

**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

Friends for Jennifer Todd

ADDRESS (number and street)

P O Box 3

Check if different
than previously
reported. (ACC)

Glen Carbon

IL

62034

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00896217

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

IL

15

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
03 / 17 / 2026in the
State of

IL

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

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

through

M M / D D / Y Y Y Y
02 / 25 / 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

Washburn, Marilyn, J.,

Signature of Treasurer

Washburn, Marilyn, J.,

Date

M M / D D / Y Y Y Y
03 / 03 / 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

Friends for Jennifer Todd

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		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))	5680.00	0.00
(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))	5680.00	0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	9315.36	0.00
(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))	9315.36	0.00
8. Cash on Hand at Close of Reporting Period (from Line 27)	- 3635.36	
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)	3000.00	

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

Friends for Jennifer Todd

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2026

To:

MM / DD / YYYY
02 / 25 / 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).....

1550.00

0.00

(ii) Unitemized

3862.00

0.00

(iii) TOTAL of contributions
from individuals ▶

5412.00

0.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

268.00

0.00

(d) The Candidate

0.00

0.00

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

5680.00

0.00

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

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

0.00

0.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)

0.00

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)..... ▶

5680.00

0.00

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.....	9315.36	0.00
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. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	9315.36	0.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	5680.00
25. SUBTOTAL (add Line 23 and Line 24).....	5680.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	9315.36
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	- 3635.36

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 13

☒ 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)

Friends for Jennifer Todd

Full Name (Last, First, Middle Initial)

Barton, Jean, , ,

A.

Mailing Address 926 Webster Lane

City

Golden Eagle

State

IL

Zip Code

62036

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
01 / 26 / 2026

Transaction ID : SA11AI.4191

Amount of Each Receipt this Period

300.00



Memo Item

Contribution earmarked through Act Blue

Full Name (Last, First, Middle Initial)

Hudgins, Mary, , ,

B.

Mailing Address 61 Frontier Lake Drive

City

Springfield

State

IL

Zip Code

62707

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
01 / 23 / 2026

Transaction ID : SA11AI.4187

Amount of Each Receipt this Period

250.00



Memo Item

Contribution earmarked through Act Blue

Full Name (Last, First, Middle Initial)

Nollen, Sheila, , ,

C.

Mailing Address 7835 E 1000th Street

City

Macomb

State

IL

Zip Code

61455

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 12 / 2026

Transaction ID : SA11AI.4134

Amount of Each Receipt this Period

500.00



Memo Item

Contribution earmarked through Act Blue

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

1050.00

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 13

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

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NAME OF COMMITTEE (In Full)

Friends for Jennifer Todd

Full Name (Last, First, Middle Initial)

Weaver, Erika, C, ,

A. Mailing Address P O Box 818

City
Mattoon

State
IL

Zip Code
61938

FEC ID number of contributing
federal political committee.

C

Name of Employer
Illinois State Treasurer's Off

Occupation
Attorney

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.4100

Amount of Each Receipt this Period

500.00

☐ Memo Item

Contribution earmarked through Act Blue

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

500.00

1550.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 13

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

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NAME OF COMMITTEE (In Full)

Friends for Jennifer Todd

Full Name (Last, First, Middle Initial)

Bond County Democratic Central Committee

Mailing Address 977 Cottonwood Ave

City

Greenville

State

IL

Zip Code

62246

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
01 06 2026

Transaction ID : SA11C.4384

Amount of Each Receipt this Period

268.00



Memo Item

Meet and Greet Fundraiser Donation

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period



Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period



Memo Item

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

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

268.00

268.00

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

PAGE 8 OF 13

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

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NAME OF COMMITTEE (In Full)

Friends for Jennifer Todd

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address 175 E Houston Street

Date of Disbursement

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

City
San AntonioState
TXZip Code
78205

FEC Identification Number

C

Purpose of Disbursement
Services

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

Amount of Each Disbursement this Period

269.96

Transaction ID : SB17.4367

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

B. Grassroots AnalyticsMailing Address 806 7th Street
Ste 3

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		7	2		2	0	2	6

City
WashingtonState
DCZip Code
20001

FEC Identification Number

C

Purpose of Disbursement
Services

003

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

Amount of Each Disbursement this Period

481.76

Transaction ID : SB17.4295

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

C. Loves #578

Mailing Address 9191 State Route 140

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		9	1		2	0	2	6

City
HamelState
ILZip Code
62046

FEC Identification Number

C

Purpose of Disbursement
Gasoline

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

Amount of Each Disbursement this Period

36.19

Transaction ID : SB17.4346

☐ Memo Item

State:

District:

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

787.91

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:
(check only one)

PAGE 9 OF 13

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Friends for Jennifer Todd

Full Name (Last, First, Middle Initial)

A. Mia PhiferMailing Address 535 N Michigan Ave
#809City
ChicagoState
ILZip Code
60611Purpose of Disbursement
Services

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.4278

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mia PhiferMailing Address 535 N Michigan Ave
#809City
ChicagoState
ILZip Code
60611Purpose of Disbursement
Services

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.4280

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mia PhiferMailing Address 535 N Michigan Ave
#809City
ChicagoState
ILZip Code
60611Purpose of Disbursement
Services

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.4282

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

2250.00

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

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

PAGE 10 OF 13

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

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NAME OF COMMITTEE (In Full)

Friends for Jennifer Todd

Full Name (Last, First, Middle Initial)

A. Mia PhiferMailing Address 535 N Michigan Ave
#809City
ChicagoState
ILZip Code
60611Purpose of Disbursement
Services

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		29		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.4283

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mia PhiferMailing Address 535 N Michigan Ave
#809City
ChicagoState
ILZip Code
60611Purpose of Disbursement
Services

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		11		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.4284

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Numero Inc

Mailing Address 695 Town Center Drive

City
Costa MesaState
CAZip Code
92626Purpose of Disbursement
Computer Services

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		16		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

1150.00

Transaction ID : SB17.4341

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

2150.00

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

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

PAGE 11 OF 13

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

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NAME OF COMMITTEE (In Full)

Friends for Jennifer Todd

Full Name (Last, First, Middle Initial)

A. Numero Inc

Mailing Address 695 Town Center Drive

City
Costa MesaState
CAZip Code
92626Purpose of Disbursement
CRM

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

575.00

Transaction ID : SB17.4447

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Numero Inc

Mailing Address 695 Town Center Drive

City
Costa MesaState
CAZip Code
92626Purpose of Disbursement
Computer services

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	7		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

575.00

Transaction ID : SB17.4347

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. One Main Financial

Mailing Address 5132 Stevens Creek Rd

City
San JoseState
CAZip Code
95129Purpose of Disbursement
Vehicle Expenses

009

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

441.52

Transaction ID : SB17.4343

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

1591.52

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 12 OF 13

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

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NAME OF COMMITTEE (In Full)

Friends for Jennifer Todd

Full Name (Last, First, Middle Initial)

A. Sorling NorthrupMailing Address 1 North Old State Capitol Plaza
Suite 200City
SpringfieldState
ILZip Code
62705Purpose of Disbursement
Legal Services

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

450.00

Transaction ID : SB17.4293

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Union Signs & Printing

Mailing Address 1 S Eastern Ave

City
JolietState
ILZip Code
60433Purpose of Disbursement
Corrugated Yard Signs

006

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

573.00

Transaction ID : SB17.4289

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

1023.00

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

7802.43

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

PAGE 13 OF 13

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

NAME OF COMMITTEE (In Full)

Friends for Jennifer Todd

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

Washburn, Marilyn, J, ,

Nature of Debt (Purpose):

Loan to Committee Operating Expenses

Mailing Address 205 Belden Drive

City

Edwardsville

State

IL

Zip Code

62025

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4273

Amount Incurred This Period

3000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

3000.00

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

3000.00

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

0.00

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

3000.00