

**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

Ginger for US

ADDRESS (number and street)

W5739 Brook Trout

Check if different
than previously
reported. (ACC)

New Lisbon

WI

53950

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

C00928044

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

WI

07

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 /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 Murray, Ginger, L, ,

Signature of Treasurer

Murray, Ginger, L, ,

Date

M M /

D D /

Y Y Y Y

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

Ginger for US

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	2	5

	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))	9104.16	9104.16
(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))	9104.16	9104.16
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	1624.81	1624.81
(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))	1624.81	1624.81
8. Cash on Hand at Close of Reporting Period (from Line 27)	107479.35	
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)	107189.38	

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

Ginger for US

Report Covering the Period:

From:

M M / D D / Y Y Y Y
10 / 01 / 2025

To:

M M / D D / Y Y Y Y
12 / 31 / 2025**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).....

8250.00

7395.84

(ii) Unitemized

854.16

1708.32

(iii) TOTAL of contributions
from individuals ▶

9104.16

9104.16

(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))..

9104.16

9104.16

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

100000.00

100000.00

(b) All Other Loans.....

0.00

0.00

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

100000.00

100000.00

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)..... ▶

109104.16

109104.16

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.....	1624.81	1624.81
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) ►	1624.81	1624.81

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	109104.16
25. SUBTOTAL (add Line 23 and Line 24).....	109104.16
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1624.81
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	107479.35

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 14

☒ 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)

Ginger for US

Full Name (Last, First, Middle Initial)

Jazdzewski, Richard, , ,

A.

Mailing Address 1725 S Rebecca Ln.

City

Appleton

State

WI

Zip Code

54915

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lawrence University

Occupation
Dean of Wellness

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
12 03 2025

Transaction ID : A-21

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Petersen, Bobbi, , ,

B.

Mailing Address 5867 County Road CV

City

Madison

State

WI

Zip Code

53704

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guided Grey LLC

Occupation
Self 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
12 04 2025

Transaction ID : A-22

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Murray, Michelle, , ,

C.

Mailing Address 1714 Melrose St

City

Madison

State

WI

Zip Code

53704

FEC ID number of contributing
federal political committee.

C

Name of Employer
Forward Counseling

Occupation
Social Work

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
12 05 2025

Transaction ID : A-15

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

750.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 14

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

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NAME OF COMMITTEE (In Full)

Ginger for US

Full Name (Last, First, Middle Initial)

Jazdzewski, Lou, , ,

A. Mailing Address 8424 Haven Brook Ct

City

Las Vegas

State

NV

Zip Code

89128

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 ▼

3500.00

Date of Receipt

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

12 10 2025

Transaction ID : A-8

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Jazdzewski, Lee, , ,

B. Mailing Address 8424 W Haven Brook Ct

City

Las Vegas

State

NV

Zip Code

89128

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 ▼

3500.00

Date of Receipt

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

12 12 2025

Transaction ID : A-4

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Vance, Vaughn, , ,

C. Mailing Address 2868 Charleston Dr

City

Fitchburg

State

WI

Zip Code

53711

FEC ID number of contributing
federal political committee.

C

Name of Employer

WEA Trust

Occupation

President & CEO

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
12 29 2025

12 29 2025

Transaction ID : A-31

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

7500.00

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

8250.00

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 14

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

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NAME OF COMMITTEE (In Full)

Ginger for US

Full Name (Last, First, Middle Initial)

Murray, Ginger, L, ,

A.

Mailing Address W5739 Brook Trout

City

New Lisbon

State

WI

Zip Code

53950

FEC ID number of contributing
federal political committee.

C H6WI07231

Name of Employer

Your Family law center

Occupation

Lawyer

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 18 2025

Transaction ID : A-85

Amount of Each Receipt this Period

100000.00

☐ Memo Item
candidate loan to campaign

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)..... ▶

100000.00

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

100000.00

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 14

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

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NAME OF COMMITTEE (In Full)

Ginger for US

Full Name (Last, First, Middle Initial)

A. Peterson, Teran, E, ,

Mailing Address 2490 Leopold Way

City
Sun PrairieState
WIZip Code
53590Purpose of Disbursement
campaign mgr

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
1	2		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B-87

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Vistaprint Ilc

Mailing Address 275 Wyman Street

City
WalthamState
MAZip Code
02451Purpose of Disbursement
Thank you cards/env

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
1	2		2	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

264.98

Transaction ID : B-86

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address P.O. Box 441146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
Fee from Actblue

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
1	2		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

359.83

Transaction ID : B-32

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

1624.81

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

1624.81

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

PAGE 9 OF 14

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

NAME OF COMMITTEE (In Full)

Transaction ID : C-85

Ginger for US

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Murray, Ginger, L, ,

Mailing Address

W5739 Brook Trout

City

New Lisbon

State

WI

ZIP Code

53950

☒ Personal Funds of the Candidate

Original Amount of Loan

100000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
12 18 / 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).....▶

100000.00

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

100000.00

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 10 OF 14

FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Ginger for US

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

Murray, Ginger, L, ,

Nature of Debt (Purpose):

Campaign manager pay 10/8-10/23

Mailing Address W5739 Brook Trout

City

New Lisbon

State

WI

Zip Code

53950

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-82

Amount Incurred This Period

25.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

25.00

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

Murray, Ginger, L, ,

Nature of Debt (Purpose):

Campaign manager pay 11/24-12/8

Mailing Address W5739 Brook Trout

City

New Lisbon

State

WI

Zip Code

53950

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-78

Amount Incurred This Period

1312.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

1312.50

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

Murray, Ginger, L, ,

Nature of Debt (Purpose):

website design

Mailing Address W5739 Brook Trout

City

New Lisbon

State

WI

Zip Code

53950

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-43

Amount Incurred This Period

2050.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1350.00

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

2687.50

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)

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SD10

Transaction ID : D-43

Outstanding Debt Amount of 2050.00 was reduced in the amount of 700.00 by forgiveness

Form/Schedule:

Transaction ID:

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

PAGE 12 OF 14

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

NAME OF COMMITTEE (In Full)

Ginger for US

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

Murray, Ginger, L, ,

Nature of Debt (Purpose):

catering for event

Mailing Address W5739 Brook Trout

City

New Lisbon

State

WI

Zip Code

53950

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-58

Amount Incurred This Period

1400.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1400.00

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

Murray, Ginger, L, ,

Nature of Debt (Purpose):

Campaign manager pay 12/9-12/16

Mailing Address W5739 Brook Trout

City

New Lisbon

State

WI

Zip Code

53950

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-76

Amount Incurred This Period

1085.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1085.00

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

Murray, Ginger, L, ,

Nature of Debt (Purpose):

button maker

Mailing Address W5739 Brook Trout

City

New Lisbon

State

WI

Zip Code

53950

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-60

Amount Incurred This Period

862.88

Payment This Period

0.00

Outstanding Balance at Close of This Period

826.88

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

3311.88

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)

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SD10

Transaction ID : D-60

Outstanding Debt Amount of 862.88 was reduced in the amount of 36.00 by forgiveness

Form/Schedule:

Transaction ID:

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

PAGE 14 OF 14

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

NAME OF COMMITTEE (In Full)

Ginger for US

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

Murray, Ginger, L, ,

Nature of Debt (Purpose):

Campaign manager pay 12/17-12/31

Mailing Address W5739 Brook Trout

City

New Lisbon

State

WI

Zip Code

53950

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-74

Amount Incurred This Period

1190.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1190.00

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)

1190.00

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

7189.38

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

100000.00

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

107189.38