



## SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**Julie For Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2026 To: M M / D D / Y Y Y Y 03 / 31 / 2026

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	7058.00	27977.40
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	7058.00	27977.40
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	8744.39	22926.09
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	8744.39	22926.09
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>	<b>7551.31</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<b>1086.93</b>	

**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

**Julie For Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	100.00	6611.00
(ii) Unitemized .....	1658.00	3264.00
(iii) TOTAL of contributions from individuals .....	1758.00	9875.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	300.00	550.00
(d) The Candidate .....	5000.00	17552.40
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	7058.00	27977.40
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	2500.00	2500.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....</b>	9558.00	30477.40

**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.....	8744.39	22926.09
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	8744.39	22926.09

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	6737.70
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	9558.00
25. SUBTOTAL (add Line 23 and Line 24).....	16295.70
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	8744.39
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	7551.31

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 17  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**Julie For Congress**

**A.** Full Name (Last, First, Middle Initial)  
Ronnau, Kellen, , ,

Mailing Address 5873 N Duxbury Pier Ln

City Garden City State ID Zip Code 83714

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

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 09 2026

Transaction ID : A-203

Amount of Each Receipt this Period  
100.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	100.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 6 OF 17	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Julie For Congress**

**A.** Full Name (Last, First, Middle Initial)  
Twin Falls County Democratic Committee

Mailing Address PO Box 2496

City Twin Falls	State ID	Zip Code 83303
--------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

**Transaction ID : A-204**

Amount of Each Receipt this Period

Memo Item  
contribution from political committee

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M M / D D / Y Y Y Y Y Y
/  /

Amount of Each Receipt this Period

Memo Item

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M M / D D / Y Y Y Y Y Y
/  /

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="300.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="300.00"/>

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 17  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Julie For Congress**

**A.** Full Name (Last, First, Middle Initial)  
Wiley, Julie, , ,

Mailing Address 4991 Bitterbrush Drive

City Boise State ID Zip Code 83703

FEC ID number of contributing federal political committee. **C** H6ID02225

Name of Employer Retired Occupation Retired

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
17552.40

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 26 2026

Transaction ID : A-237

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5000.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 OF 17  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Julie For Congress**

**A.** Full Name (Last, First, Middle Initial)  
Wiley, Julie, , ,

Mailing Address 4991 Bitterbrush Drive

City Boise State ID Zip Code 83703

FEC ID number of contributing federal political committee. **C** H6ID02225

Name of Employer Retired Occupation Retired

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  
03 / 20 / 2026

Transaction ID : A-236

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 17			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Julie For Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. ActBlue		M M / D D / Y Y Y Y 01 / 07 / 2026
Mailing Address PO Box 441146		FEC Identification Number
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement Conduit Processing Fees	001	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026	
State: District: 00	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		Amount of Each Disbursement this Period
		0.99
		Transaction ID : B-283
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. ActBlue		M M / D D / Y Y Y Y 01 / 07 / 2026
Mailing Address PO Box 441146		FEC Identification Number
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement Conduit Processing Fees	001	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026	
State: District: 00	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		Amount of Each Disbursement this Period
		1.98
		Transaction ID : B-285
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. ActBlue		M M / D D / Y Y Y Y 01 / 18 / 2026
Mailing Address PO Box 441146		FEC Identification Number
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement Conduit Processing Fees	001	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026	
State: District: 00	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		Amount of Each Disbursement this Period
		1.39
		Transaction ID : B-288
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4.36
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 17	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Julie For Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>A. ActBlue</b>		M M / D D / Y Y Y Y 01 / 28 / 2026	
Mailing Address PO Box 441146		FEC Identification Number	
City Somerville	State MA	Zip Code 02144	<b>C</b>
Purpose of Disbursement Conduit Processing Fees		001	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	1.39
Office Sought:	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) ▼	<b>Transaction ID : B-291</b>
State:	District: 00		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>B. ActBlue</b>		M M / D D / Y Y Y Y 02 / 04 / 2026	
Mailing Address PO Box 441146		FEC Identification Number	
City Somerville	State MA	Zip Code 02144	<b>C</b>
Purpose of Disbursement Conduit Processing Fees		001	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	5.94
Office Sought:	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) ▼	<b>Transaction ID : B-297</b>
State:	District: 00		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>C. ActBlue</b>		M M / D D / Y Y Y Y 02 / 19 / 2026	
Mailing Address PO Box 441146		FEC Identification Number	
City Somerville	State MA	Zip Code 02144	<b>C</b>
Purpose of Disbursement Conduit Processing Fees		001	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	0.91
Office Sought:	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) ▼	<b>Transaction ID : B-300</b>
State:	District: 00		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8.24
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 17			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Julie For Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue</b>		Date of Disbursement MM / DD / YYYY 02 / 25 / 2026
Mailing Address PO Box 441146		FEC Identification Number C
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement Conduit Processing Fees	Category/ Type 001	Amount of Each Disbursement this Period 4.76
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: 00	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ActBlue</b>		Date of Disbursement MM / DD / YYYY 03 / 04 / 2026
Mailing Address PO Box 441146		FEC Identification Number C
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement Conduit Processing Fees	Category/ Type 001	Amount of Each Disbursement this Period 3.96
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: 00	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Chandler, George, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 10 / 2026
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	Category/ Type 011	Amount of Each Disbursement this Period 1300.00
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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1308.72
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 17			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Julie For Congress**

**A. Idaho Secretary of State**

Full Name (Last, First, Middle Initial)

Mailing Address 999 West Main Street  
Suite 910

City Boise State ID Zip Code 83702

Purpose of Disbursement  001 Category/Type

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement: 02 / 27 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 308.50

Transaction ID : B-230

Memo Item

**B. Idaho State Democratic Party**

Full Name (Last, First, Middle Initial)

Mailing Address P O Box 445

City Boise State ID Zip Code 83701

Purpose of Disbursement Reimbursement for gala table  011 Category/Type

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 1300.00

Transaction ID : B-306

Memo Item MEMO: Subvendor of-George Chandler

**C. Integrated Solutions: Political**

Full Name (Last, First, Middle Initial)

Mailing Address 4142 Adams Avenue  
Suite 103-550

City San Diego State CA Zip Code 92116

Purpose of Disbursement Accounting/Reporting Software  001 Category/Type

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 150.00

Transaction ID : B-225

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 458.50

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 17			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Julie For Congress**

**A. Integrated Solutions: Political**

Full Name (Last, First, Middle Initial)

Mailing Address 4142 Adams Avenue  
Suite 103-550

City San Diego State CA Zip Code 92116

Purpose of Disbursement Accounting/Reporting Software Category/Type 001

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY  
02 / 03 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 150.00

Transaction ID : B-227

Memo Item

**B. Integrated Solutions: Political**

Full Name (Last, First, Middle Initial)

Mailing Address 4142 Adams Avenue  
Suite 103-550

City San Diego State CA Zip Code 92116

Purpose of Disbursement Accounting/Reporting Software Category/Type 001

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY  
03 / 03 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 150.00

Transaction ID : B-232

Memo Item

**C. Irwin, Pine, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type 001

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY  
02 / 27 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 500.00

Transaction ID : B-231

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 800.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 17			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)  
**Julie For Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. Key Design Website</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>10</td> <td></td> <td>2026</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		10		2026
M M	/	D D	/	Y Y Y Y									
02		10		2026									
Mailing Address		FEC Identification Number											
City		C											
State	Zip Code	Amount of Each Disbursement this Period											
Purpose of Disbursement		2500.00											
Candidate Name		Transaction ID : B-229											
Office Sought:		<input type="checkbox"/> Memo Item											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼												
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>B. Roth, David, , ,</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>20</td> <td></td> <td>2026</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	03		20		2026
M M	/	D D	/	Y Y Y Y									
03		20		2026									
Mailing Address 2069 KEARNEY ST		FEC Identification Number											
City		C											
State	Zip Code	Amount of Each Disbursement this Period											
Purpose of Disbursement		500.00											
Candidate Name		Transaction ID : B-235											
Office Sought:		<input type="checkbox"/> Memo Item											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼												
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>C. Vision Kits Studio</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>13</td> <td></td> <td>2026</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		13		2026
M M	/	D D	/	Y Y Y Y									
01		13		2026									
Mailing Address		FEC Identification Number											
City		C											
State	Zip Code	Amount of Each Disbursement this Period											
Purpose of Disbursement		3000.00											
Candidate Name		Transaction ID : B-226											
Office Sought:		<input type="checkbox"/> Memo Item											
<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:													

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	8579.82

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)

**Julie For Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Wiley, Julie, , ,</b>			Nature of Debt (Purpose): Registration
Mailing Address 4991 Bitterbrush Drive			
City Boise	State ID	Zip Code 83703	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="192.00"/>		<b>Transaction ID : D-10</b>	
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="192.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Wiley, Julie, , ,</b>			Nature of Debt (Purpose): Registration
Mailing Address 4991 Bitterbrush Drive			
City Boise	State ID	Zip Code 83703	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="31.75"/>		<b>Transaction ID : D-12</b>	
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="31.75"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Wiley, Julie, , ,</b>			Nature of Debt (Purpose): Photography
Mailing Address 4991 Bitterbrush Drive			
City Boise	State ID	Zip Code 83703	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="250.00"/>		<b>Transaction ID : D-5</b>	
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="250.00"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input style="width: 100%;" type="text" value="473.75"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input style="width: 100%;" type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input style="width: 100%;" type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input style="width: 100%;" type="text"/>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)

**Julie For Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Wiley, Julie, , ,</b>			Nature of Debt (Purpose): Logo design
Mailing Address 4991 Bitterbrush Drive			
City Boise	State ID	Zip Code 83703	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="200.00"/>		<b>Transaction ID : D-3</b>	
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="200.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Wiley, Julie, , ,</b>			Nature of Debt (Purpose): Candidate Contribution
Mailing Address 4991 Bitterbrush Drive			
City Boise	State ID	Zip Code 83703	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="40.83"/>		<b>Transaction ID : D-90</b>	
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="40.83"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Wiley, Julie, , ,</b>			Nature of Debt (Purpose): Candidate Contribution
Mailing Address 4991 Bitterbrush Drive			
City Boise	State ID	Zip Code 83703	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="107.35"/>		<b>Transaction ID : D-88</b>	
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="107.35"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input style="width: 100%;" type="text" value="348.18"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input style="width: 100%;" type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input style="width: 100%;" type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input style="width: 100%;" type="text"/>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Julie For Congress**

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

Wiley, Julie, , ,

Nature of Debt (Purpose):

Candidate Contribution

Mailing Address 4991 Bitterbrush Drive

City  
Boise

State  
ID

Zip Code  
83703

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-176

Amount Incurred This Period

265.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

265.00

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

265.00

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

1086.93

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

0.00

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

1086.93