

280.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 57 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Wix.com**

Mailing Address 6352 W Gunnison St.

City  
ChicagoState  
ILZip Code  
60630Purpose of Disbursement  
Communication

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 1 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

5.95

Transaction ID : SB17.39652

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Wix.com**

Mailing Address 6352 W Gunnison St.

City  
ChicagoState  
ILZip Code  
60630Purpose of Disbursement  
Communication

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

59.00

Transaction ID : SB17.39708

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Wix.com**

Mailing Address 6352 W Gunnison St.

City  
ChicagoState  
ILZip Code  
60630Purpose of Disbursement  
website marketing

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 6 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

43.00

Transaction ID : SB17.39702

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 58 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Wix.com**

Mailing Address 6352 W Gunnison St.

City  
ChicagoState  
ILZip Code  
60630Purpose of Disbursement  
Reimburse Tumia Romero for website marketing

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

43.36

Transaction ID : SB17.39659

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Wix.com**

Mailing Address 6352 W Gunnison St.

City  
ChicagoState  
ILZip Code  
60630Purpose of Disbursement  
Communication

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 1 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

5.95

Transaction ID : SB17.39724

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Wix.com**

Mailing Address 6352 W Gunnison St.

City  
ChicagoState  
ILZip Code  
60630Purpose of Disbursement  
Communication

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 9 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

59.00

Transaction ID : SB17.39718

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 59 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Wix.com**

Mailing Address 6352 W Gunnison St.

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 6 |   | 2 | 0 | 2 | 5 |

City  
ChicagoState  
ILZip Code  
60630

FEC Identification Number

C

Purpose of Disbursement  
website marketing

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

43.00

Transaction ID : SB17.39739

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Wix.com**

Mailing Address 6352 W Gunnison St.

Date of Disbursement

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

City  
ChicagoState  
ILZip Code  
60630

FEC Identification Number

C

Purpose of Disbursement  
Communication

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

31.25

Transaction ID : SB17.39734

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Wix.com**

Mailing Address 6352 W Gunnison St.

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 1 |   | 2 | 0 | 2 | 5 |

City  
ChicagoState  
ILZip Code  
60630

FEC Identification Number

C

Purpose of Disbursement  
Communication

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

5.95

Transaction ID : SB17.39732

☒ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 60 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. Zoom**

Mailing Address 55 Almaden Blvd. 6th Floor

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 05  | 20  | 2025    |

City  
San JoseState  
CAZip Code  
95113Purpose of Disbursement  
Reimburse Tumia Romero for zoom meetings

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

274.57

Transaction ID : SB17.39657

☒ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. Zoom.US**Mailing Address 6601 College Blvd  
Suite 120

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 09  | 2025    |

City  
KansasState  
KSZip Code  
66211Purpose of Disbursement  
Online meeting

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

91.00

Transaction ID : SB17.39653

☒ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

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

Purpose of Disbursement

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

0.00

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

21715.46

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

PAGE 61 OF 74

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

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NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Full Name (Last, First, Middle Initial)

**A. COALITION OF BLACK TRADE UNIONISTS**

Mailing Address 545 E TOWN ST

City  
COLUMBUSState  
OHZip Code  
43215Purpose of Disbursement  
Tickets

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 2 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C C90016528

Amount of Each Disbursement this Period

300.00

Transaction ID : SB21.39771

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Proactive Youth**

Mailing Address 1228 N Menard

City  
ChicagoState  
ILZip Code  
60651Purpose of Disbursement  
Donation

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 7 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB21.39789

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                                  |
|--------------------------|-------------------|----------------------------------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

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

800.00

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

800.00

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

PAGE 62 OF 74

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.727

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

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

Election: 1984

☒ Primary☐ General☐ Other (specify) ▼

Davis, Danny K., , Mr.,

Mailing Address

5956 W. Race Avenue

City

Chicago

State

IL

ZIP Code

60644

☒ Personal Funds of the Candidate

Original Amount of Loan

4100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

4100.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
12 01 / 1983

M M / D D / Y Y Y Y

open

5.00 % (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).....▶

4100.00

**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.

## FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SC/10

Transaction ID : SC/10.727

This loan is from the candidate's personal funds at annual rate of 5% interest.

Form/Schedule:

Transaction ID:

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

PAGE 64 OF 74

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.723

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

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

Election: 1996

Davis, Danny K., , Mr.,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

5956 W. Race Avenue

City

Chicago

State

IL

ZIP Code

60644

☒ Personal Funds of the Candidate

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
01 01 / 1996

M M / D D / Y Y Y Y

open

5.00 % (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).....▶

1000.00

**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.

## FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SC/10

Transaction ID : SC/10.723

This loan is from the candidate's personal funds at annual rate of 5% interest.

Form/Schedule:

Transaction ID:

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

PAGE 66 OF 74

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.725

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

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

Election: 1996

☒ Primary☐ General☐ Other (specify) ▼

Davis, Danny K., , Mr.,

Mailing Address

5956 W. Race Avenue

City

Chicago

State

IL

ZIP Code

60644

☒ Personal Funds of the Candidate

Original Amount of Loan

950.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

950.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
01 29 / 1996

M M / D D / Y Y Y Y

open

5.00 % (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).....▶

950.00

**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.

## FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SC/10

Transaction ID : SC/10.725

This loan is from the candidate's personal funds at annual rate of 5% interest.

Form/Schedule:

Transaction ID:

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

PAGE 68 OF 74

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.448

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

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

Election: 1996

Davis, Danny K., , Mr.,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

5956 W. Race Avenue

City

Chicago

State

IL

ZIP Code

60644

☒ Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

5000.00

Balance Outstanding at Close of This Period

5000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
03 13 / 1996

M M / D D / Y Y Y Y

open

5.00 % (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).....▶

5000.00

**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.

## FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SC/10

Transaction ID : SC/10.448

This loan is from the candidate's personal funds at annual rate of 5% interest.

Form/Schedule:

Transaction ID:

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

PAGE 70 OF 74

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.37523

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

Davis, Danny K., , Mr.,

Mailing Address

5956 W. Race Avenue

City

Chicago

State

IL

ZIP Code

60644

☒ Personal Funds of the Candidate

Original Amount of Loan

45000.00

Cumulative Payment To Date

30000.00

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  
03 13 / 2024

M M / D D / Y Y Y Y

2025

2.00 % (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).....▶

26050.00

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

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 71 OF 74

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**DAVIS FOR CONGRESS/FRIENDS OF DAVIS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Davis, Danny K., , Mr.,

Nature of Debt (Purpose):

Accumulated interest at 5%

Mailing Address 5956 W. Race Avenue

City  
ChicagoState  
ILZip Code  
60644

Outstanding Balance Beginning This Period

11082.50

Transaction ID : SD10.17600

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11082.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Davis, Danny K., , Mr.,

Nature of Debt (Purpose):

Accumulated interest at 5%

Mailing Address 5956 W. Race Avenue

City  
ChicagoState  
ILZip Code  
60644

Outstanding Balance Beginning This Period

11865.21

Transaction ID : SD10.17609

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11865.21

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Gooden, John, , Mr.,

Nature of Debt (Purpose):

Mailing Address 5825 W. Chicago Ave.

City  
ChicagoState  
ILZip Code  
60651

Outstanding Balance Beginning This Period

500.00

Transaction ID : SD10.350

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

300.00

1) **SUBTOTALS** This Period This Page (optional) .....

23247.71

2) **TOTALS** This Period (last page this line number only) .....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

## FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SD10

Transaction ID : SD10.350

(Current loan amount of 200.00 from a balance of 500.00 has been forgiven)

Form/Schedule:

Transaction ID:

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 73 OF 74

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**DAVIS FOR CONGRESS/FRIENDS OF DAVIS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Gresham, Lawrence, , Mr.,

Nature of Debt (Purpose):

Political Consulting

Mailing Address 1066 Plymouth Court

City  
ChicagoState  
ILZip Code  
60605

Outstanding Balance Beginning This Period

7200.00

Transaction ID : SD10.354

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7200.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Lewis, Sharon, , Ms.,

Nature of Debt (Purpose):

Political consulting

Mailing Address 939 N. Pine St.

City  
ChicagoState  
ILZip Code  
60651

Outstanding Balance Beginning This Period

2700.00

Transaction ID : SD10.352

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2700.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Ron Lester Association

Nature of Debt (Purpose):

Polling

Mailing Address 1010 Wisconsin Ave NW

City  
WashingtonState  
DCZip Code  
20007

Outstanding Balance Beginning This Period

6500.00

Transaction ID : SD10.342

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6500.00

1) **SUBTOTALS** This Period This Page (optional) .....

16400.00

2) **TOTALS** This Period (last page this line number only) .....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

# SCHEDULE D (FEC Form 3)

## DEBTS AND OBLIGATIONS

### Excluding Loans

(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 74 OF 74

FOR LINE NUMBER:  
(check only one)

☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

TCB

Nature of Debt (Purpose):

Printing

Mailing Address 215 S.Cicero

City  
Chicago

State  
IL

Zip Code  
60644

Outstanding Balance Beginning This Period

757.00

Transaction ID : SD10.358

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

757.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) .....

757.00

2) **TOTALS** This Period (last page this line number only) .....

40404.71

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....

26050.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

66454.71