

**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

Steger for Congress

ADDRESS (number and street)

PO Box 721232

Check if different
than previously
reported. (ACC)

Berkley

MI

48072

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00911297

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

MI

11

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
04 / 01 / 2026

through

M M / D D / Y Y Y Y
06 / 30 / 2026*I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.*

Type or Print Name of Treasurer

Nelson, Stephanie, , ,

Signature of Treasurer

Nelson, Stephanie, , ,

Date

M M / D D / Y Y Y Y
07 / 10 / 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

Steger for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	0.00	28138.81
(b) Total Contribution Refunds (from Line 20(d))	7105.43	7147.41
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	- 7105.43	20991.40
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	846.15	13429.13
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	77.57
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	846.15	13351.56
8. Cash on Hand at Close of Reporting Period (from Line 27)	7368.24	
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

Steger for Congress

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2026

To:

MM / DD / YYYY
06 / 30 / 2026**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

0.00

26850.03

(ii) Unitemized

0.00

1275.65

(iii) TOTAL of contributions
from individuals ▶

0.00

28125.68

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

0.00

13.13

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

0.00

28138.81

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

77.57

15. OTHER RECEIPTS
(Dividends, Interest, etc.)

0.00

400.00

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

0.00

28616.38

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.....	846.15	13429.13
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	7105.43	7147.41
(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)).....	7105.43	7147.41
21. OTHER DISBURSEMENTS	0.00	671.60
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	7951.58	21248.14

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	15319.82
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	15319.82
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	7951.58
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	7368.24

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

PAGE 5 OF 10

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

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NAME OF COMMITTEE (In Full)

Steger for Congress

Full Name (Last, First, Middle Initial)

A. Anedot

Mailing Address 1340 Poydras Street

City
New OrleansState
LAZip Code
70112Purpose of Disbursement
Credit card processing fees

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

21.15

Transaction ID : B-233

☐ 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
Data processing services

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

275.00

Transaction ID : B-222

☐ 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
Data processing services

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

275.00

Transaction ID : B-239

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

571.15

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 6 OF 10

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

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NAME OF COMMITTEE (In Full)

Steger 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
Data processing services

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

275.00

Transaction ID : B-240

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

275.00

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

846.15

**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 7 OF 10

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

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NAME OF COMMITTEE (In Full)

Steger for Congress

Full Name (Last, First, Middle Initial)

A. Jackson, Angela, , ,

Mailing Address 8240 W KL Ave

City
KalamazooState
MIZip Code
49009Purpose of Disbursement
Refunded contribution

010

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1041.98

Transaction ID : B-234

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jackson, Angela, , ,

Mailing Address 8240 W KL Ave

City
KalamazooState
MIZip Code
49009Purpose of Disbursement
Refunded contribution

010

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

2458.02

Transaction ID : B-235

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jackson, Rob, , ,

Mailing Address 8240 West KL Avenue

City
KalamazooState
MIZip Code
49009Purpose of Disbursement
Refunded contribution

010

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1188.13

Transaction ID : B-236

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

4688.13

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)

Steger for Congress

Full Name (Last, First, Middle Initial)

A. Jackson, Rob, , ,

Mailing Address 8240 West KL Avenue

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	2	6

City
KalamazooState
MIZip Code
49009

FEC Identification Number

C

Purpose of Disbursement
Refunded contribution

010

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

521.15

Transaction ID : B-237

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Jackson, Rob, , ,

Mailing Address 8240 West KL Avenue

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	2	6

City
KalamazooState
MIZip Code
49009

FEC Identification Number

C

Purpose of Disbursement
Refunded contribution

010

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

521.15

Transaction ID : B-238

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. O'Connor, Thomas, , ,

Mailing Address 3395 Shimmons Rd

Date of Disbursement

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

City
Auburn HillsState
MIZip Code
48326

FEC Identification Number

C

Purpose of Disbursement
Refunded contribution

010

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

52.40

Transaction ID : B-228

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

1094.70

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

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

PAGE 9 OF 10

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

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NAME OF COMMITTEE (In Full)

Steger for Congress

Full Name (Last, First, Middle Initial)

A. O'Connor, Thomas, , ,

Mailing Address 3395 Shimmons Rd

City
Auburn HillsState
MIZip Code
48326Purpose of Disbursement
Refunded contribution

010

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

260.73

Transaction ID : B-229

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. O'Connor, Thomas, , ,

Mailing Address 3395 Shimmons Rd

City
Auburn HillsState
MIZip Code
48326Purpose of Disbursement
Refunded contribution

010

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

156.56

Transaction ID : B-230

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. O'Connor, Thomas, , ,

Mailing Address 3395 Shimmons Rd

City
Auburn HillsState
MIZip Code
48326Purpose of Disbursement
Refunded contribution

010

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

521.15

Transaction ID : B-231

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

938.44

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

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

PAGE 10 OF 10

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

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NAME OF COMMITTEE (In Full)

Steger for Congress

Full Name (Last, First, Middle Initial)

A. O'Connor, Thomas, , ,

Mailing Address 3395 Shimmons Rd

City
Auburn HillsState
MIZip Code
48326Purpose of Disbursement
Refunded contribution

010

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
0	5		2	2		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

209.16

Transaction ID : B-232

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

209.16

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

6930.43