



## SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**ROMAN FOR CONGRESS**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2025 To: M M / D D / Y Y Y Y 09 / 30 / 2025

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	38.75	38.75
(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)) .....	38.75	38.75
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	555.55	555.55
(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)) .....	555.55	555.55
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>	34.68	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	551.48	

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**ROMAN FOR CONGRESS**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized.....	38.75	38.75
(iii) TOTAL of contributions from individuals ▶	38.75	38.75
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	38.75	38.75
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	551.48	551.48
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	551.48	551.48
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	590.23	590.23

**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.....	555.55	555.55
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	555.55	555.55

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	590.23
25. SUBTOTAL (add Line 23 and Line 24).....	590.23
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	555.55
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	34.68

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

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

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

NAME OF COMMITTEE (In Full)  
**ROMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
VALENCIANO, ROMAN, , ,

Mailing Address ROMAN FOR CONGRESS  
PO BOX 2

City EARLVILLE State IL Zip Code 60518

FEC ID number of contributing federal political committee. **C** H6IL14152

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
150.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 03 / 2025

**Transaction ID : SA13A.4118**

Amount of Each Receipt this Period  
150.00

Memo Item  
Candidate loan from personal funds

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

Mailing Address ROMAN FOR CONGRESS  
PO BOX 2

City EARLVILLE State IL Zip Code 60518

FEC ID number of contributing federal political committee. **C** H6IL14152

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
179.48

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 29 / 2025

**Transaction ID : SA13A.4121**

Amount of Each Receipt this Period  
29.48

Memo Item  
Candidate loan from personal funds

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

Mailing Address ROMAN FOR CONGRESS  
PO BOX 2

City EARLVILLE State IL Zip Code 60518

FEC ID number of contributing federal political committee. **C** H6IL14152

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
211.48

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 30 / 2025

**Transaction ID : SA13A.4125**

Amount of Each Receipt this Period  
32.00

Memo Item  
Candidate loan from personal funds

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 211.48

**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 17  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
**ROMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
VALENCIANO, ROMAN, , ,

Mailing Address ROMAN FOR CONGRESS  
PO BOX 2

City EARLVILLE State IL Zip Code 60518

FEC ID number of contributing federal political committee. **C** H6IL14152

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
261.48

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 03 / 2025

Transaction ID : SA13A.4126

Amount of Each Receipt this Period  
50.00

Memo Item  
Candidate loan from personal funds

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

Mailing Address ROMAN FOR CONGRESS  
PO BOX 2

City EARLVILLE State IL Zip Code 60518

FEC ID number of contributing federal political committee. **C** H6IL14152

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
301.48

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 04 / 2025

Transaction ID : SA13A.4127

Amount of Each Receipt this Period  
40.00

Memo Item  
Candidate loan from personal funds

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

Mailing Address ROMAN FOR CONGRESS  
PO BOX 2

City EARLVILLE State IL Zip Code 60518

FEC ID number of contributing federal political committee. **C** H6IL14152

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
381.48

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 05 / 2025

Transaction ID : SA13A.4128

Amount of Each Receipt this Period  
80.00

Memo Item  
Candidate loan from personal funds

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 170.00

**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 7 OF 17  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
**ROMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
VALENCIANO, ROMAN, , ,

Mailing Address ROMAN FOR CONGRESS  
PO BOX 2

City EARLVILLE State IL Zip Code 60518

FEC ID number of contributing federal political committee. **C** H6IL14152

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
411.48

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2025

Transaction ID : SA13A.4129

Amount of Each Receipt this Period  
30.00

Memo Item  
Candidate loan from personal funds

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

Mailing Address ROMAN FOR CONGRESS  
PO BOX 2

City EARLVILLE State IL Zip Code 60518

FEC ID number of contributing federal political committee. **C** H6IL14152

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
511.48

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 16 / 2025

Transaction ID : SA13A.4130

Amount of Each Receipt this Period  
100.00

Memo Item  
Candidate loan from personal funds

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

Mailing Address ROMAN FOR CONGRESS  
PO BOX 2

City EARLVILLE State IL Zip Code 60518

FEC ID number of contributing federal political committee. **C** H6IL14152

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
551.48

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 17 / 2025

Transaction ID : SA13A.4131

Amount of Each Receipt this Period  
40.00

Memo Item  
Candidate loan from personal funds

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	170.00
<b>TOTAL</b> This Period (last page this line number only).....▶	551.48

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

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

NAME OF COMMITTEE (In Full)  
**ROMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. 48HOURPRINT.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2025
Mailing Address 6410 Eastland Rd E		FEC Identification Number C C00903237
City Brook Park	State OH	Zip Code 44142
Purpose of Disbursement CAMPAIGN MARKETING MATERIALS		006
Candidate Name ROMAN FOR CONGRESS		Category/ Type
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	Amount of Each Disbursement this Period 123.75	
		Transaction ID : SB17.4136
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B.</b>		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
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Amount of Each Disbursement this Period	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C.</b>		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
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Amount of Each Disbursement this Period	
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	123.75
<b>TOTAL</b> This Period (last page this line number only).....▶	123.75

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

NAME OF COMMITTEE (In Full) **ROMAN FOR CONGRESS** Transaction ID : **SC/10.4118**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2026
VALENCIANO, ROMAN, , ,			<input checked="" type="checkbox"/> Primary
Mailing Address			<input type="checkbox"/> General
ROMAN FOR CONGRESS			<input type="checkbox"/> Other (specify) ▼
PO BOX 2			
City	State	ZIP Code	<input checked="" type="checkbox"/> Personal Funds of the Candidate
EARLVILLE	IL	60518	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
150.00	0.00	150.00

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 07 / 03 / 2025	M M / D D / Y Y Y Y 12/31/2026	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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	150.00
<b>TOTALS</b> 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) **ROMAN FOR CONGRESS** Transaction ID : **SC/10.4121**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2026
VALENCIANO, ROMAN, , ,			<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address ROMAN FOR CONGRESS PO BOX 2			
City	State	ZIP Code	<input checked="" type="checkbox"/> Personal Funds of the Candidate
EARLVILLE	IL	60518	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
29.48	0.00	29.48

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	07 / 29 / 2025	12/31/2026	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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	29.48
<b>TOTALS</b> 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) **ROMAN FOR CONGRESS** Transaction ID : **SC/10.4125**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2026
VALENCIANO, ROMAN, , ,		<input checked="" type="checkbox"/> Primary
Mailing Address ROMAN FOR CONGRESS PO BOX 2		<input type="checkbox"/> General
City State ZIP Code		<input type="checkbox"/> Other (specify) ▼
EARLVILLE IL 60518		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
32.00	0.00	32.00

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	07 / 30 / 2025	12/31/2026	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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	32.00
<b>TOTALS</b> 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) **ROMAN FOR CONGRESS** Transaction ID : **SC/10.4126**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2026
VALENCIANO, ROMAN, , ,			<input checked="" type="checkbox"/> Primary
Mailing Address			<input type="checkbox"/> General
ROMAN FOR CONGRESS			<input type="checkbox"/> Other (specify) ▼
PO BOX 2			
City	State	ZIP Code	<input checked="" type="checkbox"/> Personal Funds of the Candidate
EARLVILLE	IL	60518	

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

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 09 / 03 / 2025	M M / D D / Y Y Y Y 12/31/2026	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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	50.00
<b>TOTALS</b> 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) **ROMAN FOR CONGRESS** Transaction ID : **SC/10.4127**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2026
VALENCIANO, ROMAN, , ,			<input checked="" type="checkbox"/> Primary
Mailing Address			<input type="checkbox"/> General
ROMAN FOR CONGRESS			<input type="checkbox"/> Other (specify) ▼
PO BOX 2			
City	State	ZIP Code	<input checked="" type="checkbox"/> Personal Funds of the Candidate
EARLVILLE	IL	60518	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
40.00	0.00	40.00

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	09 / 04 / 2025	12/31/2026	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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	40.00
<b>TOTALS</b> 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) **ROMAN FOR CONGRESS** Transaction ID : **SC/10.4128**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2026
VALENCIANO, ROMAN, , ,			<input checked="" type="checkbox"/> Primary
Mailing Address			<input type="checkbox"/> General
ROMAN FOR CONGRESS			<input type="checkbox"/> Other (specify) ▼
PO BOX 2			
City	State	ZIP Code	<input checked="" type="checkbox"/> Personal Funds of the Candidate
EARLVILLE	IL	60518	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
80.00	0.00	80.00

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	09 / 05 / 2025	12/31/2026	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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	80.00
<b>TOTALS</b> 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) **ROMAN FOR CONGRESS** Transaction ID : **SC/10.4129**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2026
VALENCIANO, ROMAN, , ,			<input checked="" type="checkbox"/> Primary
Mailing Address			<input type="checkbox"/> General
ROMAN FOR CONGRESS			<input type="checkbox"/> Other (specify) ▼
PO BOX 2			
City	State	ZIP Code	<input checked="" type="checkbox"/> Personal Funds of the Candidate
EARLVILLE	IL	60518	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
30.00	0.00	30.00

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 09 / 15 / 2025	M M / D D / Y Y Y Y 12/31/2026	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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	30.00
<b>TOTALS</b> 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) **ROMAN FOR CONGRESS** Transaction ID : **SC/10.4130**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2026
VALENCIANO, ROMAN, , ,		<input checked="" type="checkbox"/> Primary
Mailing Address ROMAN FOR CONGRESS PO BOX 2		<input type="checkbox"/> General
City State ZIP Code		<input type="checkbox"/> Other (specify) ▼
EARLVILLE IL 60518		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100.00	0.00	100.00

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	09 / 16 / 2025	12/31/2026	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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	100.00
<b>TOTALS</b> 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) **ROMAN FOR CONGRESS** Transaction ID : **SC/10.4131**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2026
VALENCIANO, ROMAN, , ,			<input checked="" type="checkbox"/> Primary
Mailing Address			<input type="checkbox"/> General
ROMAN FOR CONGRESS			<input type="checkbox"/> Other (specify) ▼
PO BOX 2			
City	State	ZIP Code	<input checked="" type="checkbox"/> Personal Funds of the Candidate
EARLVILLE	IL	60518	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
40.00	0.00	40.00

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	09 / 17 / 2025	12/31/2026	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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	40.00
<b>TOTALS</b> This Period (last page in this line only).....▶	551.48

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