

MISCELLANEOUS ELECTRONIC SUBMISSION TO THE FEC (FEC Form 99)

NAME OF COMMITTEE (In Full)

FEC IDENTIFICATION NUMBER

MATT GRANT FOR CONGRESS

C00945394

Mailing Address 1625 MASON KNOLL RD

City

State

ZIP Code

ST. LOUIS

MO

63131

Attached please find an electronic copy of FEC Form 3 that was also filed by USPS mail. I have not yet raised the \$5,000 minimum but am submitting out of an abundance of caution.

Thanks,
Matt Grant
Candidate
314-412-9112

**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

MATT GRANT FOR CONGRESS

ADDRESS (number and street)

1625 MASON KNOWLED



Check if different than previously reported. (ACC)

ST LOUIS

MO

63131-

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C00945394

3. IS THIS REPORT

☒ NEW (N)

OR

☐ AMENDED (A)

STATE ▼ DISTRICT

MO 02

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

08 / 04 / 2026

in the State of

MO

(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

03 / 12 / 2026

through

07 / 23 / 2026

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

Type or Print Name of Treasurer

MATTHEW R GRANT

Signature of Treasurer



Date

07 / 23 / 2026

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

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Page 2

Write or Type Committee Name

MATT GANT FOR CONGRESS

Report Covering the Period:

From:

03 / 12 / 2026

To:

07 / 23 / 2026

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	513.03	513.03
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	513.03	513.03
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	3,643.25	3,643.25
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	3,643.25	3,643.25
8. Cash on Hand at Close of Reporting Period (from Line 27)	201303	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	4,843.25	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Page 3

Write or Type Committee Name

Matt Grant for Congress

Report Covering the Period:

From:

03 / 12 / 2026

To:

07 / 23 / 2026

I. RECEIPTS**COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A)

513.03

513.03

(ii) Unitemized

(iii) TOTAL of contributions

from individuals

(b) Political Party Committees

(c) Other Political Committees

(such as PACs)

(d) The Candidate

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

513.03

515.03

12. TRANSFERS FROM OTHER

AUTHORIZED COMMITTEES

13. LOANS:

(a) Made or Guaranteed by the
Candidate

5,143.25

5,143.25

(b) All Other Loans

(c) TOTAL LOANS

(add Lines 13(a) and (b))

14. OFFSETS TO OPERATING

EXPENDITURES

(Refunds, Rebates, etc.)

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

16. TOTAL RECEIPTS (add Lines

11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)

5,656.28

5,656.28

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

Page 4

II. DISBURSEMENTS**COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....

3643.25

3643.25

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES

19. LOAN REPAYMENTS:

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

(b) Of All Other Loans

(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b)).....

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACs).....(d) TOTAL CONTRIBUTION REFUNDS
(add Lines 20(a), (b), and (c)).....

21. OTHER DISBURSEMENTS

22. **TOTAL DISBURSEMENTS**

(add Lines 17, 18, 19(c), 20(d), and 21) ►

3643.25

3643.25

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

25. SUBTOTAL (add Line 23 and Line 24).....

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD
(subtract Line 26 from Line 25).....

203.03

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 / 17
OF

☒ 1a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Matt Grant for Congress

Full Name (Last, First, Middle Initial)

A. *Tinker-Grant, Mary Christine*

Mailing Address

404 Tuller Ct.

City

Wentzville

State

MO

Zip Code

63385

FEC ID number of contributing
federal political committee.

C

Name of Employer

Millipore

Occupation

Purchasing

Receipt For:

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

144.09

Date of Receipt

07 / 02 / 2026

Amount of Each Receipt this Period

144.09

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. *Dembre, Dong*

Mailing Address

14414 Foxgate Ct.

City

Flourissant

State

MO

Zip Code

63034

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

contractor

Receipt For:

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

07 / 02 / 2026

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. *Barber, Helen*

Mailing Address

1269 S. Ridgeley Dr

City

Los Angeles

State

CA

Zip Code

90019

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hurley Ave. Family Med.

Occupation

Music Practitioner

Receipt For:

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

45.00

Date of Receipt

06 / 02 / 2026

Amount of Each Receipt this Period

45.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

239.09
~~*239.09*~~

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 / 17
OF

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

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NAME OF COMMITTEE (In Full)

Matt Aug for Congress

Full Name (Last, First, Middle Initial)

Thensch, Amy

A. Mailing Address

14 Stony View Lane

City

St. Louis

State

MO

Zip Code

63146

FEC ID number of contributing federal political committee.

C

Name of Employer

retired

Occupation

retired

Receipt For:

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

05 / 31 / 2026

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Smith, Hannah

B. Mailing Address

1440 Standish Dr.

City

Marble

State

NC

Zip Code

28110

FEC ID number of contributing federal political committee.

C

Name of Employer

Hannah Collette Group

Occupation

Entrepreneur

Receipt For:

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

04 / 09 / 2026

Amount of Each Receipt this Period

52.88

☐ Memo Item

Full Name (Last, First, Middle Initial)

Beckerle, Scott

C. Mailing Address

10 Park Charles Blvd.

City

St. Peters

State

MO

Zip Code

63376

FEC ID number of contributing federal political committee.

C

Name of Employer

Dakin

Occupation

pipefitter

Receipt For:

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

04 / 09 / 2026

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)

177.88

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

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

FOR LINE NUMBER:
(check only one)

PAGE 8 / 17
OF

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

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NAME OF COMMITTEE (In Full)

Math Grant for Congress

Full Name (Last, First, Middle Initial)

Wilson, David

A. Mailing Address

805 Old Hickory Rd

City

Greenwood

State

MO

Zip Code

64034

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wilson Travel

Occupation

CEO

Receipt For:

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

05 / 06 / 2026

Amount of Each Receipt this Period

96.06

☐ Memo Item

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

/ /

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

/ /

Amount of Each Receipt this Period

☐ Memo Item

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

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

96.06

513.03

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

PAGE 9 / 17

PAGE OF

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NAME OF COMMITTEE (In Full)

MATT GRANT FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

04 / 28 / 2026

A. Missouri GOP

Mailing Address

P.O. Box 73

City

Jefferson City

State

MO

Zip Code

63101

Purpose of Disbursement

Candidate

Candidate Name

Matthew R Grant

Category/
Type

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

☒ Primary

☐ General

☐ Other (specify) ▼

State:

District:

FEC Identification Number

C00945394

Amount of Each Disbursement this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Date of Disbursement

03 / 12 / 2026

B. Namecheap, Inc

Mailing Address

4600 East Washington Street, Suite 300

City

Phoenix

State

AZ

Zip Code

85034

Purpose of Disbursement

Website

Candidate Name

Matthew R Grant

Category/
Type

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

☒ Primary

☐ General

☐ Other (specify) ▼

State:

District:

FEC Identification Number

C00945394

Amount of Each Disbursement this Period

31.14

☐ Memo Item

Full Name (Last, First, Middle Initial)

Date of Disbursement

04 / 02 / 2026

C. Walmart.com

Mailing Address

702 SW 84th Street

City

Bombayville

State

AR

Zip Code

7276-6209

Purpose of Disbursement

Campaign Checks

Candidate Name

Matthew R Grant

Category/
Type

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

☒ Primary

☐ General

☐ Other (specify) ▼

State:

District:

FEC Identification Number

C00945394

Amount of Each Disbursement this Period

19.46

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

350.60

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

MATT GRANT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MO GOP

Mailing Address

P.O. Box 73

City

Jefferson City

State

MO

Zip Code

65101

Purpose of Disbursement

Nummar Donation (water info)

Candidate Name

Matthew R Grant

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

07 ' 03 ' 2026

FEC Identification Number

C00945394

Amount of Each Disbursement this Period

300.00

☐ Memo Item

B. MO GOP

Mailing Address

P.O. Box 73

City

Jefferson City

State

MO

Zip Code

65101

Purpose of Disbursement

Nummar Donation (water info)

Candidate Name

Matthew R Grant

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

07 ' 06 ' 2026

FEC Identification Number

C00945394

Amount of Each Disbursement this Period

700.00

☐ Memo Item

C. Twilio Inc

Mailing Address

101 Spear Street, 5th Floor

City

San Francisco

State

CA

Zip Code

94105

Purpose of Disbursement

Web support

Candidate Name

Matthew R Grant

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

06 ' 20 ' 2026

FEC Identification Number

C00945394

Amount of Each Disbursement this Period

50.00

☐ Memo Item

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

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

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 11 / 17
PAGE OF

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

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NAME OF COMMITTEE (In Full)

MATTHEW R GRANT FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

06 / 20 / 2026

A. Twilio, Inc.

Mailing Address

101 Spear Street, 5th Floor

City

San Francisco

State

CA

Zip Code

94105

Purpose of Disbursement

web support

Candidate Name

Matthew R Grant

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C00945394

Amount of Each Disbursement this Period

46.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Anthropic PBC

Mailing Address

548 Market Street, RMB 90375

City

San Francisco

State

CA

Zip Code

94104

Purpose of Disbursement

Claude Credits

Candidate Name

Matthew R Grant

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

06 / 20 / 2026

FEC Identification Number

C00945394

Amount of Each Disbursement this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Twilio, Inc.

Mailing Address

101 Spear Street, 5th Floor

City

San Francisco

State

CA

Zip Code

94105

Purpose of Disbursement

web support

Candidate Name

Matthew R Grant

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

06 / 20 / 2026

FEC Identification Number

C00945394

Amount of Each Disbursement this Period

50.00

☐ Memo Item

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

136.00

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

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 17
PAGE OF

☒ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Matthew Grant for Congress

Full Name (Last, First, Middle Initial)

A. Tullio, Inc.

Mailing Address

101 Spear Street, 5th Floor

City

San Francisco

State

CA

Zip Code

94104

Purpose of Disbursement

web support

Candidate Name

Matthew R Grant

Category/
Type

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

☒ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

6/24/2026

FEC Identification Number

C00945394

Amount of Each Disbursement this Period

46.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Campaign Verify

Mailing Address

1215 31st Street NW P.O. Box 3554

City

Washington D.C.

State

D.C.

Zip Code

20007

Purpose of Disbursement

web verification of campaign

Candidate Name

Matthew R Grant

Category/
Type

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

☒ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

07/05/2026

FEC Identification Number

C00945394

Amount of Each Disbursement this Period

95.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr Sec. of State

Mailing Address

P.O. Box 778

City

Jafferson City

State

MO

Zip Code

65102

Purpose of Disbursement

Signature Law Report Voter Info

Candidate Name

Matthew R Grant

Category/
Type

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

☒ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

07/10/2026

FEC Identification Number

C00945394

Amount of Each Disbursement this Period

20.65

☐ Memo Item

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

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

161.65

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 13 / 17
PAGE OF

☒ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Matt Grant for Congress

Full Name (Last, First, Middle Initial)

Date of Disbursement

07 / 06 / 2026

A. *AGE Signs*

Mailing Address

678 Collins Rd

City

Little Hocking

State

OH

Zip Code

45742

Purpose of Disbursement

Campaign Signs

Candidate Name

Matthew R Grant

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C00945394

Amount of Each Disbursement this Period

470.00

☐ Memo Item

B. *AGE Signs*

Mailing Address

678 Collins Rd

City

Little Hocking

State

OH

Zip Code

45742

Purpose of Disbursement

Matthew R Grant Campaign Signs

Candidate Name

Matthew R. Grant

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

07 / 07 / 2026

FEC Identification Number

C00945394

Amount of Each Disbursement this Period

485.00

☐ Memo Item

C. *AGE Signs*

Mailing Address

678 Collins Rd

City

Little Hocking

State

OH

Zip Code

45742

Purpose of Disbursement

Campaign Signs

Candidate Name

Matthew R Grant

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

07 / 15 / 2026

FEC Identification Number

C00945394

Amount of Each Disbursement this Period

505.00

☐ Memo Item

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

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

1465.00

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

☒ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c 21

PAGE 14 / 17
PAGE OF

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NAME OF COMMITTEE (In Full)

Matt Grant for Congress

Full Name (Last, First, Middle Initial)

A. *AGE Signs*

Mailing Address

658 Collins Rd

City

Little Hocking

State

OH

Zip Code

45742

Purpose of Disbursement

Campaign signs

Candidate Name

Matthew R Grant

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

07 / 23 / 2026

FEC Identification Number

C00945394

Amount of Each Disbursement this Period

480.00

☐ Memo Item

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

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

480.00

~~*109325*~~

3,443.25

SCHEDULE C-1 (FEC Form 3) **LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS**

Federal Election Commission, Washington, D.C.

PAGE 15 / 17

Supplementary for
Information found on
Page ____ of Schedule C

NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER C		
LENDING INSTITUTION (LENDER) Full Name			Amount of Loan 		Interest Rate (APR) %
Mailing Address			Date Incurred or Established M M / D D / Y Y Y Y M M / D D / Y Y Y Y		
City	State	Zip Code	Date Due M M / D D / Y Y Y Y M M / D D / Y Y Y Y		

A. Has loan been restructured? ☐ No ☐ Yes If yes, date originally incurred

M M / D D / Y Y Y Y

B. If line of credit, Total Outstanding Balance:

C. Are other parties secondarily liable for the debt incurred?
☐ No ☐ Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
☐ No ☐ Yes If yes, specify: _____

What is the value of this collateral?

Does the lender have a perfected security interest in it? ☐ No ☐ Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? ☐ No ☐ Yes If yes, specify: _____

What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).
Date account established:

M M / D D / Y Y Y Y

Location of account:
Address:
City, State, Zip: _____

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER Typed Name Signature	DATE M M / D D / Y Y Y Y
--	--

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

- To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
- The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
- This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name Signature		DATE M M / D D / Y Y Y Y
Title		

SCHEDULE C (FEC Form 3)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)13a
13b

NAME OF COMMITTEE (In Full)

MATT GRANT FOR CONGRESS

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

Election:

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1625 Mason Knoll Rd

City

St Louis

State

MO

ZIP Code

63131

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

4,843.25

0.00

4,843.25

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

MM / DD / YY
04 / 01 / 2026MM / DD / YY
11 / 05 / 2026

0 % (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).....▶**TOTALS** This Period (last page in this line only).....▶

4,843.25

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 17 / 17
PAGE OFFOR LINE NUMBER:
(check only one)9
10

NAME OF COMMITTEE (In Full)

Matt Grant for Congress

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

Grant, Matthew R. Grant

Mailing Address

1625 Mason Knoll Rd

City

St. Louis

State

MO

Zip Code

63131

Nature of Debt (Purpose):

Loan from
Candidate

Outstanding Balance Beginning This Period

4,843.25

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

4,843.25

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) ▶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) ▶

4,843.25

4,843.25

4,843.25