

**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

SCHAKOWSKY FOR CONGRESS

ADDRESS (number and street)

P.O. BOX 5130



Check if different than previously reported. (ACC)

EVANSTON

IL

60204

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00327023

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

IL

09

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

D D / Y Y Y Y

01

Y Y Y Y

2025

through

M M / D D / Y Y Y Y

06

D D / Y Y Y Y

30

Y Y Y Y

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 Ronen, Carol, , ,

Signature of Treasurer

Ronen, Carol, , ,

Date

M M / D D / Y Y Y Y

07

D D / Y Y Y Y

15

Y Y Y Y

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

**SCHAKOWSKY FOR CONGRESS**

Report Covering the Period:

From:

MM / DD / YYYY  
04 / 01 / 2025

To:

MM / DD / YYYY  
06 / 30 / 2025

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	199497.00	416412.82
(b) Total Contribution Refunds (from Line 20(d)) .....	3125.00	3125.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	196372.00	413287.82
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	234783.01	443992.71
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	479.38
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	234783.01	443513.33
8. Cash on Hand at Close of Reporting Period (from Line 27).....	617032.32	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**SCHAKOWSKY FOR CONGRESS**

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).....**

130612.00

248885.16

**(ii) Unitemized .....**

44035.00

78876.66

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

174647.00

327761.82

**(b) Political Party Committees.....**

0.00

0.00

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

24850.00

88651.00

**(d) The Candidate .....**

0.00

0.00

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

199497.00

416412.82

**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

479.38

**15. OTHER RECEIPTS  
(Dividends, Interest, etc.) .....**

140.40

380.19

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

199637.40

417272.39

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	234783.01	443992.71
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	2125.00	2125.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	1000.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	3125.00	3125.00
21. OTHER DISBURSEMENTS .....	222100.00	255145.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	460008.01	702262.71

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	877402.93
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	199637.40
25. SUBTOTAL (add Line 23 and Line 24).....	1077040.33
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	460008.01
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	617032.32

**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 108

<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Abella-Austriaco, Aurora, , ,

**A.** Mailing Address 17 N. Aldine

City

Park Ridge

State

IL

Zip Code

60068

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self - Valentine, Austriaco and Buesch

Occupation

Attorney

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11AI.25708

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Alpogianis, George, , ,

**B.** Mailing Address 1000 Civic Center Drive

City

Niles

State

IL

Zip Code

60714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kappy's American Grill

Occupation

Owner

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	5		0	2		2	0	2	5

Transaction ID : SA11AI.25730

Amount of Each Receipt this Period

600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Andes, Fredric, , ,

**C.** Mailing Address One N. Wacker Drive, Suite 4400

City

Chicago

State

IL

Zip Code

60606

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Barnes &amp; Thornburg

Occupation

Partner

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		2	9		2	0	2	5

Transaction ID : SA11AI.25573

Amount of Each Receipt this Period

500.00

☐ Memo Item

Conduit: JStreetPAC

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

2100.00

**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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Armour, Nelson, , ,

**A.** Mailing Address 2020 W. Cullom Apt 1City  
ChicagoState  
ILZip Code  
60618FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.25188

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Baker, Lynne, , ,

**B.** Mailing Address 1461 W. Hollywood, #2City  
ChicagoState  
ILZip Code  
60660FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Illinois Student Assistance ProgramOccupation  
Manager Director of Communications

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  
04 24 2025

Transaction ID : SA11AI.25353

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Barliant, Lois, , ,

**C.** Mailing Address 2256 N. Lincoln Park West #2City  
ChicagoState  
ILZip Code  
60614FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employedOccupation  
Writer

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2175.00

Date of Receipt

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

Transaction ID : SA11AI.25118

Amount of Each Receipt this Period

2000.00

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

3300.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Barliant, Lois, , ,

**A.** Mailing Address 2256 N. Lincoln Park West #2City  
ChicagoState  
ILZip Code  
60614FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employedOccupation  
Writer

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 20 2025

Transaction ID : SA11AI.25513

Amount of Each Receipt this Period

25.00

☐ Memo Item  
Conduit: ActBlue

Full Name (Last, First, Middle Initial)

Barliant, Lois, , ,

**B.** Mailing Address 2256 N. Lincoln Park West #2City  
ChicagoState  
ILZip Code  
60614FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employedOccupation  
Writer

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 04 2025

Transaction ID : SA11AI.25748

Amount of Each Receipt this Period

10.00

☐ Memo Item  
Conduit: ActBlue

Full Name (Last, First, Middle Initial)

Barr, Lois, , ,

**C.** Mailing Address 5 Columbine LaneCity  
RiverwoodsState  
ILZip Code  
60015FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employedOccupation  
Writer

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  
04 03 2025

Transaction ID : SA11AI.25115

Amount of Each Receipt this Period

400.00

☐ Memo Item

435.00

**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 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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Bennett, Barry, , ,

**A.**

Mailing Address 425 Brookside Dr.

City

Wilmette

State

IL

Zip Code

60091

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Dowd Bloch Bennett Cervone Auerbach &amp;

Occupation

lawyer

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : SA11AI.25533

Amount of Each Receipt this Period

100.00

☐ Memo Item

Conduit: ActBlue

Full Name (Last, First, Middle Initial)

Berg, Judith, , ,

**B.**

Mailing Address 4300 North Marine Drive, #802

City

Chicago

State

IL

Zip Code

60613

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

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		2	9		2	0	2	5

Transaction ID : SA11AI.25484

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Berkey, David, , ,

**C.**

Mailing Address 3024 W. Logan Blvd.

City

Chicago

State

IL

Zip Code

60647

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Illinois Health Practice Alliance

Occupation

CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : SA11AI.25608

Amount of Each Receipt this Period

400.00

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

1000.00



# **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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Berman Sandler, Leatrice, , ,

**A.**

Mailing Address 859 Chalmers Place

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Leatrice H. Berman & Assoc.

Occupation

health administration/law

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 04 2025

Transaction ID : SA11AI.25723

Amount of Each Receipt this Period

1700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Blessman, Patricia, , ,

**B.**

Mailing Address 1211 S. Prairie Private #4301

City

Chicago

State

IL

Zip Code

60605

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Psychologist

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 06 2025

Transaction ID : SA11AI.25196

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Blum, Jeffrey, , ,

**C.**

Mailing Address 425 Riverside Drive, Apt. 6K

City

New York

State

NY

Zip Code

10025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 27 2025

Transaction ID : SA11AI.25561

Amount of Each Receipt this Period

75.00

☐ Memo Item

Conduit: ActBlue

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

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

3775.00

**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 10 OF 108

<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Boles, Ted, , ,

**A.**

Mailing Address 742 W. Buena Ave., Apt 1E

City

Chicago

State

IL

Zip Code

60613

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EHB3Anesthesia LLCOccupation  
Nurse Anesthesiologist

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  
04 28 2025

Transaction ID : SA11AI.25596

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Brandt, Katherine, , ,

**B.**

Mailing Address 700 7th Street SW, #716

City

Washington

State

DC

Zip Code

20024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GWUOccupation  
Instructional Assistant

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 03 2025

Transaction ID : SA11AI.25103

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Bromley, Julie, , ,

**C.**

Mailing Address 2724 Harrison

City

Glenview

State

IL

Zip Code

60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Reedy Industry Inc.Occupation  
administrator

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 20 2025

Transaction ID : SA11AI.25544

Amount of Each Receipt this Period

50.00

☐ Memo Item

Conduit: ActBlue

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

2300.00

**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 11 OF 108

<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Bucaro, Mary, , ,

**A.**

Mailing Address 2151 West Caton

City  
ChciagoState  
ILZip Code  
60647FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 22 2025

Transaction ID : SA11AI.25415

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Bucaro, Mary, , ,

**B.**

Mailing Address 2151 West Caton

City  
ChciagoState  
ILZip Code  
60647FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 22 2025

Transaction ID : SA11AI.25416

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Budzinski, Nikki, , ,

**C.**

Mailing Address P.O. Box 5171

City  
SpringfieldState  
ILZip Code  
62705FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Member of Congress

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  
04 24 2025

Transaction ID : SA11AI.25470

Amount of Each Receipt this Period

400.00

☐ 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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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Canty, Mary Beth, , ,

**A.** Mailing Address 612 East Euclid

City

Arlington Heights

State

IL

Zip Code

60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Litchfield Cavo LLP

Occupation  
Attorney

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  
05 05 2025

Transaction ID : SA11AI.25696

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Carroll, Lucas, , ,

**B.** Mailing Address 534 W. Stratford Place, 4E

City

Chicago

State

IL

Zip Code

60657

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Windfall Strategies

Occupation  
Fundraising Consultant

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 30 2025

Transaction ID : SA11AI.25577

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Cassidy, Kelly, , ,

**C.** Mailing Address 7366 N. Ashland

City

Chicago

State

IL

Zip Code

60626

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

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 16 2025

Transaction ID : SA11AI.25294

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)..... ▶

1750.00

**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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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Chandy, Cyriac, , ,

**A.** Mailing Address 1036 Alexandra Court

City

Northbrook

State

IL

Zip Code

60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
St. Marys PetroleumOccupation  
President

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 17 2025

Transaction ID : SA11AI.25255

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Clabaugh, Anna, , ,

**B.** Mailing Address 203 N. LaSalle Steet

City

Chicago

State

IL

Zip Code

60601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Chicago SchoolOccupation  
Alumni Relations

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 29 2025

Transaction ID : SA11AI.25621

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Clayton, Fay, , ,

**C.** Mailing Address 999 Michigan Ave., Apartment 2C

City

Evanston

State

IL

Zip Code

60202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

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 22 2025

Transaction ID : SA11AI.25414

Amount of Each Receipt this Period

400.00

☐ 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)

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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Cohen, Wendy, , ,

**A.** Mailing Address 2650 N. Lakeview #1702City  
ChicagoState  
ILZip Code  
60614FEC ID number of contributing  
federal political committee.

C

Name of Employer  
IL Attorney General's OfficeOccupation  
Senior Policy Advisor

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		0	3		2	0	2	5

Transaction ID : SA11AI.25100

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Collins, Maryclaire, , ,

**B.** Mailing Address 16421 Timber LaneCity  
New BuffaloState  
MIZip Code  
49117FEC ID number of contributing  
federal political committee.

C

Name of Employer  
selfOccupation  
writer

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11AI.25235

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Cotton, Andrea, , ,

**C.** Mailing Address 1124 Rago AveCity  
DeerfieldState  
ILZip Code  
60015FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
dentist

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

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

Transaction ID : SA11AI.25689

Amount of Each Receipt this Period

350.00

☐ Memo Item

1600.00

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

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

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for each category of the  
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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Currie, Barbara Flynn, , ,

**A.**

Mailing Address 5650 S. Harper Ave.

City

Chicago

State

IL

Zip Code

60637

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State of Illinois

Occupation

Retired State Representative

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : SA11AI.25133

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Daniels, Robert, , ,

**B.**

Mailing Address 365 Elder Ln.

City

Winnetka

State

IL

Zip Code

60093

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Chicago Children's Clinic

Occupation

Child Psychologist

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 20 2025

Transaction ID : SA11AI.25547

Amount of Each Receipt this Period

50.00

☐ Memo Item

Conduit: ActBlue

Full Name (Last, First, Middle Initial)

Daniels, Robert, , ,

**C.**

Mailing Address 365 Elder Ln.

City

Winnetka

State

IL

Zip Code

60093

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Chicago Children's Clinic

Occupation

Child Psychologist

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 27 2025

Transaction ID : SA11AI.25529

Amount of Each Receipt this Period

100.00

☐ Memo Item

Conduit: ActBlue

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

2150.00

**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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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Davis, Rochelle, , ,

**A.**

Mailing Address 2308 Park Place

City

Evanston

State

IL

Zip Code

60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Healthy Schools Campaign

Occupation

President and CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : SA11AI.25130

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Doubet-King, Randall, , ,

**B.**

Mailing Address 5555 North Sheridan Road #1511

City

Chicago

State

IL

Zip Code

60640

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : SA11AI.25398

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Dunung, Sanjyot, P., ,

**C.**

Mailing Address 609 Forest Edge Lane

City

Des Plaines

State

IL

Zip Code

60016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AGKM

Occupation

Professional

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : SA11AI.25242

Amount of Each Receipt this Period

400.00

☐ 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  
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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
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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Dyen, Mark, , ,

**A.**

Mailing Address 132 Church St.

City

Newton

State

MA

Zip Code

02458

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Conservation Services Group

Occupation

Manager

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  
05 04 2025

Transaction ID : SA11AI.25746

Amount of Each Receipt this Period

100.00

☐ Memo Item

Conduit: ActBlue

Full Name (Last, First, Middle Initial)

Engel, Barbara, , ,

**B.**

Mailing Address 5413 S. Blackstone Avenue

City

Chicago

State

IL

Zip Code

60615

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Community Activist

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  
04 10 2025

Transaction ID : SA11AI.25191

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Fine, Laura, , ,

**C.**

Mailing Address 1700 Constitution Drive

City

Glenview

State

IL

Zip Code

60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State of IL

Occupation

State Rep.

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  
04 18 2025

Transaction ID : SA11AI.25233

Amount of Each Receipt this Period

1000.00

☐ Memo Item

1600.00

**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  
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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Fischer, Sunny, , ,

**A.**

Mailing Address 1114 Mulford St.

City

Evanston

State

IL

Zip Code

60202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

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

Transaction ID : SA11AI.25146

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Fishman, Esther, , ,

**B.**

Mailing Address 1800 W Grace , Apt 603

City

Chicago

State

IL

Zip Code

60657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

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 / 20 / 2025

Transaction ID : SA11AI.25449

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Forman, Linda, , ,

**C.**

Mailing Address 9241 N. Drake Avenue

City

Evanston

State

IL

Zip Code

60203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Accountant

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 17 / 2025

Transaction ID : SA11AI.25256

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

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

2600.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Freeman, Judy, , ,

**A.**

Mailing Address 937 Sherman Ave.

City

Evanston

State

IL

Zip Code

60202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Gabriel Environmental Services, Inc.

Occupation

environmental management

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1800.00

Date of Receipt

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

Transaction ID : SA11AI.25226

Amount of Each Receipt this Period

1800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Futorian, Aviva, , ,

**B.**

Mailing Address 2440 N. Lakeview Avenue

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Attorney

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : SA11AI.25655

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Gabel, Robyn, , ,

**C.**

Mailing Address 905 Forest Avenue, Apt. 1N

City

Evanston

State

IL

Zip Code

60202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State of Illinois

Occupation

State Representative

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11AI.25135

Amount of Each Receipt this Period

1000.00

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

3200.00

**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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Gallagher, Mary, , ,

**A.** Mailing Address 2421 W. Ardmore Avenue #2City  
ChicagoState  
ILZip Code  
60659FEC ID number of contributing  
federal political committee.

C

Name of Employer  
City of ChicagoOccupation  
Project Administrator

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11AI.25408

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Garb, Eslyn, , ,

**B.** Mailing Address 6801 N. KnoxCity  
LincolnwoodState  
ILZip Code  
60712FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wexford HealthcareOccupation  
Psychiatrist

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : SA11AI.25159

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Gill, Gerald, , ,

**C.** Mailing Address 5109 EagleridgeCity  
springfieldState  
ILZip Code  
62711FEC 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 ▼

222.00

Date of Receipt

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

Transaction ID : SA11AI.25762

Amount of Each Receipt this Period

222.00

☐ Memo Item

Conduit: ActBlue

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

1622.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Goczkowski, Jan, , ,

**A.**

Mailing Address 163 Fletcher Drive

City

Des Plaines

State

IL

Zip Code

60016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Century 21 Langos &amp; Christian

Occupation

Real Estate Broker

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : SA11AI.25695

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Gordon, Brad, , ,

**B.**

Mailing Address 2920 N. Commonwealth Avenue

City

Chicago

State

IL

Zip Code

60657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MAF Companies

Occupation

Insurance

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		1	8		2	0	2	5

Transaction ID : SA11AI.25473

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Grasse, Nicole, , ,

**C.**

Mailing Address PO Box 94

City

Mount Prospect

State

IL

Zip Code

60056

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State

Occupation

State Rep

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : SA11AI.25694

Amount of Each Receipt this Period

1000.00

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

1900.00

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

Use separate schedule(s)  
for each category of the  
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Hanley, Patrick, , ,

**A.**

Mailing Address 589 Lincoln Avenue

City

Winnetka

State

IL

Zip Code

60093

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Piglet in Bed

Occupation

Consultant

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : SA11AI.25193

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Hardin, Ben, , ,

**B.**

Mailing Address 70 E Lake Street

City

Chicago

State

IL

Zip Code

60601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DPI

Occupation

ED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : SA11AI.25119

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Hone, Matrina, , ,

**C.**

Mailing Address 400 E. Ohio Street, Apt. 901

City

Chicago

State

IL

Zip Code

60611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CHICAT

Occupation

ED

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 16 2025

Transaction ID : SA11AI.25291

Amount of Each Receipt this Period

400.00

☐ Memo Item

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

4400.00

**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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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Howse, Patricia, , ,

**A.**

Mailing Address 1732 South Indiana

City

Chicago

State

IL

Zip Code

60616

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Homemaker

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  
04 / 23 / 2025

Transaction ID : SA11AI.25347

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

Howse, Patricia, , ,

**B.**

Mailing Address 1732 South Indiana

City

Chicago

State

IL

Zip Code

60616

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Homemaker

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 04 / 2025

Transaction ID : SA11AI.25724

Amount of Each Receipt this Period

600.00



Memo Item

Full Name (Last, First, Middle Initial)

Hull, Carlton, , ,

**C.**

Mailing Address 8101 S. Harvard Avenue

City

Chicago

State

IL

Zip Code

60620

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HL Consulting

Occupation

Pol Consultant/Retired

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 23 / 2025

Transaction ID : SA11AI.25350

Amount of Each Receipt this Period

200.00



Memo Item

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

1800.00

**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:  
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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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Huynh, Hoan, , ,

**A.**

Mailing Address 5027 N. Broadway

City

Chicago

State

IL

Zip Code

60640

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State of IL

Occupation

State Rep

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	5		0	1		2	0	2	5

Transaction ID : SA11AI.25677

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Izenstark, Kristin, , ,

**B.**

Mailing Address 1341 Williamsburg Drive

City

Northbrook

State

IL

Zip Code

60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

none

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	2	5

Transaction ID : SA11AI.25288

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Johns, Frances, , ,

**C.**

Mailing Address 3400 N. Lake Shore Drive #4D

City

Chicago

State

IL

Zip Code

60657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self employed

Occupation

Brand and Strategy Consultant

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : SA11AI.25104

Amount of Each Receipt this Period

3500.00

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

4400.00

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



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

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

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Jones, Patricia, , ,

**A.**

Mailing Address 2044 North Ave

City

Waukegan

State

IL

Zip Code

60087

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.25136

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Kahan, Donna, , ,

**B.**

Mailing Address 100 N. Lake Shore Dr. #32B

City

Chicago

State

IL

Zip Code

60611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Jewish United Fund of Metropolitan Chi

Occupation  
Fundraiser

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 07 2025

Transaction ID : SA11AI.25195

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Kang, Ning, , ,

**C.**

Mailing Address 100 W. Erie Street

City

Chicago

State

IL

Zip Code

60654

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Chinese Consulate Chicago

Occupation  
Diplomat

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

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

Transaction ID : SA11AI.25702

Amount of Each Receipt this Period

600.00

☐ Memo Item

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

1100.00

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

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

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Kavoosi, Michelle, , ,

**A.** Mailing Address 2426 Lincolnwood Drive

City  
Evanston

State  
IL

Zip Code  
60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Loyola U

Occupation  
Profesor of Law

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 18 2025

Transaction ID : SA11AI.25228

Amount of Each Receipt this Period

350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Kendall, Jackie, , ,

**B.** Mailing Address 1353 Coneflower

City  
Grayslake

State  
IL

Zip Code  
60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 09 2025

Transaction ID : SA11AI.25165

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Kramer, Andrea, , ,

**C.** Mailing Address 1832 West Race Ave.

City  
Chicago

State  
IL

Zip Code  
60622

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ASKramer Law LLC

Occupation  
Attorney

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 17 2025

Transaction ID : SA11AI.25281

Amount of Each Receipt this Period

2000.00

☐ Memo Item

2750.00

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

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

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

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Kraus, Anne, , ,

**A.**

Mailing Address 5055 Madison St. 610

City  
Skokie

State  
IL

Zip Code  
60077

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 20 2025

Transaction ID : SA11AI.25511

Amount of Each Receipt this Period

25.00

☐ Memo Item

Conduit: ActBlue

Full Name (Last, First, Middle Initial)

Kraus, Anne, , ,

**B.**

Mailing Address 5055 Madison St. 610

City  
Skokie

State  
IL

Zip Code  
60077

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 04 2025

Transaction ID : SA11AI.25750

Amount of Each Receipt this Period

25.00

☐ Memo Item

Conduit: ActBlue

Full Name (Last, First, Middle Initial)

Kurisinkal, Litcy, , ,

**C.**

Mailing Address 419 Grant Place, Unit A

City  
Chicago

State  
IL

Zip Code  
60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 17 2025

Transaction ID : SA11AI.25341

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

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

2050.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Kurisinkal, Litcy, , ,

**A.** Mailing Address 419 Grant Place, Unit ACity  
ChicagoState  
ILZip Code  
60614FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 18 2025

Transaction ID : SA11AI.25342

Amount of Each Receipt this Period

- 1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Kurisinkal, Litcy, , ,

**B.** Mailing Address 419 Grant Place, Unit ACity  
ChicagoState  
ILZip Code  
60614FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

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 Y  
04 21 2025

Transaction ID : SA11AI.25430

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Lampkin, Bertina, , ,

**C.** Mailing Address 3200 N. Lake Shore Drive, Apt. 230City  
ChicagoState  
ILZip Code  
60657FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

State of IL

Judge

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 03 2025

Transaction ID : SA11AI.25101

Amount of Each Receipt this Period

200.00

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

- 600.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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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
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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Lane, Bruce, , ,

**A.**

Mailing Address 860 Colleen Drive

City

Cary

State

IL

Zip Code

60013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired school admin

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11AI.25106

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Lee, Francine, , ,

**B.**

Mailing Address 1238 Prairie Orchid Lane

City

Grayslake

State

IL

Zip Code

60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.25328

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Levin, Fay, Hartog, ,

**C.**

Mailing Address 240 Locust Road

City

Winnetka

State

IL

Zip Code

60093

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

retired

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : SA11AI.25209

Amount of Each Receipt this Period

3500.00

☐ Memo Item

4800.00

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

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

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for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Lofthouse, Patricia, , ,

**A.**

Mailing Address 611 Cedar Street

City

Park Ridge

State

IL

Zip Code

60068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
School District #308

Occupation  
Teacher & Librarian

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 30 2025

Transaction ID : SA11AI.25581

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Mack, Jackie, , ,

**B.**

Mailing Address 2015 Orrington Avenue

City

Evanston

State

IL

Zip Code

60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sotheby's International Realty

Occupation  
realtor

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 18 2025

Transaction ID : SA11AI.25254

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Manaa-Hoppenworth, Leni, , ,

**C.**

Mailing Address 5315 N. Clark St., PO Box 198

City

Chicago

State

IL

Zip Code

60640

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
City of Chicago

Occupation  
Alderman

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  
05 02 2025

Transaction ID : SA11AI.25673

Amount of Each Receipt this Period

400.00

☐ 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

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(check only one)

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mangrola, Harendra, , ,

**A.**

Mailing Address 9727 Keeler Avenue

City  
Skokie

State  
IL

Zip Code  
60076

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sumit Construction Co, Inc.

Occupation  
VP

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 16 2025

Transaction ID : SA11AI.25289

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Marco, John, , ,

**B.**

Mailing Address 9525 Central Park

City  
Evanston

State  
IL

Zip Code  
60203

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 16 2025

Transaction ID : SA11AI.25295

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

McIntyre, Andrea, , ,

**C.**

Mailing Address 233 S Wacker 22nd Floor

City  
Chicago

State  
IL

Zip Code  
60606

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
tressler soderstorm mahoney

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 16 2025

Transaction ID : SA11AI.25344

Amount of Each Receipt this Period

300.00

☐ 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:  
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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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Melman, Martha, W, ,

**A.** Mailing Address 20 Locust RoadCity  
WinnetkaState  
ILZip Code  
60093FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employedOccupation  
Homemaker

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  
04 11 2025

Transaction ID : SA11AI.25143

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Melman, Martha, W, ,

**B.** Mailing Address 20 Locust RoadCity  
WinnetkaState  
ILZip Code  
60093FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employedOccupation  
Homemaker

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 20 2025

Transaction ID : SA11AI.25506

Amount of Each Receipt this Period

100.00

☐ Memo Item

Conduit: ActBlue

Full Name (Last, First, Middle Initial)

Mendoza, Stephanie, , ,

**C.** Mailing Address 1806 Lake Street, Apt. 1City  
EvanstonState  
ILZip Code  
60201FEC ID number of contributing  
federal political committee.

C

Name of Employer  
City of EvanstonOccupation  
Clerk

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 22 2025

Transaction ID : SA11AI.25412

Amount of Each Receipt this Period

2000.00

☐ Memo Item

2600.00

**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)  
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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Merritt, Catherine, , ,

**A.**

Mailing Address 3028 Park Place

City

Evanston

State

IL

Zip Code

60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Spool

Occupation

CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : SA11AI.25238

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Mitzen, Phyllis, , ,

**B.**

Mailing Address 200 E. Delaware Place #29A

City

Chicago

State

IL

Zip Code

60611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2400.00

Date of Receipt

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

Transaction ID : SA11AI.25479

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Moran, Catherine, , ,

**C.**

Mailing Address 4132 N. Harvard Avenue

City

Arlington Heights

State

IL

Zip Code

60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SAP

Occupation

Global Software Consultant

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : SA11AI.25450

Amount of Each Receipt this Period

3500.00

☐ Memo Item

4300.00

**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  
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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Morse, Gail, H, ,

**A.**

Mailing Address 3739 N. Wilton Ave. #2

City

Chicago

State

IL

Zip Code

60613

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Jenner & Block

Occupation

Attorney

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 02 2025

Transaction ID : SA11AI.25731

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Murphy, Laura, , ,

**B.**

Mailing Address 901 E. Villa Drive

City

Des Plaines

State

IL

Zip Code

60016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State of Illinois

Occupation

28th district State Senate

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  
05 01 2025

Transaction ID : SA11AI.25651

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Newberger, Tamar, , ,

**C.**

Mailing Address 2550 N. Lakeview Avenue Apt. S2206

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Computer Scientist

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 04 2025

Transaction ID : SA11AI.25709

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

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

5000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Nieuwsma, Jonathan, , ,

**A.** Mailing Address 1408 Dempster StreetCity  
EvanstonState  
ILZip Code  
60202FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Engineer

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  
04 26 2025

Transaction ID : SA11AI.25615

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Nulph, Kelsey, , ,

**B.** Mailing Address 200 North JeffersonCity  
ChicagoState  
ILZip Code  
60661FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pod 3 StrategiesOccupation  
Senior Advisor

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  
04 23 2025

Transaction ID : SA11AI.25382

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

O'Malley, Catherine, , ,

**C.** Mailing Address 11828 S. Brookside DriveCity  
Palos ParkState  
ILZip Code  
60464FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KO StrategiesOccupation  
Executive Director

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  
04 27 2025

Transaction ID : SA11AI.25609

Amount of Each Receipt this Period

400.00

☐ 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  
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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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Oppenheimer, Susan, , ,

**A.**

Mailing Address 1501 North State Parkway #11B

City

Chicago

State

IL

Zip Code

60610

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Organization Consultant

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : SA11AI.25132

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Partridge, Ellen, , ,

**B.**

Mailing Address 3100 N. Sheridan Rd.,

City

Chicago

State

IL

Zip Code

60657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Shared Use Mobility Center

Occupation

Director

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : SA11AI.25218

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Peck, Kerry, , ,

**C.**

Mailing Address 321 S. Plymouth Court, 6th Floor

City

Chicago

State

IL

Zip Code

60604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Attorney

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : SA11AI.25477

Amount of Each Receipt this Period

3500.00

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

9000.00

**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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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Perlman, Judith, , ,

**A.**

Mailing Address 430 Clavey Lane

City

Highland Park

State

IL

Zip Code

60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

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

Transaction ID : SA11AI.25504

Amount of Each Receipt this Period

25.00

☐ Memo Item

Conduit: ActBlue

Full Name (Last, First, Middle Initial)

Perlman, Judith, , ,

**B.**

Mailing Address 430 Clavey Lane

City

Highland Park

State

IL

Zip Code

60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 20 2025

Transaction ID : SA11AI.25556

Amount of Each Receipt this Period

25.00

☐ Memo Item

Conduit: ActBlue

Full Name (Last, First, Middle Initial)

Pouw, Leah, , ,

**C.**

Mailing Address 6839 N. Wildwood Avenue

City

Chicago

State

IL

Zip Code

60646

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Uofl

Occupation

Research

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

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

Transaction ID : SA11AI.25336

Amount of Each Receipt this Period

800.00

☐ Memo Item

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

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

850.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Preston, Louella, , ,

**A.**

Mailing Address 9267 N. Maryland St.

City

Niles

State

IL

Zip Code

60714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

485.00

Date of Receipt

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

Transaction ID : SA11AI.25539

Amount of Each Receipt this Period

10.00

☐ Memo Item

Conduit: ActBlue

Full Name (Last, First, Middle Initial)

Quraishi, Sima, , ,

**B.**

Mailing Address 2828 West Devon

City

Chicago

State

IL

Zip Code

60659

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Muslim Women Resource Center

Occupation

Ed

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 30 2025

Transaction ID : SA11AI.25578

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Raoul, Kwame, , ,

**C.**

Mailing Address P.O. Box 10600

City

Chicago

State

IL

Zip Code

60610

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State of IL

Occupation

Attorney General

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 25 2025

Transaction ID : SA11AI.25467

Amount of Each Receipt this Period

600.00

☐ Memo Item

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

1010.00

**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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<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Ratner, Hedy, , ,

**A.**

Mailing Address 530 N. Lake Shore Dr., Apt. 1501

City  
ChicagoState  
ILZip Code  
60611FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Women's Business Development CenterOccupation  
President Emeritus

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11AI.25208

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Robinson, Timothy, , ,

**B.**

Mailing Address 750 9th Street NW, Suite 501

City  
WashingtonState  
DCZip Code  
20001FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tiber Creek GroupOccupation  
Consultant

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

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

Transaction ID : SA11AI.25487

Amount of Each Receipt this Period

75.00

☐ Memo Item

Conduit: ActBlue

Full Name (Last, First, Middle Initial)

Robinson, Timothy, , ,

**C.**

Mailing Address 750 9th Street NW, Suite 501

City  
WashingtonState  
DCZip Code  
20001FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tiber Creek GroupOccupation  
Consultant

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	5		0	4		2	0	2	5

Transaction ID : SA11AI.25735

Amount of Each Receipt this Period

75.00

☐ Memo Item

Conduit: ActBlue

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

1150.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Rorke, Alex, , ,

**A.** Mailing Address 2107 N. Magnolia, #3CCity  
ChicagoState  
ILZip Code  
60614FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

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  
04 17 2025

Transaction ID : SA11AI.25261

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Rosenberg, Emily, , ,

**B.** Mailing Address 1725 West Arthur AveCity  
ChicagoState  
ILZip Code  
60626FEC ID number of contributing  
federal political committee.

C

Name of Employer

DePaul University

Occupation  
Teacher

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 06 2025

Transaction ID : SA11AI.25491

Amount of Each Receipt this Period

30.00

☐ Memo Item

Conduit: ActBlue

Full Name (Last, First, Middle Initial)

Rosenberg, Emily, , ,

**C.** Mailing Address 1725 West Arthur AveCity  
ChicagoState  
ILZip Code  
60626FEC ID number of contributing  
federal political committee.

C

Name of Employer

DePaul University

Occupation  
Teacher

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 20 2025

Transaction ID : SA11AI.25551

Amount of Each Receipt this Period

25.00

☐ Memo Item

Conduit: ActBlue

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

555.00



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

Use separate schedule(s)  
for each category of the  
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Rosenberg, Emily, , ,

**A.**

Mailing Address 1725 West Arthur Ave

City

Chicago

State

IL

Zip Code

60626

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DePaul University

Occupation

Teacher

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 27 2025

Transaction ID : SA11AI.25531

Amount of Each Receipt this Period

30.00

☐ Memo Item

Conduit: ActBlue

Full Name (Last, First, Middle Initial)

Rosenberg, Emily, , ,

**B.**

Mailing Address 1725 West Arthur Ave

City

Chicago

State

IL

Zip Code

60626

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DePaul University

Occupation

Teacher

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 04 2025

Transaction ID : SA11AI.25741

Amount of Each Receipt this Period

25.00

☐ Memo Item

Conduit: ActBlue

Full Name (Last, First, Middle Initial)

Rosenberg, Gillian, , ,

**C.**

Mailing Address 4531 N. Lawndale

City

Chicago

State

IL

Zip Code

60625

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wildfire Contact

Occupation

Director

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 04 2025

Transaction ID : SA11AI.25662

Amount of Each Receipt this Period

1600.00

☐ Memo Item

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

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

1655.00

**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)

**SCHAKOWSKY FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) Rothman, Gregory, , ,			Date of Receipt M M / D D / Y Y Y Y Y 04 / 08 / 2025	
Mailing Address 542 W. Deming Place			Transaction ID : SA11AI.25175	
City Chicago	State IL	Zip Code 60614	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer Namtor		Occupation Consultant		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Saddler, Michelle, R., ,			Date of Receipt M M / D D / Y Y Y Y Y 04 / 18 / 2025	
Mailing Address 101 Euclid Avenue, Unit 1			Transaction ID : SA11AI.25224	
City Oak Park	State IL	Zip Code 60301	Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer Kittelman and Associates		Occupation Managing Director and Principal		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 400.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Saltzman, Bettylu, K., ,			Date of Receipt M M / D D / Y Y Y Y Y 04 / 21 / 2025	
Mailing Address 415 E. North Water Street #W605-6			Transaction ID : SA11AI.25437	
City Chicago	State IL	Zip Code 60611	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer Retired		Occupation Retired		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00		
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			3400.00	
<b>TOTAL</b> This Period (last page this line number only)..... ▶				

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Samuels, Jon, , ,

**A.**

Mailing Address 2014 Lincoln Street

City

Evanston

State

IL

Zip Code

60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Vistria Group

Occupation

Lobbyist/ Investor

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 01 2025

Transaction ID : SA11AI.25688

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Sargon, Atour, , ,

**B.**

Mailing Address 6716 North Nokomis Avenue

City

Lincolnwood

State

IL

Zip Code

60712

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Village of Lincolnwood, Cook County

Occupation

Trustee, 13th Dist Dep Director

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  
04 06 2025

Transaction ID : SA11AI.25201

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Sargon, Atour, , ,

**C.**

Mailing Address P.O. Box 46309

City

Chicago

State

IL

Zip Code

60646

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Village on Lincolnwood

Occupation

Trustee

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  
04 06 2025

Transaction ID : SA11AI.25204

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

5500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Schramm, Sabine, , ,

**A.** Mailing Address 6335 N. Greenview AveCity  
ChicagoState  
ILZip Code  
60660FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 27 2025

Transaction ID : SA11AI.25564

Amount of Each Receipt this Period

10.00

☐ Memo Item  
Conduit: ActBlue

Full Name (Last, First, Middle Initial)

Sekhar, Chandra, , ,

**B.** Mailing Address 1335 South Prairie Ave #1605City  
ChicagoState  
ILZip Code  
60605FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 18 2025

Transaction ID : SA11AI.25220

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Sekhar, Mridu, , ,

**C.** Mailing Address 1335 South Prairie, #1650City  
ChicagoState  
ILZip Code  
60605FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 18 2025

Transaction ID : SA11AI.25221

Amount of Each Receipt this Period

3500.00

☐ Memo Item

7010.00

**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  
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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
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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Seman, Dave, , ,

**A.** Mailing Address 1404 N. Mohawk, #3City  
ChicagoState  
ILZip Code  
60610FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Paladin Political GroupOccupation  
Consultant

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : SA11AI.25213

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Shah, Smita, , ,

**B.** Mailing Address 311 South Wacker #3200City  
ChicagoState  
ILZip Code  
60606FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SPAAN Technology, Inc.Occupation  
President

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	5		0	1		2	0	2	5

Transaction ID : SA11AI.25652

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Shapiro, Joan, , ,

**C.** Mailing Address 5614 S. DorchesterCity  
ChicagoState  
ILZip Code  
60637FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Seer AnalyticsOccupation  
Consultant/Entrepreneur

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : SA11AI.25137

Amount of Each Receipt this Period

2000.00

☐ Memo Item

3900.00

**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  
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Shore, Debra, , ,

**A.**

Mailing Address 9232 Avers Avenue

City

Evanston

State

IL

Zip Code

60203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EPA

Occupation

Regional Administrator

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  
04 29 2025

Transaction ID : SA11AI.25587

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Siegel, Catherine, , ,

**B.**

Mailing Address 442 W. Wellington Avenue #12 West

City

Chicago

State

IL

Zip Code

60657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Social Worker

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 21 2025

Transaction ID : SA11AI.25426

Amount of Each Receipt this Period

600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Sievers, Carolyn, , ,

**C.**

Mailing Address 104 Lakewood Drive

City

Greenville

State

NC

Zip Code

27834

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

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 05 2025

Transaction ID : SA11AI.25211

Amount of Each Receipt this Period

400.00

☐ Memo Item

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

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

2000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Silver, Mary, , ,

**A.** Mailing Address 425 W. Arlington PlaceCity  
ChicagoState  
ILZip Code  
60614FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : SA11AI.25575

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Simmons, Adele, , ,

**B.** Mailing Address 2440 N. Lakeview #15ACity  
ChicagoState  
ILZip Code  
60614FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : SA11AI.25440

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Sindelar, Alan, H, ,

**C.** Mailing Address 9055 N. Grace AvenueCity  
NilesState  
ILZip Code  
60714FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.25139

Amount of Each Receipt this Period

200.00

☐ Memo Item

4200.00

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

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

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Smith, Leo, , ,

**A.**

Mailing Address 5348 N. Lakewood

City

Chicago

State

IL

Zip Code

60640

FEC ID number of contributing  
federal political committee.

C

Name of Employer

IL Birth to Five PAC

Occupation

PAC Director/Attorney

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 14 2025

Transaction ID : SA11AI.25321

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Smith-Canegan, Yvonne, , ,

**B.**

Mailing Address 7824 Nursery Drive

City

Gurnee

State

IL

Zip Code

60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cengan Associates Consulting

Occupation

Lifestyle coach and consultant

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 17 2025

Transaction ID : SA11AI.25259

Amount of Each Receipt this Period

350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Sorensen, Christian, , ,

**C.**

Mailing Address 1027 Maple Avenue

City

Evanston

State

IL

Zip Code

60202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Metropolitan Water Reclamation Distric

Occupation

Administrative Assistant

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : SA11AI.25352

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

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

5850.00



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

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Steans, Heather, , ,

**A.**

Mailing Address 5348 N. Lakewood Ave.

City  
Chicago

State  
IL

Zip Code  
60640

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 14 2025

Transaction ID : SA11AI.25320

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Stigler, Elizabeth, , ,

**B.**

Mailing Address 303 E. Wacker, Suite 315

City  
Chicago

State  
IL

Zip Code  
60601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lincoln Road Enterprises

Occupation  
COS

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 18 2025

Transaction ID : SA11AI.25246

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Sylvester, Joanne, , ,

**C.**

Mailing Address 1508 Estes Avenue

City  
Chicago

State  
IL

Zip Code  
60626

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.25153

Amount of Each Receipt this Period

200.00

☐ Memo Item

4100.00

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

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

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

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Tchen, Christina, , ,

**A.**

Mailing Address 5444 N. Magnolia

City  
ChicagoState  
ILZip Code  
60640FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Time's UpOccupation  
CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : SA11AI.25407

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Terry, Syd, , ,

**B.**

Mailing Address 1339 E Street SE, Apt. 330

City  
WashingtonState  
DCZip Code  
20003FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BGR GroupOccupation  
Lobbyist

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : SA11AI.25665

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Thotakura, Anusha, , ,

**C.**

Mailing Address 2229 S. Halsted Street

City  
ChicagoState  
ILZip Code  
60608FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Citizen Action/ILOccupation  
ED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.25704

Amount of Each Receipt this Period

300.00

☐ Memo Item

5800.00

**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  
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FOR LINE NUMBER:  
(check only one)

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Vernon, Michael, , ,

**A.**

Mailing Address 2136 W. Webster

City

Chicago

State

IL

Zip Code

60647

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State of Illinois

Occupation

Attorney

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 18 2025

Transaction ID : SA11AI.25225

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Vieregg, Mary, , ,

**B.**

Mailing Address 2500 N. Lakeview Ave., #1205

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

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  
04 18 2025

Transaction ID : SA11AI.25231

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Wasserman, Laurie, , ,

**C.**

Mailing Address 8836 Kolmar Avenue

City

Skokie

State

IL

Zip Code

60076

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 21 2025

Transaction ID : SA11AI.25476

Amount of Each Receipt this Period

400.00

☐ Memo Item

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

2800.00

**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

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(check only one)

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Whitlock, Phyllis Kay, , ,

**A.**

Mailing Address 3470 North Lake Shore Drive Apt. 7

City  
Chicago

State  
IL

Zip Code  
60657

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Christopher Burke Engineering Ltd.

Occupation  
engineer

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 08 2025

Transaction ID : SA11AI.25180

Amount of Each Receipt this Period

350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Wilson, Bonnie, , ,

**B.**

Mailing Address 525 Grove Street Apt. 2A

City  
Evanston

State  
IL

Zip Code  
60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Koenig & Strey

Occupation  
Real Estate Agent

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 29 2025

Transaction ID : SA11AI.25478

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Winer, Susan, , ,

**C.**

Mailing Address 1572 Maple Ave., Apt 504

City  
Evanston

State  
IL

Zip Code  
60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Strategic Philanthropy, Ltd.

Occupation  
COO/Principal

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 26 2025

Transaction ID : SA11AI.25616

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

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

2550.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Wright, Tim, , ,

**A.** Mailing Address 1351 E. Hyde Park Blvd.City  
ChicagoState  
ILZip Code  
60615FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cook CountyOccupation  
Judge

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		02		2025

Transaction ID : SA11AI.25120

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Yohnka, Edwin, , ,

**B.** Mailing Address 720 North Larrabee, #1010City  
ChicagoState  
ILZip Code  
60654FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ACLUOccupation  
DIRECTOR OF COMMUNICATIONS

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		25		2025

Transaction ID : SA11AI.25361

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.** Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

800.00

130612.00

**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)  
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ACTBLUE

**A.**

Mailing Address P.O. BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing  
federal political committee.

**C** C00714725

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 06 2025

**Transaction ID : SA11C.25640**

Amount of Each Receipt this Period

325.00

☒ Memo Item

Total Transmitted by Conduit on this Date

Full Name (Last, First, Middle Initial)

ACTBLUE

**B.**

Mailing Address P.O. BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing  
federal political committee.

**C** C00714725

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

Date of Receipt

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

**Transaction ID : SA11C.25641**

Amount of Each Receipt this Period

195.00

☒ Memo Item

Total Transmitted by Conduit on this Date

Full Name (Last, First, Middle Initial)

ACTBLUE

**C.**

Mailing Address P.O. BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing  
federal political committee.

**C** C00714725

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 20 2025

**Transaction ID : SA11C.25642**

Amount of Each Receipt this Period

794.00

☒ Memo Item

Total Transmitted by Conduit on this Date

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

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

0.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ACTBLUE

**A.**

Mailing Address P.O. BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing  
federal political committee.**C** C00714725

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID : SA11C.25643

Amount of Each Receipt this Period

508.00

☒ Memo Item

Total Transmitted by Conduit on this Date

Full Name (Last, First, Middle Initial)

ACTBLUE

**B.**

Mailing Address P.O. BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing  
federal political committee.**C** C00714725

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID : SA11C.25837

Amount of Each Receipt this Period

781.00

☒ Memo Item

Total Transmitted by Conduit on this Date

Full Name (Last, First, Middle Initial)

AMERICAN ACADEMY OF PHYSICIAN ASSOCIATES POLITICAL ACTION COMMITTEE (PA PAC)

**C.**

Mailing Address 2318 MILL ROAD SUITE 1300

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.**C** C00122499

Name of Employer

Occupation

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼

General

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID : SA11C.25626

Amount of Each Receipt this Period

2500.00

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

2500.00
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**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN CHIROPRACTIC ASSOCIATION POLITICAL ACTION COMMITTEE****A.**

Mailing Address 1701 CLARENDON BLVD. SUITE #200

City

ARLINGTON

State

VA

Zip Code

22209

FEC ID number of contributing  
federal political committee.**C** C00102764

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11C.25623

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN COLLEGE OF NURSE-MIDWIVES MIDWIVES-PAC****B.**

Mailing Address 8403 COLESVILLE ROAD SUITE 1230

City

SILVER SPRING

State

MD

Zip Code

20910

FEC ID number of contributing  
federal political committee.**C** C00358812

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11C.25766

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**American Speech-Language-Hearing Association PAC****C.**

Mailing Address 2200 Research Boulevard

City

Rockville

State

MD

Zip Code

20850

FEC ID number of contributing  
federal political committee.**C** C00210666

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11C.25624

Amount of Each Receipt this Period

1000.00

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

3000.00



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

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Barnes & Thornburg Political Action Committee

Mailing Address 11 South Meridian Street

City

Indianapolis

State

IN

Zip Code

46204

FEC ID number of contributing  
federal political committee.

C C00395947

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 01 2025

Transaction ID : SA11C.25764

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DENTONS US LLP PAC

Mailing Address 1301 K STREET NW SUITE 600 EAST

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C C00216127

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 03 2025

Transaction ID : SA11C.25622

Amount of Each Receipt this Period

1750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ELECT DEMOCRATIC WOMEN

Mailing Address 600 PENNSYLVANIA AVE SE  
#15180

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C C00685297

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 07 2025

Transaction ID : SA11C.25771

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

4250.00

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

Use separate schedule(s)  
for each category of the  
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Illinois Democratic Women

**A.**

Mailing Address 7706 Brookhaven Avenue

City

Darien

State

IL

Zip Code

60561

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 17 2025

Transaction ID : SA11C.25629

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Illinois Political Active Letter Carriers

**B.**

Mailing Address 15319 Woodmar

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 01 2025

Transaction ID : SA11C.25765

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LOCAL 881 UNITED FOOD AND COMMERCIAL WORKERS POLITICAL ACTION FUND

**C.**

Mailing Address 1350 E TOUHY AVE SUITE 300E

City

DES PLAINES

State

IL

Zip Code

60018

FEC ID number of contributing  
federal political committee.

C C00590471

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 15 2025

Transaction ID : SA11C.25627

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

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

3600.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE****A.**

Mailing Address 430 NORTH MICHIGAN AVENUE

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 ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 09 / 2025

Transaction ID : SA11C.25625

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

**NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION POLITICAL ACTION COMMITTEE**Mailing Address 1201 PENNSYLVANIA AVENUE, NW  
12TH FLOOR

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.**C** C00113811

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : SA11C.25768

Amount of Each Receipt this Period

3500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

**NORTHERN TRUST CORPORATION POLITICAL ACTION COMMITTEE (NORTHERN TRUST PAC)**

Mailing Address 50 SOUTH LASALLE STREET - M-9

City

CHICAGO

State

IL

Zip Code

60603

FEC ID number of contributing  
federal political committee.**C** C00024935

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : SA11C.25767

Amount of Each Receipt this Period

2000.00

☐ Memo Item

6500.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 60 OF 108

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

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**PROGRESSIVE TURNOUT PROJECT****A.**

Mailing Address PO BOX 4029

City  
CHICAGOState  
ILZip Code  
60654FEC ID number of contributing  
federal political committee.**C** C00580068

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	4		2	4		2	0	2	5

Transaction ID : SA11C.25646

Amount of Each Receipt this Period

5000.00

☐ Memo Item**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**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)..... ▶

5000.00

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

24850.00

# **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 61 OF 108

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

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Franklin Templeton

**A.**

Mailing Address PO Box 33030

City

St. Petersburg

State

FL

Zip Code

33733

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

266.45

Date of Receipt

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

Transaction ID : SA15.25099

Amount of Each Receipt this Period

42.32

☐ Memo Item  
Interest

Full Name (Last, First, Middle Initial)

Franklin Templeton

**B.**

Mailing Address PO Box 33030

City

St. Petersburg

State

FL

Zip Code

33733

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

310.69

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 02 2025

Transaction ID : SA15.25772

Amount of Each Receipt this Period

44.24

☐ Memo Item  
Interest

Full Name (Last, First, Middle Initial)

Franklin Templeton

**C.**

Mailing Address PO Box 33030

City

St. Petersburg

State

FL

Zip Code

33733

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

354.97

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 04 2025

Transaction ID : SA15.25838

Amount of Each Receipt this Period

44.28

☐ Memo Item  
Interest

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

130.84

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

130.84

**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 62 OF 108

<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer Street

City  
SomervilleState  
MAZip Code  
02144Purpose of Disbursement  
Credit Card Processing Fees

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
0	4		0	6		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

12.40

Transaction ID : SB17.25630

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer Street

City  
SomervilleState  
MAZip Code  
02144Purpose of Disbursement  
Credit Card Processing Fees

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
0	4		1	3		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

7.75

Transaction ID : SB17.25631

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 366 Summer Street

City  
SomervilleState  
MAZip Code  
02144Purpose of Disbursement  
Credit Card Processing Fees

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
0	4		2	0		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

31.50

Transaction ID : SB17.25632

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

51.65

**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 63 OF 108

<input checked="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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		27		2025

City  
SomervilleState  
MAZip Code  
02144

FEC Identification Number

**C**Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

20.13

Transaction ID : SB17.25633

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		04		2025

City  
SomervilleState  
MAZip Code  
02144

FEC Identification Number

**C**Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

30.97

Transaction ID : SB17.25774

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 100 N. Northwest Pt. Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2025

City  
Elk Grove VillageState  
ILZip Code  
60007

FEC Identification Number

**C**Purpose of Disbursement  
Payroll Taxes

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2393.05

Transaction ID : SB17.25088

☐ Memo Item

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:

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

2444.15

**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 64 OF 108

<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 100 N. Northwest Pt. Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		18		2025

City  
Elk Grove VillageState  
ILZip Code  
60007

FEC Identification Number

C

Purpose of Disbursement  
Payroll Processing Fees

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

160.38

Transaction ID : SB17.25089

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 100 N. Northwest Pt. Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		29		2025

City  
Elk Grove VillageState  
ILZip Code  
60007

FEC Identification Number

C

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3312.54

Transaction ID : SB17.25090

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 100 N. Northwest Pt. Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		02		2025

City  
Elk Grove VillageState  
ILZip Code  
60007

FEC Identification Number

C

Purpose of Disbursement  
Payroll Processing Fees

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

160.38

Transaction ID : SB17.25778

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

3633.30

**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 65 OF 108

<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 100 N. Northwest Pt. Road

Date of Disbursement

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

City  
Elk Grove VillageState  
ILZip Code  
60007Purpose of Disbursement  
Payroll Taxes

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2531.50

Transaction ID : SB17.25779

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 100 N. Northwest Pt. Road

Date of Disbursement

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

City  
Elk Grove VillageState  
ILZip Code  
60007Purpose of Disbursement  
Payroll Processing Fees

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

160.38

Transaction ID : SB17.25834

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 100 N. Northwest Pt. Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		29		2025

City  
Elk Grove VillageState  
ILZip Code  
60007Purpose of Disbursement  
Payroll Taxes

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3312.53

Transaction ID : SB17.25835

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

6004.41

**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 66 OF 108

<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 100 N. Northwest Pt. Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2025

City  
Elk Grove VillageState  
ILZip Code  
60007

FEC Identification Number

**C**Purpose of Disbursement  
Payroll Processing Fees

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

160.38

Transaction ID : SB17.25836

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 100 N. Northwest Pt. Road

Date of Disbursement

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

City  
Elk Grove VillageState  
ILZip Code  
60007

FEC Identification Number

**C**Purpose of Disbursement  
Payroll Taxes

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2393.05

Transaction ID : SB17.25843

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 100 N. Northwest Pt. Road

Date of Disbursement

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

City  
Elk Grove VillageState  
ILZip Code  
60007

FEC Identification Number

**C**Purpose of Disbursement  
Payroll Processing Fees

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

160.38

Transaction ID : SB17.25844

☐ Memo Item

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:

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

2713.81

**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 67 OF 108

<input checked="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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 100 N. Northwest Pt. Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		27		2025

City  
Elk Grove VillageState  
ILZip Code  
60007

FEC Identification Number

**C**Purpose of Disbursement  
Payroll Taxes

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3312.54

Transaction ID : SB17.25877

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**B. Ahead of Our Time Publishing**

Mailing Address 70 S. Fox Mill Lane

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		18		2025

City  
SpringfieldState  
ILZip Code  
62712

FEC Identification Number

**C**Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.25883

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**C. AT&T Mobility**

Mailing Address 208 Akard Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		22		2025

City  
DallasState  
TXZip Code  
75202

FEC Identification Number

**C**Purpose of Disbursement  
Cell Phones

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

282.17

Transaction ID : SB17.25084

☐ Memo Item

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:

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

4094.71

**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 68 OF 108

<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AT&T Mobility**

Mailing Address 208 Akard Street

City  
DallasState  
TXZip Code  
75202Purpose of Disbursement  
Cell Phones

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

282.17

Transaction ID : SB17.25819

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AT&T Mobility**

Mailing Address 208 Akard Street

City  
DallasState  
TXZip Code  
75202Purpose of Disbursement  
Cell Phones

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

282.17

Transaction ID : SB17.25876

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Authorize.net**

Mailing Address 915 S. 500 East #200

City  
American ForkState  
UTZip Code  
84003Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

144.85

Transaction ID : SB17.25087

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

709.19

**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 69 OF 108

<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Authorize.net**

Mailing Address 915 S. 500 East #200

City  
American ForkState  
UTZip Code  
84003Purpose of Disbursement  
Credit Card Processing Fees

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
0	5		0	9		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

244.85

Transaction ID : SB17.25782

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Authorize.net**

Mailing Address 915 S. 500 East #200

City  
American ForkState  
UTZip Code  
84003Purpose of Disbursement  
Credit Card Processing Fees

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
0	6		1	0		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

144.85

Transaction ID : SB17.25842

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Black Ensemble Theatre**

Mailing Address 4520 Beacon

City  
ChicagoState  
ILZip Code  
60640Purpose of Disbursement  
Event Entertainment

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
0	5		1	3		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.25799

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

1389.70

**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 70 OF 108

<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Blue Cross Blue Shield of IL**

Mailing Address PO Box 1364

City  
ChicagoState  
ILZip Code  
60690Purpose of Disbursement  
Insurance

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		17		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

35.73

Transaction ID : SB17.25083

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Blue Cross Blue Shield of IL**

Mailing Address PO Box 1364

City  
ChicagoState  
ILZip Code  
60690Purpose of Disbursement  
Insurance

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4171.49

Transaction ID : SB17.25085

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Blue Cross Blue Shield of IL**

Mailing Address PO Box 1364

City  
ChicagoState  
ILZip Code  
60690Purpose of Disbursement  
Insurance

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

35.73

Transaction ID : SB17.25820

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

4242.95

**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 71 OF 108

<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Blue Cross Blue Shield of IL**

Mailing Address PO Box 1364

City  
ChicagoState  
ILZip Code  
60690Purpose of Disbursement  
Insurance

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:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

4171.49

Transaction ID : SB17.25822

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Blue Cross Blue Shield of IL**

Mailing Address PO Box 1364

City  
ChicagoState  
ILZip Code  
60690Purpose of Disbursement  
Insurance

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:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

35.73

Transaction ID : SB17.25822

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Blue Cross Blue Shield of IL**

Mailing Address PO Box 1364

City  
ChicagoState  
ILZip Code  
60690Purpose of Disbursement  
Insurance

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:

Category/  
Type

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

4171.49

Transaction ID : SB17.25943

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

8378.71

**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 72 OF 108

<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Chase Card Services**

Mailing Address PO Box 53084

City  
AtlantaState  
GAZip Code  
30353Purpose of Disbursement  
Itemized Transactions Below

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
0	4		1	5		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

4074.30

Transaction ID : SB17.25065

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Expedia**

Mailing Address 1111 Expedia Group Way West

City  
SeattleState  
WAZip Code  
98119Purpose of Disbursement  
Travel Expenses

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
0	4		1	5		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

302.41

Transaction ID : SB17.25065.0

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address 233 S. Wacker Drive

City  
ChicagoState  
ILZip Code  
60606Purpose of Disbursement  
Travel Expenses

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
0	4		1	5		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

714.93

Transaction ID : SB17.25065.1

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

4074.30

**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)

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<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AOL**

Mailing Address 770 Broadway

City  
New YorkState  
NYZip Code  
10013Purpose of Disbursement  
Internet Access

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

33.67

Transaction ID : SB17.25065.3

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Lucille's**

Mailing Address 15 E St NW

City  
WashingtonState  
DCZip Code  
20001Purpose of Disbursement  
Catering

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

1809.00

Transaction ID : SB17.25065.4

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Zoom**

Mailing Address 55 Almaden Blvd., 6th Floor

City  
San JoseState  
CAZip Code  
95113Purpose of Disbursement  
Videoconferencing

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

143.91

Transaction ID : SB17.25065.8

☒ 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 74 OF 108

<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Corner Bakery**

Mailing Address 529 14th Street NW

City  
WashingtonState  
DCZip Code  
20045Purpose of Disbursement  
Food & Beverage

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
0	4		1	5		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

308.33

Transaction ID : SB17.25065.9

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Chase Card Services**

Mailing Address PO Box 53084

City  
AtlantaState  
GAZip Code  
30353Purpose of Disbursement  
Itemized Transactions Below

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
0	5		1	4		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

1446.60

Transaction ID : SB17.25801

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Lucky Platter**

Mailing Address 514 Main Street

City  
EvanstonState  
ILZip Code  
60202Purpose of Disbursement  
Food & Beverage

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
0	5		1	4		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

133.61

Transaction ID : SB17.25801.1

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

1446.60

**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 75 OF 108

<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Lady Gregory's Irish Restaurant**

Mailing Address 5260 N. Clark Street

City  
ChicagoState  
ILZip Code  
60640Purpose of Disbursement  
Food & Beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

228.19

Transaction ID : SB17.25801.3

☒ Memo Item**B. American Airlines**

Mailing Address 4255 Amon Carter Boulevard

City  
Fort WorthState  
TXZip Code  
76155Purpose of Disbursement  
Travel Expenses

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

225.48

Transaction ID : SB17.25801.6

☒ Memo Item**C. Delta Air Lines Inc.**

Mailing Address PO Box 20706

City  
AtlantaState  
GAZip Code  
30320Purpose of Disbursement  
Travel Expenses

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

273.48

Transaction ID : SB17.25801.7

☒ 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 76 OF 108

<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AOL**

Mailing Address 770 Broadway

City  
New YorkState  
NYZip Code  
10013Purpose of Disbursement  
Internet Access

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

33.67

Transaction ID : SB17.25801.8

☒ Memo Item**B. Zoom**

Mailing Address 55 Almaden Blvd., 6th Floor

City  
San JoseState  
CAZip Code  
95113Purpose of Disbursement  
Videoconferencing

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

143.91

Transaction ID : SB17.25801.9

☒ Memo Item**C. SIS LLC**

Mailing Address 3700 Crestwood Pkwy NW #1050

City  
DuluthState  
GAZip Code  
30096Purpose of Disbursement  
Research

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.25801.12

☒ 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 77 OF 108

<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Chase Card Services**

Mailing Address PO Box 53084

City  
AtlantaState  
GAZip Code  
30353Purpose of Disbursement  
Itemized Transactions Below

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:

Category/  
Type

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

3488.71

Transaction ID : SB17.25845

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Lizzie McNeill's Irish Pub**

Mailing Address 400 N McClurg Ct

City  
ChicagoState  
ILZip Code  
60611Purpose of Disbursement  
Food & Beverage

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:

Category/  
Type

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

646.76

Transaction ID : SB17.25845.1

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Access Living of Metro Chicago**

Mailing Address 115 W. Chicago Ave.

City  
ChicagoState  
ILZip Code  
60654Purpose of Disbursement  
Event Sponsorship

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:

Category/  
Type

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

258.04

Transaction ID : SB17.25845.3

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

3488.71

**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)

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<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Carey Limousine**

Mailing Address 4530 Wisconsin Ave NW

City  
WashingtonState  
DCZip Code  
20016Purpose of Disbursement  
Travel Expenses

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
0	6		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

364.78

Transaction ID : SB17.25845.5

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Federal Express**

Mailing Address 3690 Hacks Cross Road

City  
MemphisState  
TNZip Code  
38125Purpose of Disbursement  
Shipping

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
0	6		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

118.21

Transaction ID : SB17.25845.6

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Sheraton Grand Chicago**

Mailing Address 301 E North Water St

City  
ChicagoState  
ILZip Code  
60611Purpose of Disbursement  
Parking

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
0	6		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

25.12

Transaction ID : SB17.25845.7

☒ 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)

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<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AOL**

Mailing Address 770 Broadway

City  
New YorkState  
NYZip Code  
10013Purpose of Disbursement  
Internet Access

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
0	6		2	3		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

33.80

Transaction ID : SB17.25845.13

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jewel Osco**

Mailing Address 2550 N. Clybourn Avenue

City  
ChicagoState  
ILZip Code  
60614Purpose of Disbursement  
Office Supplies

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
0	6		2	3		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

290.37

Transaction ID : SB17.25845.14

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. SIS LLC**

Mailing Address 3700 Crestwood Pkwy NW #1050

City  
DuluthState  
GAZip Code  
30096Purpose of Disbursement  
Research

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
0	6		2	3		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.25845.19

☒ 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)

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<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Oyamel**

Mailing Address 401 7th St NW

City  
WashingtonState  
DCZip Code  
20004Purpose of Disbursement  
Food & Beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

492.70

Transaction ID : SB17.25845.21

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Talay Thai**

Mailing Address 406 First Street SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Food & Beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

270.76

Transaction ID : SB17.25845.22

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Chicago Gay Men's Chorus**

Mailing Address 5756 N Ridge Ave #1

City  
ChicagoState  
ILZip Code  
60660Purpose of Disbursement  
Event Entertainment

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		02		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

1250.00

Transaction ID : SB17.25786

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

1250.00

**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)

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<input checked="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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Democratic Party of Evanston**

Mailing Address 826 N. Custer

City  
EvanstonState  
ILZip Code  
60201Purpose of Disbursement  
Office Rent

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
0	6		2	5		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

1200.00

Transaction ID : SB17.25941

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Efficiency Reporting**

Mailing Address P.O. Box 134

City  
WheatonState  
ILZip Code  
60187Purpose of Disbursement  
Event Services

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
0	5		1	3		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

525.00

Transaction ID : SB17.25798

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Gersten, Sarah**

Mailing Address 4050 Emerson

City  
SkokieState  
ILZip Code  
60076Purpose of Disbursement  
Parking Reimbursement

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
0	4		0	9		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

9.50

Transaction ID : SB17.25061

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

1734.50

**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)

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<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Gersten, Sarah**

Mailing Address 4050 Emerson

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2025

City  
SkokieState  
ILZip Code  
60076

FEC Identification Number

**C**Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2530.57

Transaction ID : SB17.25094

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**B. Gersten, Sarah**

Mailing Address 4050 Emerson

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		30		2025

City  
SkokieState  
ILZip Code  
60076

FEC Identification Number

**C**Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3448.34

Transaction ID : SB17.25091

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**C. Gersten, Sarah**

Mailing Address 4050 Emerson

Date of Disbursement

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

City  
SkokieState  
ILZip Code  
60076

FEC Identification Number

**C**Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2530.56

Transaction ID : SB17.25827

☐ Memo Item

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:

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

8509.47

**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)

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<input checked="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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Gersten, Sarah**

Mailing Address 4050 Emerson

Date of Disbursement

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

City  
SkokieState  
ILZip Code  
60076

FEC Identification Number

**C**Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3448.36

Transaction ID : SB17.25831

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**B. Gersten, Sarah**

Mailing Address 4050 Emerson

Date of Disbursement

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

City  
SkokieState  
ILZip Code  
60076

FEC Identification Number

**C**Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2530.56

Transaction ID : SB17.25948

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**C. Gersten, Sarah**

Mailing Address 4050 Emerson

Date of Disbursement

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

City  
SkokieState  
ILZip Code  
60076

FEC Identification Number

**C**Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3448.35

Transaction ID : SB17.25945

☐ Memo Item

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:

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

9427.27

**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)

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<input checked="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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Glenview Chamber of Commerce**

Mailing Address 2320 Glenview Road

City  
GlenviewState  
ILZip Code  
60025Purpose of Disbursement  
Dues

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
0	4		1	7		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

305.00

Transaction ID : SB17.25082

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Goczowski, Andrew, , ,**

Mailing Address 560 Webford Avenue

City  
Des PlainesState  
ILZip Code  
60016Purpose of Disbursement  
Event Staffing

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
0	5		1	2		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.25795

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Head, Benjamin**

Mailing Address 2300 N. Lincoln Park West #701

City  
ChicagoState  
ILZip Code  
60614Purpose of Disbursement  
Reimbursement - Cell Phone & Mileage

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
0	4		1	5		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

617.29

Transaction ID : SB17.25064

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

1922.29

**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)

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<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Head, Benjamin**

Mailing Address 2300 N. Lincoln Park West #701

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2025

City  
ChicagoState  
ILZip Code  
60614Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

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:

FEC Identification Number

**C**

Amount of Each Disbursement this Period

2356.06

Transaction ID : SB17.25095

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Head, Benjamin**

Mailing Address 2300 N. Lincoln Park West #701

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		30		2025

City  
ChicagoState  
ILZip Code  
60614Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

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:

FEC Identification Number

**C**

Amount of Each Disbursement this Period

2930.09

Transaction ID : SB17.25092

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Head, Benjamin**

Mailing Address 2300 N. Lincoln Park West #701

Date of Disbursement

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

City  
ChicagoState  
ILZip Code  
60614Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

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:

FEC Identification Number

**C**

Amount of Each Disbursement this Period

2356.05

Transaction ID : SB17.25828

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

7642.20

**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 87 OF 108

<input checked="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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. La Prairie, Dean**

Mailing Address 5432 N. Bernard

City  
ChicagoState  
ILZip Code  
60625Purpose of Disbursement  
Photographic Services

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
0	5		1	2		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

515.86

Transaction ID : SB17.25793

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. McNeil, Jack**

Mailing Address 4410 5th Avenue

City  
MolineState  
ILZip Code  
61265Purpose of Disbursement  
Salary

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
0	4		1	5		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

218.50

Transaction ID : SB17.25096

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. McNeil, Jack**

Mailing Address 4410 5th Avenue

City  
MolineState  
ILZip Code  
61265Purpose of Disbursement  
Salary

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
0	5		1	5		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

625.07

Transaction ID : SB17.25829

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

1359.43

**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 88 OF 108

<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. McNeil, Jack**

Mailing Address 4410 5th Avenue

City  
MolineState  
ILZip Code  
61265Purpose of Disbursement  
Salary

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
0	6		1	3		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

218.50

Transaction ID : SB17.25950

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. New Blue Interactive LLC**

Mailing Address 1146 19th Street NW #750

City  
WashingtonState  
DCZip Code  
20036Purpose of Disbursement  
Fundraising Consulting

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
0	4		0	2		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

3500.00

Transaction ID : SB17.25058

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. New Blue Interactive LLC**

Mailing Address 1146 19th Street NW #750

City  
WashingtonState  
DCZip Code  
20036Purpose of Disbursement  
Fundraising Consulting

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
0	5		0	2		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

3500.00

Transaction ID : SB17.25785

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

7218.50

**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 89 OF 108

<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Numero**

Mailing Address 200 Spectrum Center Drive Suite 30

Date of Disbursement

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

City  
IrvineState  
CAZip Code  
92618

FEC Identification Number

**C**Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

466.55

Transaction ID : SB17.25634

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**B. Numero**

Mailing Address 200 Spectrum Center Drive Suite 30

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2025

City  
IrvineState  
CAZip Code  
92618

FEC Identification Number

**C**Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

834.75

Transaction ID : SB17.25635

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**C. Numero**

Mailing Address 200 Spectrum Center Drive Suite 30

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		21		2025

City  
IrvineState  
CAZip Code  
92618

FEC Identification Number

**C**Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1012.48

Transaction ID : SB17.25636

☐ Memo Item

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:

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

2313.78

**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 90 OF 108

<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Numero**

Mailing Address 200 Spectrum Center Drive Suite 30

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		28		2025

City  
IrvineState  
CAZip Code  
92618

FEC Identification Number

**C**Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

992.64

Transaction ID : SB17.25637

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**B. Numero**

Mailing Address 200 Spectrum Center Drive Suite 30

Date of Disbursement

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

City  
IrvineState  
CAZip Code  
92618

FEC Identification Number

**C**Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

682.50

Transaction ID : SB17.25775

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**C. Numero**

Mailing Address 200 Spectrum Center Drive Suite 30

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2025

City  
IrvineState  
CAZip Code  
92618

FEC Identification Number

**C**Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

427.88

Transaction ID : SB17.25776

☐ Memo Item

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:

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

2103.02

**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)

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<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Polpress Inc.**

Mailing Address 5566 N. Northwest Highway

City  
ChicagoState  
ILZip Code  
60630Purpose of Disbursement  
Printing

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

965.00

Transaction ID : SB17.25794

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Q Street Compliance**

Mailing Address PO Box 40293

City  
WashingtonState  
DCZip Code  
20016Purpose of Disbursement  
Financial Compliance Consulting

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1228.00

Transaction ID : SB17.25789

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RCN**

Mailing Address 650 College Road East Suite 3100

City  
PrincetonState  
NJZip Code  
08540Purpose of Disbursement  
Internet Access

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

143.62

Transaction ID : SB17.25060

☐ Memo Item

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

2336.62

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 92 OF 108

<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RCN**

Mailing Address 650 College Road East Suite 3100

Date of Disbursement

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

City  
PrincetonState  
NJZip Code  
08540

FEC Identification Number

C

Purpose of Disbursement  
Internet Access

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

143.62

Transaction ID : SB17.25791

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. RCN**

Mailing Address 650 College Road East Suite 3100

Date of Disbursement

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

City  
PrincetonState  
NJZip Code  
08540

FEC Identification Number

C

Purpose of Disbursement  
Internet Access

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

143.62

Transaction ID : SB17.25880

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. Sheraton Grand Chicago**

Mailing Address 301 E North Water St

Date of Disbursement

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

City  
ChicagoState  
ILZip Code  
60611

FEC Identification Number

C

Purpose of Disbursement  
Event Space Rental & Catering

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

19250.00

Transaction ID : SB17.25059

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

19537.24

**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 93 OF 108

<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Sheraton Grand Chicago**

Mailing Address 301 E North Water St

City  
ChicagoState  
ILZip Code  
60611Purpose of Disbursement  
Event Space Rental & Catering

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
0	5		0	1		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

107148.28

Transaction ID : SB17.25783

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Sheraton Grand Chicago**

Mailing Address 301 E North Water St

City  
ChicagoState  
ILZip Code  
60611Purpose of Disbursement  
Event Space Rental & Catering

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
0	5		1	9		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

4511.73

Transaction ID : SB17.25818

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Tuite, Jacque**

Mailing Address 2212 W. Palmer

City  
ChicagoState  
ILZip Code  
60647Purpose of Disbursement  
Salary

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
0	4		1	5		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

645.14

Transaction ID : SB17.25097

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

112305.15

**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 94 OF 108

<input checked="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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Tuite, Jacque**

Mailing Address 2212 W. Palmer

Date of Disbursement

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

City  
ChicagoState  
ILZip Code  
60647

FEC Identification Number

**C**Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

645.14

Transaction ID : SB17.25093

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**B. Tuite, Jacque**

Mailing Address 2212 W. Palmer

Date of Disbursement

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

City  
ChicagoState  
ILZip Code  
60647

FEC Identification Number

**C**Purpose of Disbursement  
Fundraising Expenses

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

292.18

Transaction ID : SB17.25792

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**C. Tuite, Jacque**

Mailing Address 2212 W. Palmer

Date of Disbursement

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

City  
ChicagoState  
ILZip Code  
60647

FEC Identification Number

**C**Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

645.14

Transaction ID : SB17.25830

☐ Memo Item

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:

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

1582.46

**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)

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<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Tuite, Jacque**

Mailing Address 2212 W. Palmer

Date of Disbursement

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

City  
ChicagoState  
ILZip Code  
60647

FEC Identification Number

**C**Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

645.14

Transaction ID : SB17.25833

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**B. Tuite, Jacque**

Mailing Address 2212 W. Palmer

Date of Disbursement

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

City  
ChicagoState  
ILZip Code  
60647

FEC Identification Number

**C**Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

645.14

Transaction ID : SB17.25951

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**C. Tuite, Jacque**

Mailing Address 2212 W. Palmer

Date of Disbursement

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

City  
ChicagoState  
ILZip Code  
60647

FEC Identification Number

**C**Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

645.14

Transaction ID : SB17.25947

☐ Memo Item

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:

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

1935.42

**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)

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<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WorldPay**

Mailing Address 8500 Governors Hill Drive

Date of Disbursement

M M	D D	Y Y Y Y
04	08	2025

City  
CincinnatiState  
OHZip Code  
45249Purpose of Disbursement  
Credit Card Processing Fees

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

508.74

Transaction ID : SB17.25086

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. WorldPay**

Mailing Address 8500 Governors Hill Drive

Date of Disbursement

M M	D D	Y Y Y Y
05	08	2025

City  
CincinnatiState  
OHZip Code  
45249Purpose of Disbursement  
Credit Card Processing Fees

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

1620.34

Transaction ID : SB17.25781

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. WorldPay**

Mailing Address 8500 Governors Hill Drive

Date of Disbursement

M M	D D	Y Y Y Y
06	10	2025

City  
CincinnatiState  
OHZip Code  
45249Purpose of Disbursement  
Credit Card Processing Fees

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

199.25

Transaction ID : SB17.25841

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

2328.33

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

234394.10



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

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

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Alpogianis, George, , ,**

Mailing Address 1000 Civic Center Drive

City  
NilesState  
ILZip Code  
60714Purpose of Disbursement  
Contribution Refund

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	5		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

600.00

Transaction ID : SB20A.25878

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Dolan, Patrick, , ,**

Mailing Address 1331 Marylnad Ave. SW, Apt. 237

City  
WashingtonState  
DCZip Code  
20024Purpose of Disbursement  
Contribution Refund

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

500.00

Transaction ID : SB20A.25826

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Walker, Mark, , ,**

Mailing Address 1310 W. Northwest Hwy.

City  
Arlington HeightsState  
ILZip Code  
60004Purpose of Disbursement  
Contribution Refund

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		3	0		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB20A.25649

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

2100.00

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

2100.00

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

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<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 checked="" type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ELECT DEMOCRATIC WOMEN**Mailing Address 600 PENNSYLVANIA AVE SE  
#15180City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
Contribution Refund

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** C00685297

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB20C.25797

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

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

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).....▶

1000.00

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

1000.00

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

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<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ADAM GRAY FOR CONGRESS**

Mailing Address 400 CAPITOL MALL, SUITE 2400

City  
SACRAMENTOState  
CAZip Code  
95814Purpose of Disbursement  
ContributionCandidate Name  
GRAY, ADAM C., , ,Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 13

Date of Disbursement

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

FEC Identification Number

**C** C00801431

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.25903

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Chase Card Services**

Mailing Address PO Box 53084

City  
AtlantaState  
GAZip Code  
30353Purpose of Disbursement  
Itemized Transactions Below

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

250.00

Transaction ID : SB21.25803

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ACLU**

Mailing Address 150 N. Michigan Ave., Ste. 600

City  
ChicagoState  
ILZip Code  
60601Purpose of Disbursement  
Donation

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

250.00

Transaction ID : SB21.25803.0

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

2250.00

**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)

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<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. DAVE MIN FOR CONGRESS**

Mailing Address PO BOX 5959

City  
IRVINEState  
CAZip Code  
92616Purpose of Disbursement  
ContributionCandidate Name  
MIN, DAVE, , ,Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 47

Date of Disbursement

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

FEC Identification Number

**C** C00831537

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.25909

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DCCC**

Mailing Address 430 S. Capitol Street SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Unlimited Transfer

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C** C00000935

Amount of Each Disbursement this Period

175000.00

Transaction ID : SB21.25884

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DEREK TRAN FOR CONGRESS**

Mailing Address 10441 STANFORD AVENUE, #395

City  
GARDEN GROVEState  
CAZip Code  
92842Purpose of Disbursement  
ContributionCandidate Name  
TRAN, DEREK, , ,Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 45

Date of Disbursement

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

FEC Identification Number

**C** C00851790

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.25907

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

179000.00

**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)

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<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. DON DAVIS FOR NC**

Mailing Address PO BOX 511

Date of Disbursement

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

City  
SNOW HILLState  
NCZip Code  
28580

FEC Identification Number

**C** C00795211Purpose of Disbursement  
ContributionCandidate Name  
DAVIS, DON, , ,Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.25916

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC

District: 01

Full Name (Last, First, Middle Initial)

**B. EMILIA SYKES FOR CONGRESS**

Mailing Address P.O. BOX 1347

Date of Disbursement

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

City  
AKRONState  
OHZip Code  
44309

FEC Identification Number

**C** C00801274Purpose of Disbursement  
ContributionCandidate Name  
SYKES, EMILIA, , ,Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.25934

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH

District: 13

Full Name (Last, First, Middle Initial)

**C. Friends for Donna Miller**

Mailing Address 20340 Joy Lane

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		21		2025

City  
LynwoodState  
ILZip Code  
60411

FEC Identification Number

**C**Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

250.00

Transaction ID : SB21.25821

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

4250.00

**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)

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<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF JAHANA HAYES**

Mailing Address PO BOX 1487

Date of Disbursement

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

City  
WATERBURYState  
CTZip Code  
06721

FEC Identification Number

**C** C00677898Purpose of Disbursement  
ContributionCandidate Name  
HAYES, JAHANA, , ,Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.25911

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CT

District: 05

Full Name (Last, First, Middle Initial)

**B. GABE VASQUEZ FOR CONGRESS**

Mailing Address DRAWER L

Date of Disbursement

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

City  
MESILLAState  
NMZip Code  
88046

FEC Identification Number

**C** C00789404Purpose of Disbursement  
ContributionCandidate Name  
VASQUEZ, GABRIEL, , ,Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.25919

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NM

District: 02

Full Name (Last, First, Middle Initial)

**C. GEORGE WHITESIDES FOR CONGRESS**

Mailing Address P.O. BOX 221776

Date of Disbursement

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

City  
NEWHALLState  
CAZip Code  
91322

FEC Identification Number

**C** C00834028Purpose of Disbursement  
ContributionCandidate Name  
WHITESIDES, GEORGE, , ,Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.25905

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA

District: 27

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

6000.00

**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)

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<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. GILLEN FOR NY**

Mailing Address PO BOX 33079

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20036

FEC Identification Number

**C** C00840165Purpose of Disbursement  
ContributionCandidate Name  
GILLEN, LAURA, , ,Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.25927

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY

District: 04

Full Name (Last, First, Middle Initial)

**B. Illinois Women's Institute for Leadership Training Academy**

Mailing Address 220 N Green St

Date of Disbursement

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

City  
ChicagoState  
ILZip Code  
60607

FEC Identification Number

**C**Purpose of Disbursement  
Donation

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : SB21.25823

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. JANELLE BYNUM FOR CONGRESS**

Mailing Address 10121 SE SUNNYSIDE RD., #300

Date of Disbursement

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

City  
CLACKAMASState  
ORZip Code  
97015

FEC Identification Number

**C** C00843425Purpose of Disbursement  
ContributionCandidate Name  
BYNUM, JANELLE, , ,Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.25935

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: OR

District: 05

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

4500.00

**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)

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<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. JOSH HARDER FOR CONGRESS**

Mailing Address PO BOX 4426

City  
MODESTOState  
CAZip Code  
95352Purpose of Disbursement  
ContributionCandidate Name  
HARDER, JOSH, , ,Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 10

Date of Disbursement

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

FEC Identification Number

**C** C00639146

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.25885

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JOSH RILEY FOR CONGRESS**Mailing Address 1220 L ST NW  
STE 100, BOX 384City  
WASHINGTONState  
DCZip Code  
20005Purpose of Disbursement  
ContributionCandidate Name  
RILEY, JOSH, , ,Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 19

Date of Disbursement

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

FEC Identification Number

**C** C00793760

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.25929

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KAPTUR FOR CONGRESS**

Mailing Address PO BOX 899

City  
TOLEDOState  
OHZip Code  
43697Purpose of Disbursement  
Contribution

Candidate Name

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 09

Date of Disbursement

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

FEC Identification Number

**C** C00154625

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB21.25800

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

5000.00

**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)

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<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. KAPTUR FOR CONGRESS**

Mailing Address PO BOX 899

Date of Disbursement

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

City  
TOLEDOState  
OHZip Code  
43697

FEC Identification Number

**C** C00154625Purpose of Disbursement  
Contribution

Candidate Name

KAPTUR, MARCY HON. M.C., , ,

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB21.25933

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH

District: 09

Full Name (Last, First, Middle Initial)

**B. KRISTEN FOR MICHIGAN**

Mailing Address PO BOX 854

Date of Disbursement

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

City  
BAY CITYState  
MIZip Code  
48707

FEC Identification Number

**C** C00864207Purpose of Disbursement  
Contribution

Candidate Name

MCDONALD RIVET, KRISTEN, , ,

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.25914

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI

District: 08

Full Name (Last, First, Middle Initial)

**C. MANNION FOR NEW YORK**

Mailing Address PO BOX 11131

Date of Disbursement

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

City  
SYRACUSEState  
NYZip Code  
13218

FEC Identification Number

**C** C00845461Purpose of Disbursement  
Contribution

Candidate Name

MANNION, JOHN W, , ,

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.25931

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY

District: 22

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

5000.00

**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  
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(check only one)

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<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MRVAN FOR CONGRESS**

Mailing Address PO BOX 55

Date of Disbursement

M M	D D	Y Y Y Y
06	20	2025

City  
CROWN POINTState  
INZip Code  
46308

FEC Identification Number

**C** C00727529Purpose of Disbursement  
ContributionCandidate Name  
MRVAN, FRANK J., , ,Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.25913

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IN

District: 01

Full Name (Last, First, Middle Initial)

**B. NELLIE POU FOR CONGRESS**

Mailing Address PO BOX 2696

Date of Disbursement

M M	D D	Y Y Y Y
06	20	2025

City  
PATERSONState  
NJZip Code  
07509

FEC Identification Number

**C** C00887547Purpose of Disbursement  
ContributionCandidate Name  
POU, NELIDA, , ,Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.25917

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NJ

District: 09

Full Name (Last, First, Middle Initial)

**C. NEVADANS FOR STEVEN HORSFORD**

Mailing Address PO BOX 336664

Date of Disbursement

M M	D D	Y Y Y Y
06	20	2025

City  
NORTH LAS VEGASState  
NVZip Code  
89033

FEC Identification Number

**C** C00668228Purpose of Disbursement  
ContributionCandidate Name  
HORSFORD, STEVEN ALEXZANDER, , ,Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.25924

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NV

District: 04

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

6000.00

**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  
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(check only one)

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<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. SUOZZI FOR CONGRESS**

Mailing Address PO BOX 669

Date of Disbursement

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

City  
GLEN COVEState  
NYZip Code  
11542

FEC Identification Number

**C** C00607200Purpose of Disbursement  
ContributionCandidate Name  
SUOZZI, THOMAS, , ,Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.25925

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY

District: 03

Full Name (Last, First, Middle Initial)

**B. SUSIE LEE FOR CONGRESS**Mailing Address 5130 S FORT APACHE RD  
STE. 215-382

Date of Disbursement

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

City  
LAS VEGASState  
NVZip Code  
89148

FEC Identification Number

**C** C00655613Purpose of Disbursement  
ContributionCandidate Name  
LEE, SUSIE, , ,Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.25923

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NV

District: 03

Full Name (Last, First, Middle Initial)

**C. TITUS FOR CONGRESS**

Mailing Address PO BOX 72454

Date of Disbursement

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

City  
LAS VEGASState  
NVZip Code  
89170

FEC Identification Number

**C** C00499467Purpose of Disbursement  
ContributionCandidate Name  
TITUS, DINA, , ,Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.25921

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NV

District: 01

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

6000.00

**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)

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<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)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. VICENTE GONZALEZ FOR CONGRESS**

Mailing Address 121 NORTH 10TH ST

Date of Disbursement

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

City  
MCALLENState  
TXZip Code  
78501

FEC Identification Number

**C** C00592659Purpose of Disbursement  
Contribution

Candidate Name

GONZALEZ, VICENTE, , ,

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.25937

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX

District: 15

Full Name (Last, First, Middle Initial)

**B. VINDMAN FOR CONGRESS**

Mailing Address 4222 FORTUNA CENTER PLZ, STE 664

Date of Disbursement

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

City  
DUMFRIESState  
VAZip Code  
22025

FEC Identification Number

**C** C00856955Purpose of Disbursement  
Contribution

Candidate Name

VINDMAN, YEVGENY 'EUGENE', , ,

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.25939

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: VA

District: 07

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

**C**

Purpose of Disbursement

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).....▶

4000.00

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

222000.00