

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Marter for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2025 To: M M / D D / Y Y Y Y 12 / 31 / 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))	9821.88	65410.89
(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))	9821.88	65410.89
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	11303.87	41254.31
(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))	11303.87	41254.31
8. Cash on Hand at Close of Reporting Period (from Line 27)	28840.96	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	31501.99	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Marter for Congress

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

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).....	5370.00	50645.00
(ii) Unitemized.....	4451.88	14665.89
(iii) TOTAL of contributions from individuals ▶	9821.88	65310.89
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	100.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	9821.88	65410.89
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	143.22	143.22
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	143.22	143.22
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	9965.10	65554.11

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.....	11303.87	41254.31
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	9712.47
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	9712.47
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	1619.19	5336.61
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	12923.06	56303.39

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	31798.92
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	9965.10
25. SUBTOTAL (add Line 23 and Line 24).....	41764.02
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	12923.06
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	28840.96

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 5 OF 69	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
Abramowitz, Kenneth, , ,

Mailing Address 4530 Hazleton Ln

City Wellington	State FL	Zip Code 33449
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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 ▼
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2025

Transaction ID : SA11AI.11173

Amount of Each Receipt this Period
500.00

Memo Item
Contribution

B. Full Name (Last, First, Middle Initial)
Bieber, Albert, , ,

Mailing Address PO Box 270

City China	State TX	Zip Code 77613
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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 ▼
2100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2025

Transaction ID : SA11AI.11106

Amount of Each Receipt this Period
350.00

Memo Item
Contribution

C. Full Name (Last, First, Middle Initial)
Bieber, Albert, , ,

Mailing Address PO Box 270

City China	State TX	Zip Code 77613
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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 ▼
2450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 19 / 2025

Transaction ID : SA11AI.11198

Amount of Each Receipt this Period
350.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶	1200.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 69
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
Bieber, Albert, , ,

Mailing Address PO Box 270

City: China State: TX Zip Code: 77613

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: 2800.00

Date of Receipt: 12 / 22 / 2025

Transaction ID : SA11AI.11222

Amount of Each Receipt this Period: 350.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Bogenschutz, Robert, , ,

Mailing Address 4237 Highland Green Dr

City: Mason State: OH Zip Code: 45040

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: 12 / 12 / 2025

Transaction ID : SA11AI.11218

Amount of Each Receipt this Period: 100.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Carpenter, Dorothy, , ,

Mailing Address 1505 Donegal Dr

City: Normal State: IL Zip Code: 61761

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: 10 / 27 / 2025

Transaction ID : SA11AI.11192

Amount of Each Receipt this Period: 100.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 69	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
Collins, Katherine, , ,

Mailing Address 1008 Mallard Pointe Dr

City Cedar Hill	State TX	Zip Code 75104
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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 ▼
700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 27 / 2025

Transaction ID : SA11AI.11188

Amount of Each Receipt this Period
400.00

Memo Item
Contribution

B. Full Name (Last, First, Middle Initial)
Daghdal, George, , ,

Mailing Address 1971 Gowdy Rd

City Naperville	State IL	Zip Code 60563
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 03 / 2025

Transaction ID : SA11AI.11116

Amount of Each Receipt this Period
250.00

Memo Item
Contribution

C. Full Name (Last, First, Middle Initial)
DuSell, Fred, , ,

Mailing Address 478 Kelly Ave

City Yorkville	State IL	Zip Code 60560
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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 ▼
800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 05 / 2025

Transaction ID : SA11AI.11100

Amount of Each Receipt this Period
100.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶	750.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 69
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
DuSell, Fred, , ,

Mailing Address 478 Kelly Ave

City Yorkville State IL Zip Code 60560

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
11 / 05 / 2025

Transaction ID : SA11AI.11120

Amount of Each Receipt this Period
100.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
DuSell, Fred, , ,

Mailing Address 478 Kelly Ave

City Yorkville State IL Zip Code 60560

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 05 / 2025

Transaction ID : SA11AI.11145

Amount of Each Receipt this Period
100.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Filosa, Louis, , ,

Mailing Address 21223 Prestancia Drive

City Mokena State IL Zip Code 60448

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
10 / 06 / 2025

Transaction ID : SA11AI.11102

Amount of Each Receipt this Period
100.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 69	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
Gaines, Ira, , ,

Mailing Address 7000 N 16th St Ste 120
#503

City Phoenix State AZ Zip Code 85020

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
12 / 05 / 2025

Transaction ID : SA11AI.11214

Amount of Each Receipt this Period
300.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Gorrell, Sharon, , ,

Mailing Address 468 De Lasalle Ave

City Naperville State IL Zip Code 60565

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
12 / 16 / 2025

Transaction ID : SA11AI.11156

Amount of Each Receipt this Period
100.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Hayden, Agnes, , ,

Mailing Address 929 Peninsula Dr

City Traverse City State MI Zip Code 49686

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 ▼
1850.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2025

Transaction ID : SA11AI.11225

Amount of Each Receipt this Period
250.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 OF 69
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
Kviz, Linda, , ,

Mailing Address 695 Conton Ct

City Oswego State IL Zip Code 60543

FEC ID number of contributing federal political committee.

Name of Employer Retired Occupation Retired

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 27 2025

Transaction ID : SA11AI.11190

Amount of Each Receipt this Period

Memo Item
Contribution

B. Full Name (Last, First, Middle Initial)
Lynch, Glenn, , ,

Mailing Address Quarry Hill Court

City Fort Worth State TX Zip Code 76179

FEC ID number of contributing federal political committee.

Name of Employer Bobby Cox Company Occupation Developer

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 31 2025

Transaction ID : SA11AI.11226

Amount of Each Receipt this Period

Memo Item
Contribution

C. Full Name (Last, First, Middle Initial)
Malvese, Paul, , ,

Mailing Address 141 Legendary Cir

City Palm Beach Gardens State FL Zip Code 33418

FEC ID number of contributing federal political committee.

Name of Employer Retired Occupation Retired

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 19 2025

Transaction ID : SA11AI.11199

Amount of Each Receipt this Period

Memo Item
Contribution

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 69	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial) Maple, Ralph, , , Mailing Address 3702 Sunset Blvd			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 10 / 2025	
City Houston	State TX	Zip Code 77005	Transaction ID : SA11AI.11180	
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="250.00"/>	
Name of Employer Retired		Occupation Retired	<input type="checkbox"/> Memo Item Contribution	
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="2000.00"/>		

B. Full Name (Last, First, Middle Initial) Morrissey, Elsie, , , Mailing Address 820 N Lafayette St			Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2025	
City Sandwich	State IL	Zip Code 60548	Transaction ID : SA11AI.11227	
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="500.00"/>	
Name of Employer Retired		Occupation Retired	<input type="checkbox"/> Memo Item Contribution	
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="550.00"/>		

C. Full Name (Last, First, Middle Initial) Oleson, Linda, , , Mailing Address 1008 N Lew Street			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2025	
City Plano	State IL	Zip Code 60545	Transaction ID : SA11AI.11137	
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="100.00"/>	
Name of Employer Retired		Occupation Retired	<input type="checkbox"/> Memo Item Contribution	
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="350.00"/>		

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="850.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 69
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
Oleson, Linda, , ,

Mailing Address 1008 N Lew Street

City: Plano State: IL Zip Code: 60545

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: 410.00

Date of Receipt: 12 / 31 / 2025

Transaction ID : SA11AI.11169

Amount of Each Receipt this Period: 60.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Sczepaniak, Mary, , ,

Mailing Address 1200 Church St

City: Peru State: IL Zip Code: 61354

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: 210.00

Date of Receipt: 12 / 31 / 2025

Transaction ID : SA11AI.11172

Amount of Each Receipt this Period: 60.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Shaw, Frances, , ,

Mailing Address 1109 West Downer Pl

City: Aurora State: IL Zip Code: 60506

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: 350.00

Date of Receipt: 10 / 27 / 2025

Transaction ID : SA11AI.11189

Amount of Each Receipt this Period: 350.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	470.00
TOTAL This Period (last page this line number only).....▶	5370.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 OF 69
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
Marter, James, Thomas, ,

Mailing Address 233 Fox Chase Drive North

City: Oswego State: IL Zip Code: 60543

FEC ID number of contributing federal political committee: **C** H8IL16153

Name of Employer: Self-Employed Occupation: CEO

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
47.74

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 10 / 2025

Transaction ID : SA13A.11298

Amount of Each Receipt this Period
47.74

Memo Item
Microsoft

B. Full Name (Last, First, Middle Initial)
Marter, James, Thomas, ,

Mailing Address 233 Fox Chase Drive North

City: Oswego State: IL Zip Code: 60543

FEC ID number of contributing federal political committee: **C** H8IL16153

Name of Employer: Self-Employed Occupation: CEO

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
95.48

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 10 / 2025

Transaction ID : SA13A.11299

Amount of Each Receipt this Period
47.74

Memo Item
Online Services

C. Full Name (Last, First, Middle Initial)
Marter, James, Thomas, ,

Mailing Address 233 Fox Chase Drive North

City: Oswego State: IL Zip Code: 60543

FEC ID number of contributing federal political committee: **C** H8IL16153

Name of Employer: Self-Employed Occupation: CEO

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
143.22

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 10 / 2025

Transaction ID : SA13A.11300

Amount of Each Receipt this Period
47.74

Memo Item
Microsoft

SUBTOTAL of Receipts This Page (optional).....▶	143.22
TOTAL This Period (last page this line number only).....▶	143.22

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 69	
	<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)
Marter for Congress

Full Name (Last, First, Middle Initial) A. Amazon			Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2025	
Mailing Address 410 Terry Ave			FEC Identification Number C C00657361	
City Seattle	State WA	Zip Code 98109	Amount of Each Disbursement this Period 112.87	
Purpose of Disbursement Parade Supplies		Category/ Type 007	Transaction ID : SB17.11289	
Candidate Name Marter for Congress		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" 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: IL District: 14				

Full Name (Last, First, Middle Initial) B. Amazon			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2025	
Mailing Address 410 Terry Ave			FEC Identification Number C C00657361	
City Seattle	State WA	Zip Code 98109	Amount of Each Disbursement this Period 197.40	
Purpose of Disbursement Parade Supplies		Category/ Type 007	Transaction ID : SB17.11290	
Candidate Name Marter for Congress		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" 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: IL District: 14				

Full Name (Last, First, Middle Initial) C. Anedot			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2025	
Mailing Address 1920 McKinney Ave 7th Floor			FEC Identification Number C C00657361	
City Dallas	State TX	Zip Code 75201	Amount of Each Disbursement this Period 41.58	
Purpose of Disbursement Processing Fes		Category/ Type 001	Transaction ID : SB17.11175	
Candidate Name Marter for Congress		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" 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: IL District: 14				

SUBTOTAL of Disbursements This Page (optional).....▶	351.85
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 15 OF 69			
	<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)
Marter for Congress

Full Name (Last, First, Middle Initial) A. Colasante, Christa, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2025		
Mailing Address 4171 Lobo Ln			FEC Identification Number C C00657361		
City Naperville	State IL	Zip Code 60564	Amount of Each Disbursement this Period 315.39		
Purpose of Disbursement Miles		Category/ Type 001	Transaction ID : SB17.11229		
Candidate Name Marter for Congress		Memo Item <input type="checkbox"/>			
Office Sought: <input checked="" 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: IL District: 14					

Full Name (Last, First, Middle Initial) B. Colasante, Christa, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2025		
Mailing Address 4171 Lobo Ln			FEC Identification Number C C00657361		
City Naperville	State IL	Zip Code 60564	Amount of Each Disbursement this Period 476.80		
Purpose of Disbursement November		Category/ Type 001	Transaction ID : SB17.11261		
Candidate Name Marter for Congress		Memo Item <input type="checkbox"/>			
Office Sought: <input checked="" 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: IL District: 14					

Full Name (Last, First, Middle Initial) C. Constant Contact			Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2025		
Mailing Address 1601 Trapelo Road Suite 329			FEC Identification Number C C00657361		
City Waltham	State MA	Zip Code 02451	Amount of Each Disbursement this Period 227.00		
Purpose of Disbursement Email Marketing		Category/ Type 004	Transaction ID : SB17.11271		
Candidate Name Marter for Congress		Memo Item <input type="checkbox"/>			
Office Sought: <input checked="" 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: IL District: 14					

SUBTOTAL of Disbursements This Page (optional).....▶	1019.19
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 Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 69	
	<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)
Marter for Congress

Full Name (Last, First, Middle Initial)

A. Constant Contact

Mailing Address 1601 Trapelo Road Suite 329

City Waltham State MA Zip Code 02451

Purpose of Disbursement Email Markegin Category/Type 004

Candidate Name Marter for Congress

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

State: IL District: 14

Date of Disbursement: 11 / 25 / 2025

FEC Identification Number: C 00657361

Amount of Each Disbursement this Period: 227.00

Transaction ID : SB17.11291

Memo Item

Full Name (Last, First, Middle Initial)

B. Constant Contact

Mailing Address 1601 Trapelo Road Suite 329

City Waltham State MA Zip Code 02451

Purpose of Disbursement Email Marketing Category/Type 004

Candidate Name Marter for Congress

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

State: IL District: 14

Date of Disbursement: 12 / 26 / 2025

FEC Identification Number: C 00657361

Amount of Each Disbursement this Period: 227.00

Transaction ID : SB17.11313

Memo Item

Full Name (Last, First, Middle Initial)

C. Constellation, Inc.

Mailing Address 525 S Randall Rd.

City St. Charles State IL Zip Code 60174

Purpose of Disbursement Gun Show Category/Type 007

Candidate Name Marter for Congress

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

State: IL District: 14

Date of Disbursement: 11 / 10 / 2025

FEC Identification Number: C 00657361

Amount of Each Disbursement this Period: 175.00

Transaction ID : SB17.11281

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 629.00

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 17 OF 69	
	<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)
Marter for Congress

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement Ads Category/Type 004

Candidate Name Marter for Congress

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

State: IL District: 14

Date of Disbursement: 10 / 01 / 2025

FEC Identification Number: C C00657361

Amount of Each Disbursement this Period: 132.65

Transaction ID : SB17.11231

Memo Item

Full Name (Last, First, Middle Initial)

B. Facebook

Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement Ads Category/Type 004

Candidate Name Marter for Congress

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

State: IL District: 14

Date of Disbursement: 11 / 03 / 2025

FEC Identification Number: C C00657361

Amount of Each Disbursement this Period: 422.17

Transaction ID : SB17.11278

Memo Item

Full Name (Last, First, Middle Initial)

C. Facebook

Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement Ads Category/Type 004

Candidate Name Marter for Congress

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

State: IL District: 14

Date of Disbursement: 12 / 01 / 2025

FEC Identification Number: C C00657361

Amount of Each Disbursement this Period: 326.98

Transaction ID : SB17.11294

Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 881.80

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 18 OF 69	
	<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)
Marter for Congress

A. Hurst & Associates, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 1 Forest View Dr.

City Hawthorn Woods State IL Zip Code 60047

Purpose of Disbursement Digital Marketin Category/Type 004

Candidate Name Marter for Congress

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

State: IL District: 14

Date of Disbursement 10 / 01 / 2025

FEC Identification Number C C00657361

Amount of Each Disbursement this Period 25.50

Transaction ID : SB17.11230

Memo Item

B. Hurst & Associates, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 1 Forest View Dr.

City Hawthorn Woods State IL Zip Code 60047

Purpose of Disbursement Digital Marketing Category/Type 004

Candidate Name Marter for Congress

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

State: IL District: 14

Date of Disbursement 10 / 03 / 2025

FEC Identification Number C C00657361

Amount of Each Disbursement this Period 172.50

Transaction ID : SB17.11232

Memo Item

C. Hurst & Associates, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 1 Forest View Dr.

City Hawthorn Woods State IL Zip Code 60047

Purpose of Disbursement Contribution Category/Type 004

Candidate Name Marter for Congress

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

State: IL District: 14

Date of Disbursement 10 / 06 / 2025

FEC Identification Number C C00657361

Amount of Each Disbursement this Period 15.00

Transaction ID : SB17.11233

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 213.00

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 19 OF 69	
	<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)
Marter for Congress

Full Name (Last, First, Middle Initial)
A. Hurst & Associates, Inc.

Mailing Address 1 Forest View Dr.

City Hawthorn Woods State IL Zip Code 60047

Purpose of Disbursement Digital Marketing Category/Type 004

Candidate Name Marter for Congress

Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼
State: IL District: 14

Date of Disbursement 10 / 16 / 2025

FEC Identification Number C C00657361

Amount of Each Disbursement this Period 0.75

Transaction ID : SB17.11265

Memo Item

Full Name (Last, First, Middle Initial)
B. Hurst & Associates, Inc.

Mailing Address 1 Forest View Dr.

City Hawthorn Woods State IL Zip Code 60047

Purpose of Disbursement Digital Marketing Category/Type 004

Candidate Name Marter for Congress

Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼
State: IL District: 14

Date of Disbursement 11 / 03 / 2025

FEC Identification Number C C00657361

Amount of Each Disbursement this Period 15.00

Transaction ID : SB17.11277

Memo Item

Full Name (Last, First, Middle Initial)
C. Hurst & Associates, Inc.

Mailing Address 1 Forest View Dr.

City Hawthorn Woods State IL Zip Code 60047

Purpose of Disbursement Digital Marketing Category/Type 004

Candidate Name Marter for Congress

Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼
State: IL District: 14

Date of Disbursement 11 / 05 / 2025

FEC Identification Number C C00657361

Amount of Each Disbursement this Period 15.00

Transaction ID : SB17.11279

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 30.75

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 20 OF 69	
	<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)
Marter for Congress

A. Hurst & Associates, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 1 Forest View Dr.

City Hawthorn Woods State IL Zip Code 60047

Purpose of Disbursement Digital Marketing Category/Type 004

Candidate Name Marter for Congress

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

State: IL District: 14

Date of Disbursement: 11 / 06 / 2025

FEC Identification Number: C C00657361

Amount of Each Disbursement this Period: 11.25

Transaction ID : SB17.11280

Memo Item

B. Hurst & Associates, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 1 Forest View Dr.

City Hawthorn Woods State IL Zip Code 60047

Purpose of Disbursement Digital Marketing Category/Type 004

Candidate Name Marter for Congress

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

State: IL District: 14

Date of Disbursement: 11 / 08 / 2025

FEC Identification Number: C C00657361

Amount of Each Disbursement this Period: 1734.71

Transaction ID : SB17.11254

Memo Item

C. Hurst & Associates, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 1 Forest View Dr.

City Hawthorn Woods State IL Zip Code 60047

Purpose of Disbursement Digital Marketing Category/Type 004

Candidate Name Marter for Congress

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

State: IL District: 14

Date of Disbursement: 11 / 20 / 2025

FEC Identification Number: C C00657361

Amount of Each Disbursement this Period: 15.00

Transaction ID : SB17.11288

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 1760.96

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 21 OF 69	
	<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)
Marter for Congress

A. Hurst & Associates, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 1 Forest View Dr.

City Hawthorn Woods State IL Zip Code 60047

Purpose of Disbursement Digital Marketing Category/Type 004

Candidate Name Marter for Congress

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

State: IL District: 14

Date of Disbursement: 12 / 10 / 2025

FEC Identification Number: C C00657361

Amount of Each Disbursement this Period: 7.50

Transaction ID : SB17.11296

Memo Item

B. Hurst & Associates, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 1 Forest View Dr.

City Hawthorn Woods State IL Zip Code 60047

Purpose of Disbursement Digital Marketing Category/Type 004

Candidate Name Marter for Congress

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

State: IL District: 14

Date of Disbursement: 12 / 31 / 2025

FEC Identification Number: C C00657361

Amount of Each Disbursement this Period: 15.00

Transaction ID : SB17.11316

Memo Item

C. Hurst & Associates, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 1 Forest View Dr.

City Hawthorn Woods State IL Zip Code 60047

Purpose of Disbursement Digital Marketin Category/Type 004

Candidate Name Marter for Congress

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

State: IL District: 14

Date of Disbursement: 12 / 31 / 2025

FEC Identification Number: C C00657361

Amount of Each Disbursement this Period: 29.25

Transaction ID : SB17.11317

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 51.75

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 22 OF 69	
	<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)
Marter for Congress

Full Name (Last, First, Middle Initial)

A. Joliet City Center

Mailing Address 203 N Ottawa St Suite 100

City Joliet State IL Zip Code 60432

Purpose of Disbursement Parade Fee Category/Type 007

Candidate Name Marter for Congress

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

State: IL District: 14

Date of Disbursement 11 / 18 / 2025

FEC Identification Number C C00657361

Amount of Each Disbursement this Period 250.00

Transaction ID : SB17.11257

Memo Item

Full Name (Last, First, Middle Initial)

B. McBrides on 52

Mailing Address 2727 W Jefferson St

City Joliet State IL Zip Code 60435

Purpose of Disbursement Fundraiser Food Category/Type 003

Candidate Name Marter for Congress

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

State: IL District: 14

Date of Disbursement 10 / 22 / 2025

FEC Identification Number C C00657361

Amount of Each Disbursement this Period 288.65

Transaction ID : SB17.11267

Memo Item

Full Name (Last, First, Middle Initial)

C. Office Max

Mailing Address 3070 Walter Payton Mem Hwy

City Oswego State IL Zip Code 60543

Purpose of Disbursement Envelopes Category/Type 001

Candidate Name Marter for Congress

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

State: IL District: 14

Date of Disbursement 10 / 07 / 2025

FEC Identification Number C C00657361

Amount of Each Disbursement this Period 25.15

Transaction ID : SB17.11234

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 563.80

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 23 OF 69	
	<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)
Marter for Congress

Full Name (Last, First, Middle Initial)

A. Office Max

Mailing Address 3070 Walter Payton Mem Hwy

City Oswego State IL Zip Code 60543

Purpose of Disbursement Office Supplies Category/Type

Candidate Name Marter for Congress

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

State: IL District: 14

Date of Disbursement M M / D D / Y Y Y Y
10 / 20 / 2025

FEC Identification Number C C00657361

Amount of Each Disbursement this Period 23.40

Transaction ID : SB17.11266

Memo Item

Full Name (Last, First, Middle Initial)

B. Premier Mailing

Mailing Address 37 Stone Hill Unit D

City Oswego State IL Zip Code 60543

Purpose of Disbursement Printing Category/Type

Candidate Name Marter for Congress

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

State: IL District: 14

Date of Disbursement M M / D D / Y Y Y Y
11 / 25 / 2025

FEC Identification Number C C00657361

Amount of Each Disbursement this Period 595.00

Transaction ID : SB17.11259

Memo Item

Full Name (Last, First, Middle Initial)

C. Premier Mailing

Mailing Address 37 Stone Hill Unit D

City Oswego State IL Zip Code 60543

Purpose of Disbursement Printing Category/Type

Candidate Name Marter for Congress

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

State: IL District: 14

Date of Disbursement M M / D D / Y Y Y Y
11 / 25 / 2025

FEC Identification Number C C00657361

Amount of Each Disbursement this Period 886.13

Transaction ID : SB17.11260

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 1504.53

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 24 OF 69			
	<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)
Marter for Congress

Full Name (Last, First, Middle Initial)

A. Premier Mailing

Mailing Address 37 Stone Hill
Unit D

City Oswego State IL Zip Code 60543

Purpose of Disbursement T Shirts Category/Type 006

Candidate Name Marter for Congress

Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼
State: IL District: 14

Date of Disbursement 12 / 11 / 2025

FEC Identification Number C C00657361

Amount of Each Disbursement this Period 471.98

Transaction ID : SB17.11310

Memo Item

Full Name (Last, First, Middle Initial)

B. TFG LLC

Mailing Address 94 Medway St
Unit GL

City Povidence State RI Zip Code 02906

Purpose of Disbursement Consultant Category/Type 001

Candidate Name Marter for Congress

Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼
State: IL District: 14

Date of Disbursement 10 / 08 / 2025

FEC Identification Number C C00657361

Amount of Each Disbursement this Period 829.00

Transaction ID : SB17.11235

Memo Item

Full Name (Last, First, Middle Initial)

C. TFG LLC

Mailing Address 94 Medway St
Unit GL

City Povidence State RI Zip Code 02906

Purpose of Disbursement Consultant Category/Type 001

Candidate Name Marter for Congress

Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼
State: IL District: 14

Date of Disbursement 10 / 27 / 2025

FEC Identification Number C C00657361

Amount of Each Disbursement this Period 390.50

Transaction ID : SB17.11274

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 1691.48

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 25 OF 69			
	<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)
Marter for Congress

Full Name (Last, First, Middle Initial)			Date of Disbursement		
A. TFG LLC			M M / D D / Y Y Y Y 11 / 18 / 2025		
Mailing Address 94 Medway St Unit GL			FEC Identification Number		
City Povidence		State RI	Zip Code 02906		C C00657361
Purpose of Disbursement Consultant			Amount of Each Disbursement this Period		
Candidate Name Marter for Congress			680.80		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Transaction ID : SB17.11287		
Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			<input type="checkbox"/> Memo Item		
State: IL District: 14					

Full Name (Last, First, Middle Initial)			Date of Disbursement		
B. TFG LLC			M M / D D / Y Y Y Y 12 / 05 / 2025		
Mailing Address 94 Medway St Unit GL			FEC Identification Number		
City Povidence		State RI	Zip Code 02906		C C00657361
Purpose of Disbursement Consultant			Amount of Each Disbursement this Period		
Candidate Name Marter for Congress			280.00		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Transaction ID : SB17.11295		
Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			<input type="checkbox"/> Memo Item		
State: IL District: 14					

Full Name (Last, First, Middle Initial)			Date of Disbursement		
C. TFG LLC			M M / D D / Y Y Y Y 12 / 29 / 2025		
Mailing Address 94 Medway St Unit GL			FEC Identification Number		
City Povidence		State RI	Zip Code 02906		C C00657361
Purpose of Disbursement Consutant			Amount of Each Disbursement this Period		
Candidate Name Marter for Congress			659.00		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Transaction ID : SB17.11314		
Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			<input type="checkbox"/> Memo Item		
State: IL District: 14					

SUBTOTAL of Disbursements This Page (optional).....▶	1619.80
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 26 OF 69			
	<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)
Marter for Congress

Full Name (Last, First, Middle Initial)			Date of Disbursement		
A. USPS			M M / D D / Y Y Y Y 10 / 10 / 2025		
Mailing Address 601 E Countryside Pkwy			FEC Identification Number		
City Yorkville		State IL	Zip Code 60560		C C00657361
Purpose of Disbursement Postage			Amount of Each Disbursement this Period		
Candidate Name Marter for Congress			11.90		
Office Sought: <input checked="" type="checkbox"/> House			Transaction ID : SB17.11236		
Disbursement For: 2026			<input type="checkbox"/> Memo Item		
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General					
<input type="checkbox"/> Other (specify) ▼					
State: IL District: 14					

Full Name (Last, First, Middle Initial)			Date of Disbursement		
B. USPS			M M / D D / Y Y Y Y 12 / 12 / 2025		
Mailing Address 601 E Countryside Pkwy			FEC Identification Number		
City Yorkville		State IL	Zip Code 60560		C C00657361
Purpose of Disbursement Postage			Amount of Each Disbursement this Period		
Candidate Name Marter for Congress			109.20		
Office Sought: <input checked="" type="checkbox"/> House			Transaction ID : SB17.11306		
Disbursement For: 2026			<input type="checkbox"/> Memo Item		
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General					
<input type="checkbox"/> Other (specify) ▼					
State: IL District: 14					

Full Name (Last, First, Middle Initial)			Date of Disbursement		
C.			M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number		
City		State	Zip Code		C
Purpose of Disbursement			Amount of Each Disbursement this Period		
Candidate Name					
Office Sought: <input type="checkbox"/> House			<input type="checkbox"/> Memo Item		
Disbursement For:					
<input type="checkbox"/> Primary <input type="checkbox"/> General					
<input type="checkbox"/> Other (specify) ▼					
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	121.10
TOTAL This Period (last page this line number only).....▶	10439.01

**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 27 OF 69	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Marter for Congress

Full Name (Last, First, Middle Initial) A. Colasante, Christa, , ,		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2025
Mailing Address 4171 Lobo Ln		FEC Identification Number C 00657361
City Naperville	State IL	Zip Code 60564
Purpose of Disbursement October	Category/Type 001	
Candidate Name Marter for Congress	Amount of Each Disbursement this Period 634.00	
Office Sought: <input checked="" 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) ▼	Transaction ID : SB21.11248
State: IL District: 14	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Jed for Freedom		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2025
Mailing Address PO Box 322		FEC Identification Number C 00657361
City Newark	State IL	Zip Code 60541
Purpose of Disbursement Dinner Tickets	Category/Type 011	
Candidate Name Marter for Congress	Amount of Each Disbursement this Period 170.00	
Office Sought: <input checked="" 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) ▼	Transaction ID : SB21.11256
State: IL District: 14	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. LaSalle County Republican Cental Committee		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2025
Mailing Address 2917 E 6th		FEC Identification Number C 00657361
City LaSalle	State IL	Zip Code 61301
Purpose of Disbursement Dinner Tickets	Category/Type 007	
Candidate Name Marter for Congress	Amount of Each Disbursement this Period 65.00	
Office Sought: <input checked="" 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) ▼	Transaction ID : SB21.11241
State: IL District: 14	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	869.00
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)
17 18 19a 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Marter for Congress

Full Name (Last, First, Middle Initial)

A. USPS

Date of Disbursement

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

Mailing Address 601 E Countryside Pkwy

FEC Identification Number

C C00657361

City Yorkville State IL Zip Code 60560

Purpose of Disbursement PO Box **001**

Amount of Each Disbursement this Period

166.00

Candidate Name Marter for Congress

Category/Type

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

Transaction ID : SB21.11247

Memo Item

State: IL District: 14

Full Name (Last, First, Middle Initial)

B. Western Kane County Republicans

Date of Disbursement

M M / D D / Y Y Y Y
11 / 12 / 2025

Mailing Address PO Box 782

FEC Identification Number

C C00657361

City Sugar Grove State IL Zip Code 60554

Purpose of Disbursement Dinner Tickets/Sponsorhip **011**

Amount of Each Disbursement this Period

354.19

Candidate Name Marter for Congress

Category/Type

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

Transaction ID : SB21.11283

Memo Item

State: IL District: 14

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M / D D / Y Y Y Y

Mailing Address

FEC Identification Number

C

City State Zip Code

Purpose of Disbursement Category/Type

Amount of Each Disbursement this Period

Candidate Name

Category/Type

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

Memo Item

State: District:

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

520.19

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

1389.19

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6609**
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item Been Verified		Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 307 5th Ave 16th Floor		
City New York	State NY	ZIP Code 10016
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
26.89	0.00	26.89

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 07 / 09 / 2021	M M / D D / Y Y Y Y na	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....▶	26.89
TOTALS This Period (last page in this line only).....▶	<input type="text"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6611**
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2022
Been Verified			<input checked="" type="checkbox"/> Primary
Mailing Address			<input type="checkbox"/> General
307 5th Ave			<input type="checkbox"/> Other (specify) ▼
16th Floor			
City	State	ZIP Code	<input checked="" type="checkbox"/> Personal Funds of the Candidate
New York	NY	10016	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
26.89	0.00	26.89

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y	M M / D D / Y Y Y Y	% (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	08 / 09 / 2021	na	0.00	

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	26.89
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.7271
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item Keap		Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1260 S. Spectrum Blvd		
City Chandler	State AZ	ZIP Code 85286
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 549.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 549.00
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TERMS	Date Incurred M M / D D / Y Y Y Y 01 / 31 / 2022	Date Due M M / D D / Y Y Y Y n/a	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: _____
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: _____
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: _____
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: _____

SUBTOTALS This Period This Page (optional).....▶	549.00
TOTALS This Period (last page in this line only).....▶	_____

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

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6189**
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 31.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 31.00
----------------------------------	------------------------------------	--

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 06 / 04 / 2021	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....▶	[] 31.00
TOTALS This Period (last page in this line only).....▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6176**
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
26.89	0.00	26.89

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 06 / 09 / 2021	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	26.89
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.6190
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item Marter, James, Thomas, ,		Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 233 Fox Chase Drive North		
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50.00	0.00	50.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 06 / 22 / 2021	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	50.00
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6191**
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
City Oswego		<input type="checkbox"/> Other (specify) ▼
State IL	ZIP Code 60543	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 11.29	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 11.29
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TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 06 / 30 / 2021	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....▶	11.29
TOTALS This Period (last page in this line only).....▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.6607
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item Marter, James, Thomas, ,		Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 233 Fox Chase Drive North		
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 549.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 549.00
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TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 07 / 01 / 2021	M M / D D / Y Y Y Y / / na	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....▶	<input type="text" value="549.00"/>
TOTALS This Period (last page in this line only)▶	<input type="text"/>

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.6608
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item Marter, James, Thomas, ,		Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 233 Fox Chase Drive North		
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 120.45	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 120.45
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TERMS	Date Incurred MM / DD / YYYY 07 / 08 / 2021	Date Due MM / DD / YYYY na	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....▶	120.45
TOTALS This Period (last page in this line only)▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6610**
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
City Oswego		<input type="checkbox"/> Other (specify) ▼
State IL	ZIP Code 60543	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
549.00	0.00	549.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	07 / 31 / 2021	na	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	549.00
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.6612
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item Marter, James, Thomas, ,		Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 233 Fox Chase Drive North		
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
549.00	0.00	549.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 08 / 31 / 2021	M M / D D / Y Y Y Y na	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....▶	<input type="text" value="549.00"/>
TOTALS This Period (last page in this line only)▶	<input type="text"/>

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

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6606**
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
City Oswego		<input type="checkbox"/> Other (specify) ▼
State IL	ZIP Code 60543	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 25.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 25.00
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TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	09 / 08 / 2021	n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....▶	25.00
TOTALS This Period (last page in this line only).....▶	[]

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

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6613**
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
City Oswego		<input type="checkbox"/> Other (specify) ▼
State IL	ZIP Code 60543	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 26.89	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 26.89
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TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	MM / DD / YYYY 09 / 09 / 2021	MM / DD / YYYY na	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	26.89
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.6614

Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

Memo Item

Election: 2022

Primary
 General
 Other (specify) ▼

Marter, James, Thomas, ,

Mailing Address

233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

Personal Funds of the Candidate

Original Amount of Loan

549.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

549.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

09

30

2021

na

0.00

% (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional).....▶

549.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.6687
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item Marter, James, Thomas, ,		Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 233 Fox Chase Drive North		
City Oswego	State IL	ZIP Code 60543
<input checked="" type="checkbox"/> Personal Funds of the Candidate		

Original Amount of Loan 104.84	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 104.84
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TERMS	Date Incurred M M / D D / Y Y Y Y 10 / 12 / 2021	Date Due M M / D D / Y Y Y Y n/a	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	104.84
TOTALS This Period (last page in this line only)▶	(Empty field)

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6698**
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
<input checked="" type="checkbox"/> Personal Funds of the Candidate		

Original Amount of Loan 207.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 207.00
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TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	MM / DD / YYYY 10 / 21 / 2021	MM / DD / YYYY n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	207.00
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6707**
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 240.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 240.00
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TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 11 / 11 / 2021	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	240.00
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Marter for Congress** Transaction ID : **SC/10.6711**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2022
Marter, James, Thomas, ,			<input checked="" type="checkbox"/> Primary
Mailing Address			<input type="checkbox"/> General
233 Fox Chase Drive North			<input type="checkbox"/> Other (specify) ▼
City	State	ZIP Code	<input checked="" type="checkbox"/> Personal Funds of the Candidate
Oswego	IL	60543	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
251.35	0.00	251.35

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 11 / 11 / 2021	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	251.35
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.6686
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item Marter, James, Thomas, ,		Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 233 Fox Chase Drive North		
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
73.85	0.00	73.85

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 11 / 30 / 2021	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....▶	73.85
TOTALS This Period (last page in this line only)▶	<input type="text"/>

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Marter for Congress** Transaction ID : **SC/10.6701**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2022
Marter, James, Thomas, ,			<input checked="" type="checkbox"/> Primary
Mailing Address			<input type="checkbox"/> General
233 Fox Chase Drive North			<input type="checkbox"/> Other (specify) ▼
City	State	ZIP Code	<input checked="" type="checkbox"/> Personal Funds of the Candidate
Oswego	IL	60543	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
549.00	0.00	549.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y	M M / D D / Y Y Y Y	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	12 / 01 / 2021			

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City	State
ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City	State
ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City	State
ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City	State
ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	549.00
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6699**
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 97.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 97.00
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TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 12 / 05 / 2021	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	97.00
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.6706
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item Marter, James, Thomas, ,		Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 233 Fox Chase Drive North		
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 150.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 150.00
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TERMS Date Incurred M M / D D / Y Y Y Y 12 / 10 / 2021	Date Due M M / D D / Y Y Y Y n/a	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....▶	150.00
TOTALS This Period (last page in this line only).....▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6702**
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
549.00	0.00	549.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 12 / 31 / 2021	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	549.00
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.7200**
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 18.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 18.00
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TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 01 / 08 / 2022	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....▶	18.00
TOTALS This Period (last page in this line only).....▶	[]

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

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.7270**
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
549.00	0.00	549.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	03 / 01 / 2022	n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	549.00
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.7263**
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
875.16	0.00	875.16

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	03 / 21 / 2022	n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	875.16
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.7275**
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 4321.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 4321.00
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TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 03 / 22 / 2022	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	4321.00
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.7268**
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
<input checked="" type="checkbox"/> Personal Funds of the Candidate		

Original Amount of Loan 9.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 9.00
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TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 03 / 24 / 2022	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....▶	9.00
TOTALS This Period (last page in this line only).....▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.7276
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item Marter, James, Thomas, ,		Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 233 Fox Chase Drive North		
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
752.52	0.00	752.52

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 03 / 27 / 2022	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....▶	<input type="text" value="752.52"/>
TOTALS This Period (last page in this line only)▶	<input type="text"/>

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Marter for Congress** Transaction ID : **SC/10.7159**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2022
Marter, James, Thomas, ,			<input checked="" type="checkbox"/> Primary
Mailing Address			<input type="checkbox"/> General
233 Fox Chase Drive North			<input type="checkbox"/> Other (specify) ▼
City	State	ZIP Code	<input checked="" type="checkbox"/> Personal Funds of the Candidate
Oswego	IL	60543	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
7500.00	0.00	7500.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y	M M / D D / Y Y Y Y	% (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	03 / 30 / 2022	n/a	0.00	

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City	Amount Guaranteed Outstanding:
State	
ZIP Code	
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City	Amount Guaranteed Outstanding:
State	
ZIP Code	
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City	Amount Guaranteed Outstanding:
State	
ZIP Code	
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City	Amount Guaranteed Outstanding:
State	
ZIP Code	

SUBTOTALS This Period This Page (optional).....▶	7500.00
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Marter for Congress** Transaction ID : **SC/10.7280**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2022
Marter, James, Thomas, ,			<input checked="" type="checkbox"/> Primary
Mailing Address			<input type="checkbox"/> General
233 Fox Chase Drive North			<input type="checkbox"/> Other (specify) ▼
City	State	ZIP Code	<input checked="" type="checkbox"/> Personal Funds of the Candidate
Oswego	IL	60543	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
549.00	0.00	549.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y	M M / D D / Y Y Y Y	% (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	03 / 30 / 2022	n/a	0.00	

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	549.00
TOTALS This Period (last page in this line only).....▶	

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

**SCHEDULE C (FEC Form 3)
LOANS**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.7281**
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
<input checked="" type="checkbox"/> Personal Funds of the Candidate		

Original Amount of Loan 417.85	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 417.85
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TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 03 / 31 / 2022	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	417.85
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.7445**
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 549.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 549.00
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TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 04 / 30 / 2022	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	549.00
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.7446
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item Marter, James, Thomas, ,		Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 233 Fox Chase Drive North		
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
324.52	0.00	324.52

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 04 / 30 / 2022	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	324.52
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.7480**
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
City Oswego		<input type="checkbox"/> Other (specify) ▼
State IL	ZIP Code 60543	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 37.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 37.00
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TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 05 / 07 / 2022	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....▶	[] 37.00
TOTALS This Period (last page in this line only).....▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.7598
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item Marter, James, Thomas, ,		Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 233 Fox Chase Drive North		
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
9345.38	0.00	9345.38

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 06 / 30 / 2022	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....▶	9345.38
TOTALS This Period (last page in this line only).....▶	<input type="text"/>

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

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.7622**
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 250.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 250.00
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TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 08 / 15 / 2022	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....▶	[] 250.00
TOTALS This Period (last page in this line only).....▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.11298**
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2026
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 47.74	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 47.74
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TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 10 / 10 / 2025	M M / D D / Y Y Y Y na	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....▶	47.74
TOTALS This Period (last page in this line only).....▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.11299
 Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item Marter, James, Thomas, ,		Election: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 233 Fox Chase Drive North		
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
47.74	0.00	47.74

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 11 / 10 / 2025	M M / D D / Y Y Y Y na	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....▶	<input type="text" value="47.74"/>
TOTALS This Period (last page in this line only)▶	<input type="text"/>

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

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.11300

Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

Memo Item

Election: 2026

Primary
 General
 Other (specify) ▼

Marter, James, Thomas, ,

Mailing Address

233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

47.74

0.00

47.74

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
12 / 10 / 2025

M M / D D / Y Y Y Y
na

0.00 % (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional).....▶

47.74

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

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Marter for Congress** Transaction ID : **SC/10.6700**

LOAN SOURCE Full Name (Last, First, Middle Initial) Marter for Congress		<input type="checkbox"/> Memo Item	Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 233 Fox Chase Drive North			
City Oswego	State IL	ZIP Code 60543	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 549.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 549.00
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TERMS	Date Incurred M M / D D / Y Y Y Y 10 / 31 / 2021	Date Due M M / D D / Y Y Y Y n/a	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	549.00
TOTALS This Period (last page in this line only).....▶	31501.99

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