

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Rikleen Committee

ADDRESS (number and street)

PO Box 2033

Check if different
than previously
reported. (ACC)

Acton

MA

01720

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00903781

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

MA

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

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

04

D D /

01

Y Y Y Y /

2026

through

M M /

06

D D /

30

Y Y Y Y /

2026

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

Type or Print Name of Treasurer

Lo, Andy, , ,

Signature of Treasurer

Lo, Andy, , ,

Date

M M /

07

D D /

16

Y Y Y Y /

2026

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

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

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Rikleen Committee

Report Covering the Period:

From:

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

To:

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

	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))	3632.56	55445.74
(b) Total Contribution Refunds (from Line 20(d))	0.00	20.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	3632.56	55425.74
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	4361.88	77323.76
(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))	4361.88	77323.76
8. Cash on Hand at Close of Reporting Period (from Line 27)	1989.22	
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)	59389.41	

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

Rikleen Committee

Report Covering the Period:

From:

M M / D D / Y Y Y Y
04 / 01 / 2026

To:

M M / D D / Y Y Y Y
06 / 30 / 2026**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

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

1420.00

33256.27

(ii) Unitemized

2212.56

22035.38

(iii) TOTAL of contributions
from individuals ▶

3632.56

55291.65

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

0.00

154.09

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

3632.56

55445.74

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

0.00

23887.24

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

0.00

23887.24

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)..... ▶

3632.56

79332.98

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.....

4361.88

77323.76

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES

0.00

0.00

19. LOAN REPAYMENTS:

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

0.00

0.00

(b) Of All Other Loans

0.00

0.00

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

0.00

0.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees

0.00

20.00

(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

20.00

21. OTHER DISBURSEMENTS

0.00

0.00

22. **TOTAL DISBURSEMENTS**

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

4361.88

77343.76

III. CASH SUMMARY

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

2718.54

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

3632.56

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

6351.10

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

4361.88

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

1989.22

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 31

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

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NAME OF COMMITTEE (In Full)

Rikleen Committee

Full Name (Last, First, Middle Initial)

Baker, Ralph, , ,

A.

Mailing Address 840 Ashby West Road

City

Fitchburg

State

MA

Zip Code

01420

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 08 2026

Transaction ID : SA11AI.6245

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Bullitt-Jonas, Margaret, , ,

B.

Mailing Address 109 Olander Drive

City

Northampton

State

MA

Zip Code

01060

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 28 2026

Transaction ID : SA11AI.6273

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Cullen, Catherine, , ,

C.

Mailing Address 189 R School St

City

Acton

State

MA

Zip Code

01720

FEC ID number of contributing
federal political committee.

C

Name of Employer

BILH

Occupation

Nurse

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 27 2026

Transaction ID : SA11AI.6234

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

175.00

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 6 OF 31

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

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NAME OF COMMITTEE (In Full)

Rikleen Committee

Full Name (Last, First, Middle Initial)

Immonen, Leo, , ,

A.

Mailing Address 12 Virgil Pond Way

City

Wrentham

State

MA

Zip Code

02093

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

239.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 10 2026

Transaction ID : SA11AI.6253

Amount of Each Receipt this Period

39.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Morgan, Jessica, , ,

B.

Mailing Address 10 Florence St.

City

Medford

State

MA

Zip Code

02155

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chewy Inc.

Occupation

Software Engineer

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 24 2026

Transaction ID : SA11AI.6232

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Silber, Rachel, , ,

C.

Mailing Address 59 Orient Ave

City

Melrose

State

MA

Zip Code

02176

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

217.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 08 2026

Transaction ID : SA11AI.6249

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

281.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Rikleen Committee

Full Name (Last, First, Middle Initial)

Silber, Rachel, , ,

A.

Mailing Address 59 Orient Ave

City

Melrose

State

MA

Zip Code

02176

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

267.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 09 2026

Transaction ID : SA11AI.6251

Amount of Each Receipt this Period

50.00



Memo Item

Full Name (Last, First, Middle Initial)

Silber, Rachel, , ,

B.

Mailing Address 59 Orient Ave

City

Melrose

State

MA

Zip Code

02176

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

292.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 28 2026

Transaction ID : SA11AI.6271

Amount of Each Receipt this Period

25.00



Memo Item

Full Name (Last, First, Middle Initial)

Stewart, Joe, , ,

C.

Mailing Address 65 Hickory Road

City

Wrentham

State

MA

Zip Code

02093

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sedon Socius LLC

Occupation

Software consulting

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 15 2026

Transaction ID : SA11AI.6220

Amount of Each Receipt this Period

600.00



Memo Item

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

675.00

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

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

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

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NAME OF COMMITTEE (In Full)

Rikleen Committee

Full Name (Last, First, Middle Initial)

Stiller, Mel, , ,

A.

Mailing Address 378 Bacon Street

City

WALTHAM

State

MA

Zip Code

02451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mel Stiller

Occupation

Piano player

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1063.27

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		08		2026

Transaction ID : SA11AI.6250

Amount of Each Receipt this Period

39.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Wood, Jeanine, , ,

B.

Mailing Address 12 Christina St

City

Littleton

State

MA

Zip Code

01460

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		28		2026

Transaction ID : SA11AI.6274

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

289.00

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

1420.00

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

PAGE 9 OF 31

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

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NAME OF COMMITTEE (In Full)

Rikleen Committee

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address PO Box 962017

Date of Disbursement

M M	D D	Y Y Y Y
04	30	2026

City
BostonState
MAZip Code
02196Purpose of Disbursement
Merchant services

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

109.61

Transaction ID : SB17.6287

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address PO Box 962017

Date of Disbursement

M M	D D	Y Y Y Y
05	31	2026

City
BostonState
MAZip Code
02196Purpose of Disbursement
Merchant services

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

38.98

Transaction ID : SB17.6288

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address PO Box 962017

Date of Disbursement

M M	D D	Y Y Y Y
06	30	2026

City
BostonState
MAZip Code
02196Purpose of Disbursement
Merchant services

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

31.03

Transaction ID : SB17.6289

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

179.62

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

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

PAGE 10 OF 31

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

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NAME OF COMMITTEE (In Full)

Rikleem Committee

Full Name (Last, First, Middle Initial)

A. Action Network

Mailing Address 1900 L St NW Suite 900

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		06		2026

City
WashingtonState
DCZip Code
20036

FEC Identification Number

C

Purpose of Disbursement
Organization toolset

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

66.94

Transaction ID : SB17.6290

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Action Network

Mailing Address 1900 L St NW Suite 900

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2026

City
WashingtonState
DCZip Code
20036

FEC Identification Number

C

Purpose of Disbursement
Organization toolset

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

10.63

Transaction ID : SB17.6291

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. Action Network

Mailing Address 1900 L St NW Suite 900

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2026

City
WashingtonState
DCZip Code
20036

FEC Identification Number

C

Purpose of Disbursement
Organization toolset

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

35.06

Transaction ID : SB17.6292

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

112.63

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

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

PAGE 11 OF 31

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

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NAME OF COMMITTEE (In Full)

Rikleen Committee

Full Name (Last, First, Middle Initial)

A. Boston Globe

Mailing Address 53 State St

Date of Disbursement

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

City
BostonState
MAZip Code
02109

FEC Identification Number

C

Purpose of Disbursement
Subscription

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

27.72

Transaction ID : SB17.6299

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. BUMPERACTIVE

Mailing Address 1045 A Reinli Street

Date of Disbursement

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

City
AustinState
TXZip Code
78723

FEC Identification Number

C

Purpose of Disbursement
Campaign merchandise

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

92.02

Transaction ID : SB17.6301

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. BUMPERACTIVE

Mailing Address 1045 A Reinli Street

Date of Disbursement

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

City
AustinState
TXZip Code
78723

FEC Identification Number

C

Purpose of Disbursement
Campaign merchandise

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

95.48

Transaction ID : SB17.6302

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

215.22

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

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

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

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NAME OF COMMITTEE (In Full)

Rikleem Committee

Full Name (Last, First, Middle Initial)

A. Bumperactive

Mailing Address 1045 A Reinli Street

Date of Disbursement

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

City
AustinState
TXZip Code
78723

FEC Identification Number

C

Purpose of Disbursement
Campaign merchandise

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

71.22

Transaction ID : SB17.6303

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Bumperactive

Mailing Address 1045 A Reinli Street

Date of Disbursement

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

City
AustinState
TXZip Code
78723

FEC Identification Number

C

Purpose of Disbursement
Campaign merchandise

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

41.57

Transaction ID : SB17.6304

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Connolly Printing

Mailing Address 17B Gill St

Date of Disbursement

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

City
WoburnState
MAZip Code
01801

FEC Identification Number

C

Purpose of Disbursement
Buttons (200), signs (300), banner, stickers (500)

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1176.22

Transaction ID : SB17.6312

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

1289.01

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

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

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

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NAME OF COMMITTEE (In Full)

Rikleem Committee

Full Name (Last, First, Middle Initial)

A. Instagram

Mailing Address 1601 Willow Rd

Date of Disbursement

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

City
Menlo ParkState
CAZip Code
94025

FEC Identification Number

C

Purpose of Disbursement
Social media

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

25.49

Transaction ID : SB17.6317

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Instagram

Mailing Address 1601 Willow Rd

Date of Disbursement

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

City
Menlo ParkState
CAZip Code
94025

FEC Identification Number

C

Purpose of Disbursement
Social media

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

25.49

Transaction ID : SB17.6318

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Lo, Andy, , ,

Mailing Address PO Box 15855

Date of Disbursement

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

City
SeattleState
WAZip Code
98115

FEC Identification Number

C

Purpose of Disbursement
Treasury services

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

720.00

Transaction ID : SB17.6293

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

770.98

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Rikleen Committee

Full Name (Last, First, Middle Initial)

A. Raise More Inc

Mailing Address 40 Ocean Parkway Apt 4A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		17		2026

City
BrooklynState
NYZip Code
11218Purpose of Disbursement
Fundraising services

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.6332

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Raise More Inc

Mailing Address 40 Ocean Parkway Apt 4A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		16		2026

City
BrooklynState
NYZip Code
11218Purpose of Disbursement
Fundraising services

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.6333

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Verizon

Mailing Address 1 Verizon Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2026

City
Basking RidgeState
NJZip Code
07920Purpose of Disbursement
Wireless service

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

66.91

Transaction ID : SB17.6340

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

1066.91

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Rikleem Committee

Full Name (Last, First, Middle Initial)

A. Verizon

Mailing Address 1 Verizon Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2026

City
Basking RidgeState
NJZip Code
07920Purpose of Disbursement
Wireless service

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

66.85

Transaction ID : SB17.6341

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Verizon

Mailing Address 1 Verizon Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		15		2026

City
Basking RidgeState
NJZip Code
07920Purpose of Disbursement
Wireless service

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

66.87

Transaction ID : SB17.6342

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

Purpose of Disbursement

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

133.72

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

3768.09

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

PAGE 16 OF 31

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4449

Rikleen Committee

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Rikleen, Alexander, , ,

Mailing Address

PO Box 2033

City

Acton

State

MA

ZIP Code

01720

☒ Personal Funds of the Candidate

Original Amount of Loan

3173.13

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3173.13

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

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

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y
N/A

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).....▶

3173.13

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

PAGE 17 OF 31

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4450

Rikleen Committee

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Rikleen, Alexander, , ,

Mailing Address

PO Box 2033

City

Acton

State

MA

ZIP Code

01720

☒ Personal Funds of the Candidate

Original Amount of Loan

1538.63

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1538.63

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 31 / 2025

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y
N/A

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).....▶

1538.63

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

PAGE 18 OF 31

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5229

Rikleen Committee

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Rikleen, Alexander, , ,

Mailing Address

PO Box 2033

City

Acton

State

MA

ZIP Code

01720

☒ Personal Funds of the Candidate

Original Amount of Loan

549.17

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

549.17

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

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

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y
N/A

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).....▶

549.17

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

PAGE 19 OF 31

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5581

Rikleen Committee

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Rikleen, Alexander, , ,

Mailing Address

PO Box 2033

City

Acton

State

MA

ZIP Code

01720

☒ Personal Funds of the Candidate

Original Amount of Loan

2866.87

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2866.87

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
10 31 / 2025

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y
N/A

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).....▶

2866.87

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

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5582

Rikleen Committee

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Rikleen, Alexander, , ,

Mailing Address

PO Box 2033

City

Acton

State

MA

ZIP Code

01720

☒ Personal Funds of the Candidate

Original Amount of Loan

2795.87

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2795.87

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
11 30 / 2025

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y
N/A

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).....▶

2795.87

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

PAGE 21 OF 31

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5512

Rikleen Committee

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Rikleen, Alexander, , ,

Mailing Address

PO Box 2033

City

Acton

State

MA

ZIP Code

01720

☒ Personal Funds of the Candidate

Original Amount of Loan

1100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1100.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
12 11 / 2025M M / D D / Y Y Y Y
N/A

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).....▶

1100.00

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

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5583

Rikleen Committee

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Rikleen, Alexander, , ,

Mailing Address

PO Box 2033

City

Acton

State

MA

ZIP Code

01720

☒ Personal Funds of the Candidate

Original Amount of Loan

2795.87

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2795.87

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
12 31 / 2025

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y
N/A

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).....▶

2795.87

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

PAGE 23 OF 31

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5848

Rikleen Committee

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Rikleen, Alexander, , ,

Mailing Address

PO Box 2033

City

Acton

State

MA

ZIP Code

01720

☒ Personal Funds of the Candidate

Original Amount of Loan

2795.87

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2795.87

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
01 31 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y
N/A

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).....▶

2795.87

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

PAGE 24 OF 31

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5849

Rikleen Committee

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Rikleen, Alexander, , ,

Mailing Address

PO Box 2033

City

Acton

State

MA

ZIP Code

01720

☒ Personal Funds of the Candidate

Original Amount of Loan

2873.16

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2873.16

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 / 28 / 2026M M / D D / Y Y Y Y
/ / N/AM M / D D / Y Y Y Y
/ / N/AM M / D D / Y Y Y Y
/ / N/A

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).....▶

2873.16

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

PAGE 25 OF 31

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5850

Rikleen Committee

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Rikleen, Alexander, , ,

Mailing Address

PO Box 2033

City

Acton

State

MA

ZIP Code

01720

☒ Personal Funds of the Candidate

Original Amount of Loan

3398.67

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3398.67

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 31 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y
N/A

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).....▶

3398.67

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

23887.24

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

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

PAGE 26 OF 31

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

NAME OF COMMITTEE (In Full)

Rikleen Committee

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

Break Blue Strategies

Nature of Debt (Purpose):

Fundraising consulting

Mailing Address 205 Laurel Grove Ln

City

San Jose

State

CA

Zip Code

95126

Outstanding Balance Beginning This Period

4000.00

Transaction ID : SD10.6352

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

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

Break Blue Strategies

Nature of Debt (Purpose):

Fundraising consulting

Mailing Address 205 Laurel Grove Ln

City

San Jose

State

CA

Zip Code

95126

Outstanding Balance Beginning This Period

4000.00

Transaction ID : SD10.6353

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

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

Break Blue Strategies

Nature of Debt (Purpose):

Design services

Mailing Address 205 Laurel Grove Ln

City

San Jose

State

CA

Zip Code

95126

Outstanding Balance Beginning This Period

600.00

Transaction ID : SD10.6350

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

600.00

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

8600.00

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

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

PAGE 27 OF 31

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

NAME OF COMMITTEE (In Full)

Rikleen Committee

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

Break Blue Strategies

Nature of Debt (Purpose):

Fundraising consulting

Mailing Address 205 Laurel Grove Ln

City

San Jose

State

CA

Zip Code

95126

Outstanding Balance Beginning This Period

4000.00

Transaction ID : SD10.6354

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

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

Break Blue Strategies

Nature of Debt (Purpose):

Political consulting

Mailing Address 205 Laurel Grove Ln

City

San Jose

State

CA

Zip Code

95126

Outstanding Balance Beginning This Period

5000.00

Transaction ID : SD10.6355

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

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

Break Blue Strategies

Nature of Debt (Purpose):

Fundraising consulting

Mailing Address 205 Laurel Grove Ln

City

San Jose

State

CA

Zip Code

95126

Outstanding Balance Beginning This Period

4000.00

Transaction ID : SD10.6356

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

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

13000.00

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 28 OF 31

FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Rikleen Committee

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

Grassroots Analytics

Nature of Debt (Purpose):

Campaign data

Mailing Address 806 7th St NW Ste 3

City

Washington

State

DC

Zip Code

20001

Outstanding Balance Beginning This Period

2000.00

Transaction ID : SD10.5221

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

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

Grassroots Analytics

Nature of Debt (Purpose):

Campaign data

Mailing Address 806 7th St NW Ste 3

City

Washington

State

DC

Zip Code

20001

Outstanding Balance Beginning This Period

800.00

Transaction ID : SD10.5227

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

800.00

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

Rikleen, Alexander, , ,

Nature of Debt (Purpose):

Mileage (499.4mi)

Mailing Address PO Box 2033

City

Acton

State

MA

Zip Code

01720

Outstanding Balance Beginning This Period

349.58

Transaction ID : SD10.5222

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

349.58

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

3149.58

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

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

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

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

PAGE 29 OF 31

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

NAME OF COMMITTEE (In Full)

Rikleen Committee

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

Rikleen, Alexander, , ,

Nature of Debt (Purpose):

Mileage (623.4mi)

Mailing Address PO Box 2033

City
ActonState
MAZip Code
01720

Outstanding Balance Beginning This Period

436.38

Transaction ID : SD10.5225

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

436.38

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

Rikleen, Alexander, , ,

Nature of Debt (Purpose):

Mileage (1875.7mi)

Mailing Address PO Box 2033

City
ActonState
MAZip Code
01720

Outstanding Balance Beginning This Period

1312.99

Transaction ID : SD10.5226

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1312.99

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

Rikleen, Alexander, , ,

Nature of Debt (Purpose):

Mileage (878mi)

Mailing Address PO Box 2033

City
ActonState
MAZip Code
01720

Outstanding Balance Beginning This Period

614.60

Transaction ID : SD10.5228

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

614.60

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

2363.97

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

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

PAGE 30 OF 31

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

NAME OF COMMITTEE (In Full)

Rikleen Committee

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

Rikleen, Alexander, , ,

Nature of Debt (Purpose):

Mileage (1355.4mi)

Mailing Address PO Box 2033

City
ActonState
MAZip Code
01720

Outstanding Balance Beginning This Period

948.78

Transaction ID : SD10.5578

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

948.78

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

Rikleen, Alexander, , ,

Nature of Debt (Purpose):

Mileage (1421.7mi)

Mailing Address PO Box 2033

City
ActonState
MAZip Code
01720

Outstanding Balance Beginning This Period

995.19

Transaction ID : SD10.5579

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

995.19

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

Rikleen, Alexander, , ,

Nature of Debt (Purpose):

Mileage (2350mi)

Mailing Address PO Box 2033

City
ActonState
MAZip Code
01720

Outstanding Balance Beginning This Period

1645.00

Transaction ID : SD10.5580

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1645.00

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

3588.97

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

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

PAGE 31 OF 31

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

NAME OF COMMITTEE (In Full)

Rikleen Committee

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

Rikleen, Alexander, , ,

Nature of Debt (Purpose):

Mileage (1192.5mi)

Mailing Address PO Box 2033

City
ActonState
MAZip Code
01720

Outstanding Balance Beginning This Period

864.56

Transaction ID : SD10.5845

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

864.56

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

Rikleen, Alexander, , ,

Nature of Debt (Purpose):

Mileage (2177.5mi)

Mailing Address PO Box 2033

City
ActonState
MAZip Code
01720

Outstanding Balance Beginning This Period

1578.69

Transaction ID : SD10.5846

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1578.69

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

Rikleen, Alexander, , ,

Nature of Debt (Purpose):

Mileage (3250.2mi)

Mailing Address PO Box 2033

City
ActonState
MAZip Code
01720

Outstanding Balance Beginning This Period

2356.40

Transaction ID : SD10.5847

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2356.40

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

4799.65

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

35502.17

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

23887.24

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

59389.41