

**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

NOLLEY FOR CONGRESS

ADDRESS (number and street)

P.O. BOX 2166

Check if different
than previously
reported. (ACC)

LOVES PARK

IL

61130

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

C00900399

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

IL

16

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
10 / 01 / 2025

through

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

NOLLEY, PAUL, , ,

Signature of Treasurer

NOLLEY, PAUL, , ,

Date

M M / D D / Y Y Y Y
01 / 27 / 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

NOLLEY FOR CONGRESS

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))	31247.21	74713.85
(b) Total Contribution Refunds (from Line 20(d))	128.00	128.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	31119.21	74585.85
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	10690.50	36973.27
(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))	10690.50	36973.27
8. Cash on Hand at Close of Reporting Period (from Line 27)	37612.58	
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)	0.00	

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

NOLLEY FOR CONGRESS

Report Covering the Period:

From:

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

To:

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

17395.00

32645.00

(ii) Unitemized

7352.77

18919.77

(iii) TOTAL of contributions
from individuals ▶

24747.77

51564.77

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

6461.43

22041.68

(d) The Candidate

38.01

1107.40

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

31247.21

74713.85

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)..... ▶

31247.21

74713.85

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.....	10690.50	36973.27
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	128.00	128.00
(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)).....	128.00	128.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	10818.50	37101.27

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	17183.87
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	31247.21
25. SUBTOTAL (add Line 23 and Line 24).....	48431.08
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	10818.50
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	37612.58

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F3N

Transaction ID :

PLEASE NOTE THAT THE COMMITTEE DISCLOSED ONLY THE ITEMIZED CONTRIBUTIONS FROM EARMARKED CONDUIT(S) THAT WERE REPORTED ON SCHEDULE A FOR LINE 11(A)(I); THE REMAINDER OF THE CONDUIT CONTRIBUTIONS THAT AGGREGATED \$200 OR LESS WERE INCLUDED IN THE TOTAL ON LINE 11(A)(II) OF THE DETAILED SUMMARY PAGE PER 11 CFR 104.3(A)(3).

Form/Schedule:

Transaction ID:

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 45

☒ 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)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

ABRAHAM, JOHN, , ,

A.

Mailing Address 2600 W WINDFLOWER CT

City

PEORIA

State

IL

Zip Code

61615

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE MONEY STORE

Occupation
VP MORTGAGE

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
12 05 2025

Transaction ID : A-749

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARK VIA ACTBLUE ON 2025-12-07

Full Name (Last, First, Middle Initial)

ACTBLUE

B.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

21518.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 07 2025

Transaction ID : A-749CM

Amount of Each Receipt this Period

595.00

☒ Memo Item

EARMARKED-CONDUIT DETAILS. CONDUIT
CONTRIBUTION LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

ADELL, KAREN, , ,

C.

Mailing Address 12422 GREENSVIEW DRIVE

City

ROSCOE

State

IL

Zip Code

61073

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 10 2025

Transaction ID : A-665

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

1250.00

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)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

ALBRIGHT, JOSEPH, , ,

A.

Mailing Address 1178 N. BYERLY HILLS DR

City

EAST PEORIA

State

IL

Zip Code

61611

FEC ID number of contributing
federal political committee.

C

Name of Employer

SPEND RIGHT CONSULTING

Occupation

CONSULTANT

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 15 2025

Transaction ID : A-783

Amount of Each Receipt this Period

300.00

☐ Memo Item

EARMARK VIA ACTBLUE ON 2025-12-21

Full Name (Last, First, Middle Initial)

ACTBLUE

B.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

22332.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 21 2025

Transaction ID : A-783CM

Amount of Each Receipt this Period

713.00

☒ Memo Item

EARMARKED-CONDUIT DETAILS. CONDUIT
CONTRIBUTION LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

BAY, RANDALL, , ,

C.

Mailing Address 814 METZ LANE

City

ROCKTON

State

IL

Zip Code

61072

FEC ID number of contributing
federal political committee.

C

Name of Employer

EASTERSEALS

Occupation

PRINCIPAL

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 22 2025

Transaction ID : A-574

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

1300.00

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)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

BIAGINI, DENISE, , ,

A.

Mailing Address 3 CANTERBURY CT

City

GALENA

State

IL

Zip Code

61036

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
11 24 2025

Transaction ID : A-711

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARK VIA ACTBLUE ON 2025-11-30

Full Name (Last, First, Middle Initial)

ACTBLUE

B.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

20923.69

Date of Receipt

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

Transaction ID : A-711CM

Amount of Each Receipt this Period

555.00

☒ Memo Item

EARMARKED-CONDUIT DETAILS. CONDUIT
CONTRIBUTION LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

BLUMENSHINE, JOYCE, , ,

C.

Mailing Address 2419 EAST RESERVOIR BOULEVARD

City

PEORIA

State

IL

Zip Code

61614

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 05 2025

Transaction ID : A-752

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

500.00

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	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

CHIARELLI, JUDITH, , ,

A.

Mailing Address 713 DEWEY AVE

City

GALENA

State

IL

Zip Code

61036

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
11			10			2025			

Transaction ID : A-666

Amount of Each Receipt this Period

3350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CONN, ALYSON BROMAN, , ,

B.

Mailing Address 15451 BERGLUND RD.

City

PECATONICA

State

IL

Zip Code

61063

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
11			11			2025			

Transaction ID : A-676

Amount of Each Receipt this Period

300.00

☐ Memo Item

EARMARK VIA ACTBLUE ON 2025-11-16

Full Name (Last, First, Middle Initial)

ACTBLUE

C.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

20153.69

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			16			2025			

Transaction ID : A-676CM

Amount of Each Receipt this Period

1043.00

☒ Memo ItemEARMARKED-CONDUIT DETAILS. CONDUIT
CONTRIBUTION LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

3650.00

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	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

COOPER, CHERYL, , ,

A.

Mailing Address 31619 N CLEARWATER DRIVE

City

MCHENRY

State

IL

Zip Code

60051

FEC ID number of contributing
federal political committee.

C

Name of Employer

HSBC

Occupation

MANAGER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			08			2025			

Transaction ID : A-550

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARK VIA ACTBLUE ON 2025-10-12

B.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

16459.69

Date of Receipt

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

Transaction ID : A-550CM

Amount of Each Receipt this Period

340.00

☒ Memo ItemEARMARKED-CONDUIT DETAILS. CONDUIT
CONTRIBUTION LIMIT NOT AFFECTED.**C.**

Full Name (Last, First, Middle Initial)

COOPER, CHERYL, , ,

Mailing Address 31619 N CLEARWATER DRIVE

City

MCHENRY

State

IL

Zip Code

60051

FEC ID number of contributing
federal political committee.

C

Name of Employer

HSBC

Occupation

MANAGER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

950.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			08			2025			

Transaction ID : A-654

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARK VIA ACTBLUE ON 2025-11-09

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

100.00

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 11 OF 45

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

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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

19110.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 09 / 2025

Transaction ID : A-654CM

Amount of Each Receipt this Period

2021.00

☒ Memo Item

EARMARKED-CONDUIT DETAILS. CONDUIT
CONTRIBUTION LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

COOPER, CHERYL, , ,

B.

Mailing Address 31619 N CLEARWATER DRIVE

City

MCHENRY

State

IL

Zip Code

60051

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

HSBC

MANAGER

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 08 / 2025

Transaction ID : A-764

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARK VIA ACTBLUE ON 2025-12-14

Full Name (Last, First, Middle Initial)

ACTBLUE

C.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

21619.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 14 / 2025

Transaction ID : A-764CM

Amount of Each Receipt this Period

101.00

☒ Memo Item

EARMARKED-CONDUIT DETAILS. CONDUIT
CONTRIBUTION LIMIT NOT AFFECTED.

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

50.00

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)

PAGE 12 OF 45

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

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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

COTTRIL, PAUL, , ,

A.

Mailing Address 12045 SUMMIT COURT

City

ROCKTON

State

IL

Zip Code

61072

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
11		10		2025

Transaction ID : A-669

Amount of Each Receipt this Period

100.00



Memo Item

Full Name (Last, First, Middle Initial)

FINNICUM, CRAIG, , ,

B.

Mailing Address 6723 CROWN RIDGE

City

ROCKFORD

State

IL

Zip Code

61103

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
11		06		2025

Transaction ID : A-644

Amount of Each Receipt this Period

100.00



Memo Item

Full Name (Last, First, Middle Initial)

FINNICUM, CRAIG, , ,

C.

Mailing Address 6723 CROWN RIDGE

City

ROCKFORD

State

IL

Zip Code

61103

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 ▼

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		06		2025

Transaction ID : A-759

Amount of Each Receipt this Period

100.00



Memo Item

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

300.00

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

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

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

FOR LINE NUMBER:
(check only one)

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

HOFF, NANETTE, , ,

A.

Mailing Address 3223 W HEADQUARTERS ROAD

City

ELIZABETH

State

IL

Zip Code

61028

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 26 2025

Transaction ID : A-817

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARK VIA ACTBLUE ON 2025-12-28

Full Name (Last, First, Middle Initial)

ACTBLUE

B.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

24407.02

Date of Receipt

M M / D D / Y Y Y Y Y
12 28 2025

Transaction ID : A-817CM

Amount of Each Receipt this Period

2074.33

☒ Memo Item

EARMARKED-CONDUIT DETAILS. CONDUIT
CONTRIBUTION LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

JEFFORD, TYLER, , ,

C.

Mailing Address 2320 W ADAMS ST UNIT 26

City

CHICAGO

State

IL

Zip Code

60612

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

SOFTWARE

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
12 17 2025

Transaction ID : A-785

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARK VIA ACTBLUE ON 2025-12-21

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

1100.00

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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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

22332.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 21 2025

Transaction ID : A-785CM

Amount of Each Receipt this Period

713.00

☒ Memo Item

EARMARKED-CONDUIT DETAILS. CONDUIT
CONTRIBUTION LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

JEFFORD, TYLER, , ,

B.

Mailing Address 2320 W ADAMS ST UNIT 26

City

CHICAGO

State

IL

Zip Code

60612

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

N/A

SOFTWARE

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 30 2025

Transaction ID : A-832

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARK VIA ACTBLUE ON 2025-12-31

Full Name (Last, First, Middle Initial)

ACTBLUE

C.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

25875.02

Date of Receipt

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

Transaction ID : A-832CM

Amount of Each Receipt this Period

1468.00

☒ Memo Item

EARMARKED-CONDUIT DETAILS. CONDUIT
CONTRIBUTION LIMIT NOT AFFECTED.

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

100.00

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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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

LAMBE, KEVIN, , ,

A.

Mailing Address 841 TOMAHAWK DR

City

OREGON

State

IL

Zip Code

61061

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
11 / 05 / 2025D D / Y Y Y Y Y
05 / 2025Y Y Y Y Y
2025

Transaction ID : A-620

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARK VIA ACTBLUE ON 2025-11-09

B.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

19110.69

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 09 / 2025D D / Y Y Y Y Y
09 / 2025Y Y Y Y Y
2025

Transaction ID : A-620CM

Amount of Each Receipt this Period

2021.00

☒ Memo ItemEARMARKED-CONDUIT DETAILS. CONDUIT
CONTRIBUTION LIMIT NOT AFFECTED.**C.**

Full Name (Last, First, Middle Initial)

LAMBE, KEVIN, , ,

Mailing Address 841 TOMAHAWK DR

City

OREGON

State

IL

Zip Code

61061

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 02 / 2025D D / Y Y Y Y Y
02 / 2025Y Y Y Y Y
2025

Transaction ID : A-744

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARK VIA ACTBLUE ON 2025-12-07

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

200.00

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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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

21518.69

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	7		2	0	2	5

Transaction ID : A-744CM

Amount of Each Receipt this Period

595.00

☒ Memo ItemEARMARKED-CONDUIT DETAILS. CONDUIT
CONTRIBUTION LIMIT NOT AFFECTED.**B.**

Full Name (Last, First, Middle Initial)

LINDQUIST, ELIZABETH, , ,

Mailing Address 12328 N LEDGES DR

City

ROSCOE

State

IL

Zip Code

61073

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

Name of Employer

SWEDISHAMERICAN HOSPITAL

Occupation

PHARMACIST

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

270.00

Date of Receipt

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

Transaction ID : A-627

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARK VIA ACTBLUE ON 2025-11-09

C.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

19110.69

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	2	5

Transaction ID : A-627CM

Amount of Each Receipt this Period

2021.00

☒ Memo ItemEARMARKED-CONDUIT DETAILS. CONDUIT
CONTRIBUTION LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

100.00

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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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

LINDQUIST, ELIZABETH, , ,

A.

Mailing Address 12328 N LEDGES DR

City

ROSCOE

State

IL

Zip Code

61073

FEC ID number of contributing
federal political committee.

C

Name of Employer

SWEDISHAMERICAN HOSPITAL

Occupation

PHARMACIST

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 19 2025

Transaction ID : A-705

Amount of Each Receipt this Period

25.00

☐ Memo Item

EARMARK VIA ACTBLUE ON 2025-11-23

Full Name (Last, First, Middle Initial)

ACTBLUE

B.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

20368.69

Date of Receipt

M M / D D / Y Y Y Y Y
11 23 2025

Transaction ID : A-705CM

Amount of Each Receipt this Period

215.00

☒ Memo Item

EARMARKED-CONDUIT DETAILS. CONDUIT
CONTRIBUTION LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

LINDQUIST, ELIZABETH, , ,

C.

Mailing Address 12328 N LEDGES DR

City

ROSCOE

State

IL

Zip Code

61073

FEC ID number of contributing
federal political committee.

C

Name of Employer

SWEDISHAMERICAN HOSPITAL

Occupation

PHARMACIST

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 22 2025

Transaction ID : A-709

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARK VIA ACTBLUE ON 2025-11-23

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

75.00

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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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

20368.69

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			23			2025			

Transaction ID : A-709CM

Amount of Each Receipt this Period

215.00

☒ Memo ItemEARMARKED-CONDUIT DETAILS. CONDUIT
CONTRIBUTION LIMIT NOT AFFECTED.**B.**

Full Name (Last, First, Middle Initial)

LINDQUIST, ELIZABETH, , ,

Mailing Address 12328 N LEDGES DR

City

ROSCOE

State

IL

Zip Code

61073

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

Name of Employer

SWEDISHAMERICAN HOSPITAL

Occupation

PHARMACIST

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

365.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			29			2025			

Transaction ID : A-723

Amount of Each Receipt this Period

20.00

☐ Memo Item

EARMARK VIA ACTBLUE ON 2025-11-30

C.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

20923.69

Date of Receipt

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

Transaction ID : A-723CM

Amount of Each Receipt this Period

555.00

☒ Memo ItemEARMARKED-CONDUIT DETAILS. CONDUIT
CONTRIBUTION LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ►

20.00

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:
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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

LINDQUIST, ELIZABETH, , ,

A.

Mailing Address 12328 N LEDGES DR

City

ROSCOE

State

IL

Zip Code

61073

FEC ID number of contributing
federal political committee.

C

Name of Employer

SWEDISHAMERICAN HOSPITAL

Occupation

PHARMACIST

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

615.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		30		2025

Transaction ID : A-836

Amount of Each Receipt this Period

250.00



Memo Item

EARMARK VIA ACTBLUE ON 2025-12-31

B.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

25875.02

Date of Receipt

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

Transaction ID : A-836CM

Amount of Each Receipt this Period

1468.00



Memo Item

EARMARKED-CONDUIT DETAILS. CONDUIT
CONTRIBUTION LIMIT NOT AFFECTED.**C.**

Full Name (Last, First, Middle Initial)

LOWRY, BRIAN, , ,

Mailing Address 1728 KINGSBURY RD

City

WASHINGTON

State

IL

Zip Code

61571

FEC ID number of contributing
federal political committee.

C

Name of Employer

CATERPILLAR

Occupation

ENGINEER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		29		2025

Transaction ID : A-602

Amount of Each Receipt this Period

250.00



Memo Item

EARMARK VIA ACTBLUE ON 2025-11-02

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

500.00

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

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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

17089.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 02 2025

Transaction ID : A-602CM

Amount of Each Receipt this Period

375.00

☒ Memo Item

EARMARKED-CONDUIT DETAILS. CONDUIT
CONTRIBUTION LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

MOTHKOVICH, CHRISTINE, , ,

B.

Mailing Address 1108 BLOODS POINT ROAD

City

CHERRY VALLEY

State

IL

Zip Code

61016

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 19 2025

Transaction ID : A-797

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NOREM, JACKIE, M, ,

C.

Mailing Address 315 FAIRWAY VIEW

City

CHERRY VALLEY

State

IL

Zip Code

61016

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

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
11 10 2025

Transaction ID : A-670

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

550.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

PAUL CHIARELLI, MICHAEL, , ,

A.

Mailing Address 713 DEWEY AVE

City

GALENA

State

IL

Zip Code

61036

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : A-667

Amount of Each Receipt this Period

3500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

PERKS, CHRISTINE, , ,

Mailing Address 4036 W TALUS CT

City

PEORIA

State

IL

Zip Code

61613

FEC ID number of contributing
federal political committee.

C

Name of Employer

OSF MED CENTRR

Occupation

DOCTOR

Receipt For: 2026

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A-635

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARK VIA ACTBLUE ON 2025-11-09

C.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

19110.69

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	2	5

Transaction ID : A-635CM

Amount of Each Receipt this Period

2021.00

☒ Memo ItemEARMARKED-CONDUIT DETAILS. CONDUIT
CONTRIBUTION LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

4000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

PERKS, CHRISTINE, , ,

A.

Mailing Address 4036 W TALUS CT

City

PEORIA

State

IL

Zip Code

61613

FEC ID number of contributing
federal political committee.

C

Name of Employer
OSF MED CENTRROccupation
DOCTOR

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			20			2025			

Transaction ID : A-798

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SEILER, AMY, , ,

B.

Mailing Address 1944 ROTHSCHILD LN.

City

ROCKFORD

State

IL

Zip Code

61107

FEC ID number of contributing
federal political committee.

C

Name of Employer
NOT EMPLOYEDOccupation
NOT EMPLOYED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			29			2025			

Transaction ID : A-725

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARK VIA ACTBLUE ON 2025-11-30

Full Name (Last, First, Middle Initial)

ACTBLUE

C.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

20923.69

Date of Receipt

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

Transaction ID : A-725CM

Amount of Each Receipt this Period

555.00

☒ Memo ItemEARMARKED-CONDUIT DETAILS. CONDUIT
CONTRIBUTION LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

3100.00

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	☐ 15
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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

STILES, CHANTAL, , ,

A.

Mailing Address 1605 RIVERSIDE ROAD

City

BELVIDERE

State

IL

Zip Code

61008

FEC ID number of contributing
federal political committee.

C

Name of Employer

UW NORTHERN IL

Occupation

PHYSICIAN

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
12		28		2025

Transaction ID : A-826

Amount of Each Receipt this Period

500.00



Memo Item

EARMARK VIA ACTBLUE ON 2025-12-28

Full Name (Last, First, Middle Initial)

ACTBLUE

B.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

24407.02

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		28		2025

Transaction ID : A-826CM

Amount of Each Receipt this Period

2074.33



Memo Item

EARMARKED-CONDUIT DETAILS. CONDUIT
CONTRIBUTION LIMIT NOT AFFECTED.

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

17395.00

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)

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

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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

BOILERMAKERS-BLACKSMITHS LEAP CAMPAIGN ASSISTANCE FUND

Mailing Address 12200 NORTH AMBASSADOR DRIVE

STE 301

City

KANSAS CITY

State

MO

Zip Code

64163

FEC ID number of contributing
federal political committee.

C C00005157

Name of Employer

Occupation

Receipt For: 2026



☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 17 2025

Transaction ID : A-786

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BRICKLAYERS AND ALLIED CRAFTWORKERS POLITICAL ACTION COMMITTEE

Mailing Address 620 F STREET NORTHWEST

SUITE 900

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.

C C00003632

Name of Employer

Occupation

Receipt For: 2026



☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 30 2025

Transaction ID : A-859

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CITIZENS FOR THE 16TH

Mailing Address 12328 NORTH LEDGES DRIVE

City

ROSCOE

State

IL

Zip Code

61073

FEC ID number of contributing
federal political committee.

C C00898767

Name of Employer

Occupation

Receipt For: 2026



☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

961.43

Date of Receipt

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

Transaction ID : A-607

Amount of Each Receipt this Period

961.43

☐ Memo Item

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

6461.43

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

6461.43

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	☐ 15
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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

NOLLEY, PAUL, , ,

A. Mailing Address 4245 GLOUCESTER ROADCity
ROSCOEState
ILZip Code
61073FEC ID number of contributing
federal political committee.**C** H6IL16108Name of Employer
PROJECT FIRST RATEOccupation
EXECUTIVE DIRECTOR

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1107.40

Date of Receipt

M M / D D / Y Y Y Y Y
11 17 2025

Transaction ID : A-703

Amount of Each Receipt this Period

38.01

☐ Memo Item

IN KIND: TRAVEL - MEALS

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)..... ▶

38.01

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

38.01

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
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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ACTBLUE TECHNICAL SERVICES

Mailing Address P.O. BOX 441146

City
SOMERVILLEState
MAZip Code
02144Purpose of Disbursement
ACTBLUE SERVICE FEE

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	0		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

9.20

Transaction ID : B-544

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ACTBLUE TECHNICAL SERVICES

Mailing Address P.O. BOX 441146

City
SOMERVILLEState
MAZip Code
02144Purpose of Disbursement
ACTBLUE SERVICE FEE

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	0		1	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

13.46

Transaction ID : B-563

☐ 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
ACTBLUE SERVICE FEE

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	0		1	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2.18

Transaction ID : B-577

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

24.84

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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(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ACTBLUE TECHNICAL SERVICES

Mailing Address P.O. BOX 441146

City
SOMERVILLEState
MAZip Code
02144Purpose of Disbursement
ACTBLUE SERVICE FEE

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	0	/	2	5	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

7.91

Transaction ID : B-598

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ACTBLUE TECHNICAL SERVICES

Mailing Address P.O. BOX 441146

City
SOMERVILLEState
MAZip Code
02144Purpose of Disbursement
ACTBLUE SERVICE FEE

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	0	/	3	1	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

14.85

Transaction ID : B-617

☐ 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
ACTBLUE SERVICE FEE

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	1	/	0	9	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

79.92

Transaction ID : B-695

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

102.68

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)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ACTBLUE TECHNICAL SERVICES

Mailing Address P.O. BOX 441146

City
SOMERVILLEState
MAZip Code
02144Purpose of Disbursement
ACTBLUE SERVICE FEE

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	1		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

41.25

Transaction ID : B-742

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ACTBLUE TECHNICAL SERVICES

Mailing Address P.O. BOX 441146

City
SOMERVILLEState
MAZip Code
02144Purpose of Disbursement
ACTBLUE SERVICE FEE

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	1		1	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

8.52

Transaction ID : B-739

☐ 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
ACTBLUE SERVICE FEE

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	1		1	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

16.91

Transaction ID : B-736

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

66.68

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)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ACTBLUE TECHNICAL SERVICES

Mailing Address P.O. BOX 441146

City
SOMERVILLEState
MAZip Code
02144Purpose of Disbursement
ACTBLUE SERVICE FEE

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		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

23.54

Transaction ID : B-768

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ACTBLUE TECHNICAL SERVICES

Mailing Address P.O. BOX 441146

City
SOMERVILLEState
MAZip Code
02144Purpose of Disbursement
ACTBLUE SERVICE FEE

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		1	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

4.02

Transaction ID : B-794

☐ 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
ACTBLUE SERVICE FEE

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	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

28.18

Transaction ID : B-820

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

55.74

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)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ACTBLUE TECHNICAL SERVICES

Mailing Address P.O. BOX 441146

City
SOMERVILLEState
MAZip Code
02144Purpose of Disbursement
ACTBLUE SERVICE FEE

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	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

82.01

Transaction ID : B-879

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ACTBLUE TECHNICAL SERVICES

Mailing Address P.O. BOX 441146

City
SOMERVILLEState
MAZip Code
02144Purpose of Disbursement
ACTBLUE SERVICE FEE

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

58.09

Transaction ID : B-882

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BEST WESTERN PLUS EAST PEORIA

Mailing Address 300 EASTLIGHT COURT

City
EAST PEORIAState
ILZip Code
61611Purpose of Disbursement
TRAVEL - LODGING

002

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		0	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

94.76

Transaction ID : B-769

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

234.86

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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(check only one)

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

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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. BEST WESTERN PLUS EAST PEORIA

Mailing Address 300 EASTLIGHT COURT

City
EAST PEORIAState
ILZip Code
61611Purpose of Disbursement
REFUNDABLE HOTEL DEPOSIT

002

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	/	0	8	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : B-886

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BEST WESTERN PLUS EAST PEORIA

Mailing Address 300 EASTLIGHT COURT

City
EAST PEORIAState
ILZip Code
61611Purpose of Disbursement
DEPOSIT REFUND

002

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	/	0	8	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

- 100.00

Transaction ID : B-888

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BEST WESTERN PLUS EAST PEORIA

Mailing Address 300 EASTLIGHT COURT

City
EAST PEORIAState
ILZip Code
61611Purpose of Disbursement
REFUNDABLE DEPOSIT

002

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	/	1	1	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

4.00

Transaction ID : B-887

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

4.00

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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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. BEST WESTERN PLUS EAST PEORIA

Mailing Address 300 EASTLIGHT COURT

Date of Disbursement

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

City
EAST PEORIAState
ILZip Code
61611

FEC Identification Number

C

Purpose of Disbursement
DEPOSIT REFUND

002

Amount of Each Disbursement this Period

- 7.79

Transaction ID : B-889

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. BLOOMINGTON-NORMAL MARRIOTT HOTEL & CONFERENCE CENTER

Mailing Address 201 BROADWAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2025

City
NORMALState
ILZip Code
61761

FEC Identification Number

C

Purpose of Disbursement
TRAVEL - LODGING

002

Amount of Each Disbursement this Period

407.96

Transaction ID : B-652

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. DESIGNED TO RUN, INC.Mailing Address 651 NORTH BROAD STREET
SUITE 201

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		23		2025

City
MIDDLETOWNState
DEZip Code
19709

FEC Identification Number

C

Purpose of Disbursement
WEBSITE HOSTING FEE

006

Amount of Each Disbursement this Period

50.00

Transaction ID : B-578

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

450.17

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)

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

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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DESIGNED TO RUN, INC.Mailing Address 651 NORTH BROAD STREET
SUITE 201City
MIDDLETOWNState
DEZip Code
19709Purpose of Disbursement
WEBSITE HOSTING FEE

006

Candidate Name

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
11	23	2025

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : B-710

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DESIGNED TO RUN, INC.Mailing Address 651 NORTH BROAD STREET
SUITE 201City
MIDDLETOWNState
DEZip Code
19709Purpose of Disbursement
WEBSITE HOSTING FEE

006

Candidate Name

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
12	23	2025

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : B-811

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ED MULLEN

Mailing Address 2129 NORTH WESTERN AVENUE

City
CHICAGOState
ILZip Code
60647Purpose of Disbursement
LEGAL SERVICES

001

Candidate Name

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
10	26	2025

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B-593

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

600.00

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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(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GRASSROOTS ANALYTICS

Mailing Address 806 7TH ST NW

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
FUNDRAISING CONSULTING

003

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	0		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

185.60

Transaction ID : B-604

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GRASSROOTS ANALYTICS

Mailing Address 806 7TH ST NW

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
FUNDRAISING CONSULTING

003

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	1		1	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

48.10

Transaction ID : B-702

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. INTEGRATED SOLUTIONS: POLITICALMailing Address 4142 ADAMS AVENUE
SUITE 103-550City
SAN DIEGOState
CAZip Code
92116Purpose of Disbursement
SUBSCRIPTION - SOFTWARE

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	0		0	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : B-521

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

533.70

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. INTEGRATED SOLUTIONS: POLITICALMailing Address 4142 ADAMS AVENUE
SUITE 103-550City
SAN DIEGOState
CAZip Code
92116Purpose of Disbursement
SUBSCRIPTION - SOFTWARE

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	1		0	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : B-646

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. INTEGRATED SOLUTIONS: POLITICALMailing Address 4142 ADAMS AVENUE
SUITE 103-550City
SAN DIEGOState
CAZip Code
92116Purpose of Disbursement
SUBSCRIPTION - SOFTWARE

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		0	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : B-770

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MAILCHIMP

Mailing Address 405 NORTH ANGIER AVENUE NORTHEAST

City
ATLANTAState
GAZip Code
30308Purpose of Disbursement
SUBSCRIPTION - SOFTWARE

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	0		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

15.00

Transaction ID : B-610

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

615.00

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)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MAILCHIMP

Mailing Address 405 NORTH ANGIER AVENUE NORTHEAST

City
ATLANTAState
GAZip Code
30308Purpose of Disbursement
SUBSCRIPTION - SOFTWARE

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	0		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

97.50

Transaction ID : B-611

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MAILCHIMP

Mailing Address 405 NORTH ANGIER AVENUE NORTHEAST

City
ATLANTAState
GAZip Code
30308Purpose of Disbursement
SUBSCRIPTION - SOFTWARE

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	1		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

40.00

Transaction ID : B-612

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MAILCHIMP

Mailing Address 405 NORTH ANGIER AVENUE NORTHEAST

City
ATLANTAState
GAZip Code
30308Purpose of Disbursement
SUBSCRIPTION - SOFTWARE

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	1		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : B-728

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

237.50

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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(check only one)

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

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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MAILCHIMP

Mailing Address 405 NORTH ANGIER AVENUE NORTHEAST

City
ATLANTAState
GAZip Code
30308Purpose of Disbursement
SUBSCRIPTION - SOFTWARE

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

100.00

Transaction ID : B-891

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MEIJER

Mailing Address 929 WALKER AVENUE NORTHWEST

City
GRAND RAPIDSState
MIZip Code
49504Purpose of Disbursement
TRAVEL - FUEL

002

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	0	/	0	3	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

32.19

Transaction ID : B-531

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MEIJER

Mailing Address 929 WALKER AVENUE NORTHWEST

City
GRAND RAPIDSState
MIZip Code
49504Purpose of Disbursement
TRAVEL - FUEL

002

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	0	/	2	5	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

41.43

Transaction ID : B-592

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

173.62

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MEIJER

Mailing Address 929 WALKER AVENUE NORTHWEST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		15		2025

City
GRAND RAPIDSState
MIZip Code
49504

FEC Identification Number

C

Purpose of Disbursement
CAMPAIGN SUPPLIES - SPEAKER AND MICROPHONE

007

Amount of Each Disbursement this Period

489.27

Transaction ID : B-689

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. MEIJER

Mailing Address 929 WALKER AVENUE NORTHWEST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		17		2025

City
GRAND RAPIDSState
MIZip Code
49504

FEC Identification Number

C

Purpose of Disbursement
TRAVEL - FUEL

002

Amount of Each Disbursement this Period

20.81

Transaction ID : B-788

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. MEIJER

Mailing Address 929 WALKER AVENUE NORTHWEST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		27		2025

City
GRAND RAPIDSState
MIZip Code
49504

FEC Identification Number

C

Purpose of Disbursement
TRAVEL - FUEL

002

Amount of Each Disbursement this Period

56.25

Transaction ID : B-854

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

566.33

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)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MIA PHIFER & ASSOCIATESMailing Address 535 NORTH MICHIGAN AVENUE
APT 809City
CHICAGOState
ILZip Code
60611Purpose of Disbursement
FUNDRAISING CONSULTING

003

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	0		0	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1550.00

Transaction ID : B-546

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MINUTEMAN PRESS OF LOVES PARK

Mailing Address 5128 NORTH 2ND STREET

City
LOVES PARKState
ILZip Code
61111Purpose of Disbursement
PRINTING - PALM CARDS

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
1	0		0	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

153.88

Transaction ID : B-650

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MINUTEMAN PRESS OF LOVES PARK

Mailing Address 5128 NORTH 2ND STREET

City
LOVES PARKState
ILZip Code
61111Purpose of Disbursement
PRINTING - 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
1	0		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

247.95

Transaction ID : B-554

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

1951.83

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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(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MINUTEMAN PRESS OF LOVES PARK

Mailing Address 5128 NORTH 2ND STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		14		2025

City
LOVES PARKState
ILZip Code
61111

FEC Identification Number

C

Purpose of Disbursement
PRINTING - PALM CARDS

006

Amount of Each Disbursement this Period

270.21

Transaction ID : B-696

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. MINUTEMAN PRESS OF LOVES PARK

Mailing Address 5128 NORTH 2ND STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		19		2025

City
LOVES PARKState
ILZip Code
61111

FEC Identification Number

C

Purpose of Disbursement
PRINTING - YARD SIGNS

006

Amount of Each Disbursement this Period

550.55

Transaction ID : B-704

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. MINUTEMAN PRESS OF LOVES PARK

Mailing Address 5128 NORTH 2ND STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		25		2025

City
LOVES PARKState
ILZip Code
61111

FEC Identification Number

C

Purpose of Disbursement
PRINTING - YARD SIGNS

006

Amount of Each Disbursement this Period

369.75

Transaction ID : B-713

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

1190.51

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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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. NOLLEY, PAUL, , ,

Mailing Address 4245 GLOUCESTER ROAD

City
ROSCOEState
ILZip Code
61073Purpose of Disbursement
IN KIND: TRAVEL - MEALS

Candidate Name

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	1		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

38.01

Transaction ID : B-703

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NUMERO, INCMailing Address 695 TOWN CENTER DRIVE
SUITE 1100City
COSTA MESAState
CAZip Code
92626Purpose of Disbursement
SUBSCRIPTION - SOFTWARE

Candidate Name

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	0		0	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B-520

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NUMERO, INCMailing Address 695 TOWN CENTER DRIVE
SUITE 1100City
COSTA MESAState
CAZip Code
92626Purpose of Disbursement
SUBSCRIPTION - SOFTWARE

Candidate Name

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	1		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

267.00

Transaction ID : B-608

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

1305.01

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. NUMERO, INCMailing Address 695 TOWN CENTER DRIVE
SUITE 1100City
COSTA MESAState
CAZip Code
92626Purpose of Disbursement
SUBSCRIPTION - SOFTWARE

003

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	/	1	2	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

733.00

Transaction ID : B-781

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SHELL

Mailing Address 150 NORTH DAIRY ASHFORD ROAD

City
HOUSTONState
TXZip Code
77079Purpose of Disbursement
TRAVEL - FUEL

002

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	0	/	2	3	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

49.26

Transaction ID : B-584

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SHELL

Mailing Address 150 NORTH DAIRY ASHFORD ROAD

City
HOUSTONState
TXZip Code
77079Purpose of Disbursement
TRAVEL - FUEL

002

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	0	/	2	7	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

64.43

Transaction ID : B-589

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

846.69

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SHELL

Mailing Address 150 NORTH DAIRY ASHFORD ROAD

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	2	5

City
HOUSTONState
TXZip Code
77079

FEC Identification Number

C

Purpose of Disbursement
TRAVEL - FUEL

002

Amount of Each Disbursement this Period

29.87

Transaction ID : B-609

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. SHELL

Mailing Address 150 NORTH DAIRY ASHFORD ROAD

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	4		2	0	2	5

City
HOUSTONState
TXZip Code
77079

FEC Identification Number

C

Purpose of Disbursement
TRAVEL - FUEL

002

Amount of Each Disbursement this Period

50.28

Transaction ID : B-757

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. SHELL

Mailing Address 150 NORTH DAIRY ASHFORD ROAD

Date of Disbursement

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

City
HOUSTONState
TXZip Code
77079

FEC Identification Number

C

Purpose of Disbursement
TRAVEL - FUEL

002

Amount of Each Disbursement this Period

41.46

Transaction ID : B-758

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

121.61

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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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UNITED STATES POSTAL SERVICE

Mailing Address 475 L'ENFANT PLAZA SOUTHWEST

City
WASHINGTONState
DCZip Code
20260Purpose of Disbursement
POSTAGE

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	1		1	2		2	0	5	

FEC Identification Number

C

Amount of Each Disbursement this Period

46.80

Transaction ID : B-692

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UNITED STATES POSTAL SERVICE

Mailing Address 475 L'ENFANT PLAZA SOUTHWEST

City
WASHINGTONState
DCZip Code
20260Purpose of Disbursement
PO BOX RENTAL FEE

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		1	6		2	0	5	

FEC Identification Number

C

Amount of Each Disbursement this Period

55.00

Transaction ID : B-791

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. UNITED STATES POSTAL SERVICE

Mailing Address 475 L'ENFANT PLAZA SOUTHWEST

City
WASHINGTONState
DCZip Code
20260Purpose of Disbursement
POSTAGE

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	0		2	0	5	

FEC Identification Number

C

Amount of Each Disbursement this Period

42.10

Transaction ID : B-853

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

143.90

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:
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

NOLLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. YOURMEMBERSHIP.COM, INCMailing Address 360 CENTRAL AVENUE
SUITE 1120City
ST. PETERSBURGState
FLZip Code
33701Purpose of Disbursement
SUBSCRIPTION

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
12		16		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

299.00

Transaction ID : B-787

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

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

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

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).....▶

299.00

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

9523.67