

**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

Wilson For Congress

ADDRESS (number and street)

1603 Beaver Lake Dr

Check if different  
than previously  
reported. (ACC)

Mahomet

IL

61853

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

C00898288

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

IL

13

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

07 / 01 / 2025

through

M M / D D / Y Y Y Y

09 / 30 / 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

Kesler, Mark, , ,

Signature of Treasurer

Kesler, Mark, , ,

Date

M M / D D / Y Y Y Y

08 / 20 / 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

Wilson For Congress

Report Covering the Period:

From:

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

To:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

|                                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)                                                                          |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....                                              | 43895.34                | 65891.85                           |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....                                                        | 0.00                    | 0.00                               |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 43895.34                | 65891.85                           |
| 7. Net Operating Expenditures                                                                                    |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....                                                         | 51026.54                | 117469.66                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....                                               | 0.00                    | 0.00                               |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 51026.54                | 117469.66                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27).....                                              | 6922.19                 |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 58500.00                |                                    |

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Wilson For Congress

Report Covering the Period:

From:

MM / DD / YYYY  
07 / 01 / 2025

To:

MM / DD / YYYY  
09 / 30 / 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).....

5529.97

20990.22

(ii) Unitemized.....

1938.33

5671.79

(iii) TOTAL of contributions  
from individuals ▶

7468.30

26662.01

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees  
(such as PACs).....

0.00

0.00

(d) The Candidate.....

36427.04

39229.84

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

43895.34

65891.85

12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES .....

0.00

0.00

## 13. LOANS:

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

8000.00

58500.00

(b) All Other Loans.....

0.00

0.00

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

8000.00

58500.00

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)..... ▶

51895.34

124391.85

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

| II. DISBURSEMENTS                                                            | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....                                              | 51026.54                      | 117469.66                          |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:                                                         |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....                                                 | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:                                             |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 0.00                               |
| (b) Political Party Committees.....                                          | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs) .....                       | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 0.00                               |
| 21. OTHER DISBURSEMENTS .....                                                | 0.00                          | 0.00                               |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 51026.54                      | 117469.66                          |

## **III. CASH SUMMARY**

|                                                                                       |          |
|---------------------------------------------------------------------------------------|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 6053.39  |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 51895.34 |
| 25. SUBTOTAL (add Line 23 and Line 24).....                                           | 57948.73 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 51026.54 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 6922.19  |

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

PAGE 5 OF 28

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

Bird, Chris, , ,

A.

Mailing Address 2906 E Oaks Street

City

Urbana

State

IL

Zip Code

61802

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Lecturer

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 1 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.4399

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

Full Name (Last, First, Middle Initial)

Brown, Thomas, , ,

B.

Mailing Address 139 CR 2300 N

City

Mahomet

State

IL

Zip Code

61853

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wells Fargo AdvisorsOccupation  
Financial Advisor

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 5 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.5441

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Crabb, Lyle, , ,

C.

Mailing Address 472 Oak St

City

Elmhurst

State

IL

Zip Code

60126

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Press GaneyOccupation  
SDET

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.25

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 0 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.4431

Amount of Each Receipt this Period

260.25

☐ Memo Item  
Contribution

1010.25

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

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 28

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

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NAME OF COMMITTEE (In Full)

**Wilson For Congress**

Full Name (Last, First, Middle Initial)

Halverson, Eric, , ,

**A.**

Mailing Address 2449 Bearsdale Rd

City

Clinton

State

IL

Zip Code

61727

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Constellation

Occupation  
Engineer

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.4415

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

Full Name (Last, First, Middle Initial)

Porter, Davonne, , ,

**B.**

Mailing Address 2314 Fields South Dr

City

Champaign

State

IL

Zip Code

61822

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Taylor Realty

Occupation  
Realtor

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y  
08 03 2025

Transaction ID : SA11AI.4425

Amount of Each Receipt this Period

208.20

☐ Memo Item  
Contribution

Full Name (Last, First, Middle Initial)

Povalish, Bruce, , ,

**C.**

Mailing Address 1413 Countryside Pl

City

Champaign

State

IL

Zip Code

61821

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
financial advisor

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
08 06 2025

Transaction ID : SA11AI.4379

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Contribution

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

958.20

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 28

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

Pratt, Stephanie, , ,

A.

Mailing Address 1019 Declaration Dr

City  
ChampaignState  
ILZip Code  
61874FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Realtor

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.25

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 1 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.4419

Amount of Each Receipt this Period

260.25

☐ Memo Item  
Contribution

Full Name (Last, First, Middle Initial)

Rieken, Dennis, , ,

B.

Mailing Address 4308 Lynhurst Rd

City  
SpringfieldState  
ILZip Code  
62711FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
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 |
| 0 | 9 |   | 2 | 6 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.4410

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
Contribution

Full Name (Last, First, Middle Initial)

Steigman, Sharon, , ,

C.

Mailing Address 602 E Evergreen Ct

City  
UrbanaState  
ILZip Code  
61802FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
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 |
| 0 | 7 |   | 3 | 1 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.4404

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

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

1510.25

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 8 OF 28

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

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NAME OF COMMITTEE (In Full)

**Wilson For Congress**

Full Name (Last, First, Middle Initial)

Tarrant, Steve, , ,

**A.**

Mailing Address 601 Lake Falls Blvd

City

Savoy

State

IL

Zip Code

61874

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm

Occupation  
Manager

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1041.02

Date of Receipt

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

Transaction ID : SA11AI.4429

Amount of Each Receipt this Period

1041.02

☐ Memo Item  
Contribution

Full Name (Last, First, Middle Initial)

Taylor, Russ, , ,

**B.**

Mailing Address 1301 W Hickory St

City

Mahomet

State

IL

Zip Code

61853

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self employed

Occupation  
real estate

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  
09 16 2025

Transaction ID : SA11AI.5443

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Vogus, Tim, , ,

**C.**

Mailing Address 4804 S Cottonwood Rd

City

Urbana

State

IL

Zip Code

61802

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 ▼

260.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 03 2025

Transaction ID : SA11AI.4367

Amount of Each Receipt this Period

260.25

☐ Memo Item  
Contribution

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

1801.27

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 28

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

Warfel, Linden, , ,

A. Mailing Address 581 CR 900 E

City  
TolonoState  
ILZip Code  
61880

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 07  |   | 31  |   | 2025        |

Transaction ID : SA11AI.4402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Farmer

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
|     |   |     |   |             |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
|     |   |     |   |             |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period

☐ Memo Item

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

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

|         |
|---------|
| 250.00  |
| 5529.97 |

# **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 10 OF 28

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

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NAME OF COMMITTEE (In Full)

**Wilson For Congress**

Full Name (Last, First, Middle Initial)

Wilson, Jeff, , ,

**A.**

Mailing Address 1603 Beaver Lake Dr

City

Mahomet

State

IL

Zip Code

61853

FEC ID number of contributing  
federal political committee.

**C** H6IL13154

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

19802.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 17 2025

Transaction ID : SA11D.5574

Amount of Each Receipt this Period

17000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Wilson, Jeff, , ,

**B.**

Mailing Address 1603 Beaver Lake Dr

City

Mahomet

State

IL

Zip Code

61853

FEC ID number of contributing  
federal political committee.

**C** H6IL13154

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

32552.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 19 2025

Transaction ID : SA11D.5576

Amount of Each Receipt this Period

12750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Wilson, Jeff, , ,

**C.**

Mailing Address 1603 Beaver Lake Dr

City

Mahomet

State

IL

Zip Code

61853

FEC ID number of contributing  
federal political committee.

**C** H6IL13154

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

47229.84

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 30 2025

Transaction ID : SA11D.5451

Amount of Each Receipt this Period

6677.04

☐ Memo Item

Donation

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

36427.04

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

36427.04

# **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 28

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

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NAME OF COMMITTEE (In Full)

**Wilson For Congress**

Full Name (Last, First, Middle Initial)

Wilson, Jeff, , ,

**A.**

Mailing Address 1603 Beaver Lake Dr

City

Mahomet

State

IL

Zip Code

61853

FEC ID number of contributing  
federal political committee.

**C** H6IL13154

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

40552.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 12 / 2025

Transaction ID : SA13A.4387

Amount of Each Receipt this Period

8000.00

☐ Memo Item  
personal loan

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

8000.00

8000.00

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

PAGE 12 OF 28

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

**A. 316 Strategies, LLC**

Mailing Address 12506 Crestwood Ct

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 17  |   | 2025    |

City  
MontgomeryState  
TXZip Code  
77356Purpose of Disbursement  
campaign management

001

Candidate Name  
Wilson For CongressCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 13

FEC Identification Number

C C00898288

Amount of Each Disbursement this Period

13000.00

Transaction ID : SB17.4480

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. 316 Strategies, LLC**

Mailing Address 12506 Crestwood Ct

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 19  |   | 2025    |

City  
MontgomeryState  
TXZip Code  
77356Purpose of Disbursement  
campaign management

001

Candidate Name  
Wilson For CongressCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 13

FEC Identification Number

C C00898288

Amount of Each Disbursement this Period

13000.00

Transaction ID : SB17.4536

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. 316 Strategies, LLC**

Mailing Address 12506 Crestwood Ct

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 17  |   | 2025    |

City  
MontgomeryState  
TXZip Code  
77356Purpose of Disbursement  
campaign management

001

Candidate Name  
Wilson For CongressCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 13

FEC Identification Number

C C00898288

Amount of Each Disbursement this Period

13000.00

Transaction ID : SB17.4650

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

39000.00

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

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

PAGE 13 OF 28

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

**A. Champaign County Fair Association**

Mailing Address 908 N Coler Ave

City  
UrbanaState  
ILZip Code  
61801Purpose of Disbursement  
Event Sponsorship

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 4 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.5579

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Costco**

Mailing Address 2310 Wabash Ave

City  
SpringfieldState  
ILZip Code  
62704Purpose of Disbursement  
candy

Candidate Name

Wilson, Jeff, , ,

Office Sought:

|                                     |           |
|-------------------------------------|-----------|
| <input checked="" type="checkbox"/> | House     |
| <input type="checkbox"/>            | Senate    |
| <input type="checkbox"/>            | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State: IL

District: 13

Date of Disbursement

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

FEC Identification Number

C H6IL13154

Amount of Each Disbursement this Period

229.87

Transaction ID : SB17.4439

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Costco**

Mailing Address 2310 Wabash Ave

City  
SpringfieldState  
ILZip Code  
62704Purpose of Disbursement  
candy

Candidate Name

Wilson, Jeff, , ,

Office Sought:

|                                     |           |
|-------------------------------------|-----------|
| <input checked="" type="checkbox"/> | House     |
| <input type="checkbox"/>            | Senate    |
| <input type="checkbox"/>            | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State: IL

District: 13

Date of Disbursement

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

FEC Identification Number

C H6IL13154

Amount of Each Disbursement this Period

26.24

Transaction ID : SB17.4440

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

506.11

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

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

PAGE 14 OF 28

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

**A. Dixon Graphics**

Mailing Address 312 S Neil St

City  
ChampaignState  
ILZip Code  
61820Purpose of Disbursement  
shirts

004

Candidate Name  
Wilson, Jeff, , ,Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 13

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 03 / 2025

FEC Identification Number

C H6IL13154

Amount of Each Disbursement this Period

236.55

Transaction ID : SB17.4435

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Don Tracy for IL**

Mailing Address PO Box 135

City  
SpringfieldState  
ILZip Code  
62701Purpose of Disbursement  
fundraiser event

003

Candidate Name  
Wilson, Jeff, , ,Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 13

Date of Disbursement

M M / D D / Y Y Y Y  
09 / 30 / 2025

FEC Identification Number

C H6IL13154

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.4660

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DoubleTree**

Mailing Address 701 E Adams St

City  
SpringfieldState  
ILZip Code  
62701Purpose of Disbursement  
Hotel

002

Candidate Name  
Wilson, Jeff, , ,Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 13

Date of Disbursement

M M / D D / Y Y Y Y  
07 / 24 / 2025

FEC Identification Number

C H6IL13154

Amount of Each Disbursement this Period

383.80

Transaction ID : SB17.4469

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

920.35

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

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

PAGE 15 OF 28

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

**A. Go Big Media, LLC**

Mailing Address 44 Canal Center Plaza

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 08  |   | 2025    |

City  
AlexandriaState  
VAZip Code  
22314

FEC Identification Number

|   |           |
|---|-----------|
| C | H6IL13154 |
|---|-----------|

Purpose of Disbursement  
Website

004

Amount of Each Disbursement this Period

|        |
|--------|
| 350.00 |
|--------|

Candidate Name  
Wilson, Jeff, , ,Category/  
Type

Transaction ID : SB17.4478

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL

District: 13

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Go Big Media, LLC**

Mailing Address 44 Canal Center Plaza

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 06  |   | 2025    |

City  
AlexandriaState  
VAZip Code  
22314

FEC Identification Number

|   |           |
|---|-----------|
| C | H6IL13154 |
|---|-----------|

Purpose of Disbursement  
Advertising

004

Amount of Each Disbursement this Period

|        |
|--------|
| 350.00 |
|--------|

Candidate Name  
Wilson, Jeff, , ,Category/  
Type

Transaction ID : SB17.4534

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL

District: 13

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Go Big Media, LLC**

Mailing Address 44 Canal Center Plaza

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 08  |   | 2025    |

City  
AlexandriaState  
VAZip Code  
22314

FEC Identification Number

|   |           |
|---|-----------|
| C | H6IL13154 |
|---|-----------|

Purpose of Disbursement  
Website

004

Amount of Each Disbursement this Period

|        |
|--------|
| 350.00 |
|--------|

Candidate Name  
Wilson, Jeff, , ,Category/  
Type

Transaction ID : SB17.4633

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL

District: 13

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

|         |
|---------|
| 1050.00 |
|---------|

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

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

PAGE 16 OF 28

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

**A. Hilton Garden Inn**

Mailing Address 3100 S Dirksen Pkwy

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 19  |   | 2025    |

City  
SpringfieldState  
ILZip Code  
62701Purpose of Disbursement  
meeting

007

Candidate Name  
Wilson, Jeff, , ,Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 13

FEC Identification Number

C H6IL13154

Amount of Each Disbursement this Period

174.26

Transaction ID : SB17.4637

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Hilton Garden Inn**

Mailing Address 3100 S Dirksen Pkwy

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 20  |   | 2025    |

City  
SpringfieldState  
ILZip Code  
62701Purpose of Disbursement  
meeting

007

Candidate Name  
Wilson, Jeff, , ,Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 13

FEC Identification Number

C H6IL13154

Amount of Each Disbursement this Period

194.09

Transaction ID : SB17.4638

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Hilton Garden Inn**

Mailing Address 3100 S Dirksen Pkwy

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 26  |   | 2025    |

City  
SpringfieldState  
ILZip Code  
62701Purpose of Disbursement  
Route 66

002

Candidate Name  
Wilson, Jeff, , ,Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 13

FEC Identification Number

C H6IL13154

Amount of Each Disbursement this Period

92.74

Transaction ID : SB17.4649

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

461.09

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

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

PAGE 17 OF 28

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

**A. Holderfield, Stephanie, , ,**

Mailing Address 12506 Crestwood Ct

City  
MontgomeryState  
TXZip Code  
77356Purpose of Disbursement  
advertising

001

Candidate Name  
Wilson, Jeff, , ,Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 13

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 1 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C H6IL13154

Amount of Each Disbursement this Period

1637.20

Transaction ID : SB17.4535

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Illinois Family Institute**

Mailing Address PO Box 876

City  
Tinley ParkState  
ILZip Code  
60477Purpose of Disbursement  
tickets

007

Candidate Name  
Wilson, Jeff, , ,Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 13

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 5 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C H6IL13154

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.4519

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Jupiters**

Mailing Address 39 E Main St

City  
ChampaignState  
ILZip Code  
61820Purpose of Disbursement  
petition event

007

Candidate Name  
Wilson, Jeff, , ,Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 13

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 6 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C H6IL13154

Amount of Each Disbursement this Period

246.04

Transaction ID : SB17.4623

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

2133.24

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

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

PAGE 18 OF 28

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

**A. Jupiters**

Mailing Address 39 E Main St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 22  |   | 2025    |

City  
ChampaignState  
ILZip Code  
61820

FEC Identification Number

|   |           |
|---|-----------|
| C | H6IL13154 |
|---|-----------|

Purpose of Disbursement  
petition event

007

Amount of Each Disbursement this Period

|        |
|--------|
| 246.04 |
|--------|

Candidate Name  
Wilson, Jeff, , ,Category/  
Type

Office Sought:

|                                           |
|-------------------------------------------|
| <input checked="" type="checkbox"/> House |
| <input type="checkbox"/> Senate           |
| <input type="checkbox"/> President        |

Disbursement For: 2026

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

Transaction ID : SB17.4659

☐ Memo Item

State: IL

District: 13

Full Name (Last, First, Middle Initial)

**B. Northfield Inn**

Mailing Address 3280 Northfield Dr

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 15  |   | 2025    |

City  
SpringfieldState  
ILZip Code  
62702

FEC Identification Number

|   |           |
|---|-----------|
| C | H6IL13154 |
|---|-----------|

Purpose of Disbursement  
Hotel

002

Amount of Each Disbursement this Period

|        |
|--------|
| 285.00 |
|--------|

Candidate Name  
Wilson, Jeff, , ,Category/  
Type

Office Sought:

|                                           |
|-------------------------------------------|
| <input checked="" type="checkbox"/> House |
| <input type="checkbox"/> Senate           |
| <input type="checkbox"/> President        |

Disbursement For: 2026

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

Transaction ID : SB17.4508

☐ Memo Item

State: IL

District: 13

Full Name (Last, First, Middle Initial)

**C. ObscureIQ**

Mailing Address 502 W 7th St STE 100

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 18  |   | 2025    |

City  
ErieState  
PAZip Code  
16502

FEC Identification Number

|   |           |
|---|-----------|
| C | H6IL13154 |
|---|-----------|

Purpose of Disbursement  
background check

001

Amount of Each Disbursement this Period

|         |
|---------|
| 1250.00 |
|---------|

Candidate Name  
Wilson, Jeff, , ,Category/  
Type

Office Sought:

|                                           |
|-------------------------------------------|
| <input checked="" type="checkbox"/> House |
| <input type="checkbox"/> Senate           |
| <input type="checkbox"/> President        |

Disbursement For: 2026

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

Transaction ID : SB17.4658

☐ Memo Item

State: IL

District: 13

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

1781.04

**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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|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

**A. Sams Club**

Mailing Address 915 W Marketview Dr

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 11  |   | 2025    |

City  
ChampaignState  
ILZip Code  
61820

FEC Identification Number

|   |           |
|---|-----------|
| C | H6IL13154 |
|---|-----------|

Purpose of Disbursement  
candy for parade

007

Amount of Each Disbursement this Period

|        |
|--------|
| 344.52 |
|--------|

Transaction ID : SB17.4443

☐ Memo ItemCandidate Name  
Wilson, Jeff, , ,Category/  
Type

Office Sought:

|                                           |
|-------------------------------------------|
| <input checked="" type="checkbox"/> House |
| <input type="checkbox"/> Senate           |
| <input type="checkbox"/> President        |

Disbursement For: 2026

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State: IL District: 13

Full Name (Last, First, Middle Initial)

**B. Sams Club**

Mailing Address 915 W Marketview Dr

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 14  |   | 2025    |

City  
ChampaignState  
ILZip Code  
61820

FEC Identification Number

|   |           |
|---|-----------|
| C | H6IL13154 |
|---|-----------|

Purpose of Disbursement  
membership for event

007

Amount of Each Disbursement this Period

|       |
|-------|
| 20.00 |
|-------|

Transaction ID : SB17.4446

☐ Memo ItemCandidate Name  
Wilson, Jeff, , ,Category/  
Type

Office Sought:

|                                           |
|-------------------------------------------|
| <input checked="" type="checkbox"/> House |
| <input type="checkbox"/> Senate           |
| <input type="checkbox"/> President        |

Disbursement For: 2026

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State: IL District: 13

Full Name (Last, First, Middle Initial)

**C. Sams Club**

Mailing Address 915 W Marketview Dr

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 29  |   | 2025    |

City  
ChampaignState  
ILZip Code  
61820

FEC Identification Number

|   |           |
|---|-----------|
| C | H6IL13154 |
|---|-----------|

Purpose of Disbursement  
candy

007

Amount of Each Disbursement this Period

|        |
|--------|
| 175.21 |
|--------|

Transaction ID : SB17.4523

☐ Memo ItemCandidate Name  
Wilson, Jeff, , ,Category/  
Type

Office Sought:

|                                           |
|-------------------------------------------|
| <input checked="" type="checkbox"/> House |
| <input type="checkbox"/> Senate           |
| <input type="checkbox"/> President        |

Disbursement For: 2026

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State: IL District: 13

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

539.73

**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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|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

**A. Sams Club**

Mailing Address 915 W Marketview Dr

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 31  |   | 2025    |

City  
ChampaignState  
ILZip Code  
61820

FEC Identification Number

☒ H6IL13154Purpose of Disbursement  
candy for parade

007

Amount of Each Disbursement this Period

355.86

Transaction ID : SB17.4528

☐ Memo ItemCandidate Name  
Wilson, Jeff, , ,Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL

District: 13

Full Name (Last, First, Middle Initial)

**B. St. Clair GOP**

Mailing Address 4510 N Illinois St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 30  |   | 2025    |

City  
BellevilleState  
ILZip Code  
62220

FEC Identification Number

☒ H6IL13154Purpose of Disbursement  
GOP Dinner

007

Amount of Each Disbursement this Period

104.38

Transaction ID : SB17.4634

☐ Memo ItemCandidate Name  
Wilson, Jeff, , ,Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL

District: 13

Full Name (Last, First, Middle Initial)

**C. Walmart**

Mailing Address 702 SW 8th St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 17  |   | 2025    |

City  
BentonvilleState  
ARZip Code  
72716

FEC Identification Number

☒ H6IL13154Purpose of Disbursement  
flags for parade

007

Amount of Each Disbursement this Period

129.80

Transaction ID : SB17.4452

☐ Memo ItemCandidate Name  
Wilson, Jeff, , ,Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL

District: 13

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

590.04

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

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

PAGE 21 OF 28

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

**A. Walmart**

Mailing Address 702 SW 8th St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 22  |   | 2025    |

City  
BentonvilleState  
ARZip Code  
72716

FEC Identification Number

|   |           |
|---|-----------|
| C | H6IL13154 |
|---|-----------|

Purpose of Disbursement  
chairs for event

007

Amount of Each Disbursement this Period

|       |
|-------|
| 58.46 |
|-------|

Candidate Name  
Wilson, Jeff, , ,Category/  
Type

Office Sought:

|                                           |
|-------------------------------------------|
| <input checked="" type="checkbox"/> House |
| <input type="checkbox"/> Senate           |
| <input type="checkbox"/> President        |

Disbursement For: 2026

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

Transaction ID : SB17.4459

☐ Memo Item

State: IL

District: 13

Full Name (Last, First, Middle Initial)

**B. Walmart**

Mailing Address 702 SW 8th St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 23  |   | 2025    |

City  
BentonvilleState  
ARZip Code  
72716

FEC Identification Number

|   |           |
|---|-----------|
| C | H6IL13154 |
|---|-----------|

Purpose of Disbursement  
flags for event

007

Amount of Each Disbursement this Period

|       |
|-------|
| 54.23 |
|-------|

Candidate Name  
Wilson, Jeff, , ,Category/  
Type

Office Sought:

|                                           |
|-------------------------------------------|
| <input checked="" type="checkbox"/> House |
| <input type="checkbox"/> Senate           |
| <input type="checkbox"/> President        |

Disbursement For: 2026

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

Transaction ID : SB17.4461

☐ Memo Item

State: IL

District: 13

Full Name (Last, First, Middle Initial)

**C. Walmart**

Mailing Address 702 SW 8th St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 05  |   | 2025    |

City  
BentonvilleState  
ARZip Code  
72716

FEC Identification Number

|   |           |
|---|-----------|
| C | H6IL13154 |
|---|-----------|

Purpose of Disbursement  
flags/office

006

Amount of Each Disbursement this Period

|       |
|-------|
| 18.40 |
|-------|

Candidate Name  
Wilson, Jeff, , ,Category/  
Type

Office Sought:

|                                           |
|-------------------------------------------|
| <input checked="" type="checkbox"/> House |
| <input type="checkbox"/> Senate           |
| <input type="checkbox"/> President        |

Disbursement For: 2026

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

Transaction ID : SB17.4618

☐ Memo Item

State: IL

District: 13

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

131.09

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

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

PAGE 22 OF 28

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Wilson For Congress

Full Name (Last, First, Middle Initial)

**A. Win Red**

Mailing Address 1776 Wilson Flvd, Suite 530

City  
ArlingtonState  
VAZip Code  
22209Purpose of Disbursement  
Credit Card Processing Fees

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 |
| 09  |   | 30  |   | 2025    |

FEC Identification Number

C

Amount of Each Disbursement this Period

109.06

Transaction ID : SB17.5452

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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

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).....▶

109.06

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

47221.75

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

PAGE 23 OF 28

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4206

Wilson For Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Wilson, Jeff, , ,

Mailing Address

1603 Beaver Lake Dr

City

Mahomet

State

IL

ZIP Code

61853

☐ Personal Funds of the Candidate

Original Amount of Loan

500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

500.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
01 29 / 2025M M / D D / Y Y Y Y  
08 31 / 0010

3.00 % (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).....▶

500.00

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

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

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

PAGE 24 OF 28

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4107

Wilson For Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Wilson, Jeff, , ,

Mailing Address

1603 Beaver Lake Dr

City

Mahomet

State

IL

ZIP Code

61853

☒ Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
02 14 / 2025

M M / D D / Y Y Y Y

12/31/2027

3.00 % (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).....▶

10000.00

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

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

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

PAGE 25 OF 28

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4099

Wilson For Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Wilson, Jeff, , ,

Mailing Address

1603 Beaver Lake Dr

City

Mahomet

State

IL

ZIP Code

61853

☒ Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
02 21 / 2025

M M / D D / Y Y Y Y

12/31/2027

3.00 % (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).....▶

10000.00

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

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

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

PAGE 26 OF 28

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4306

Wilson For Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Wilson, Jeff, , ,

Mailing Address

1603 Beaver Lake Dr

City

Mahomet

State

IL

ZIP Code

61853

☒ Personal Funds of the Candidate

Original Amount of Loan

15000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
05 15 / 2025

M M / D D / Y Y Y Y

1/1/2027

3.00 % (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).....▶

15000.00

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

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

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

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4330

Wilson For Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Wilson, Jeff, , ,

Mailing Address

1603 Beaver Lake Dr

City

Mahomet

State

IL

ZIP Code

61853

☒ Personal Funds of the Candidate

Original Amount of Loan

15000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
06 06 / 2025M M / D D / Y Y Y Y  
04 14 / 0006

3.00

% (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).....▶

15000.00

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

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

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

PAGE 28 OF 28

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4387

Wilson For Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Wilson, Jeff, , ,

Mailing Address

1603 Beaver Lake Dr

City

Mahomet

State

IL

ZIP Code

61853

☐ Personal Funds of the Candidate

Original Amount of Loan

8000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

8000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
09 12 / 2025M M / D D / Y Y Y Y  
04 04 / 0010

3.00 % (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).....▶

8000.00

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

58500.00

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