

48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL NATHAN WILLETT FOR CONGRESS				
ADDRESS (number and street) PO BOX 125				
CITY LIBERTY		STATE MO		ZIP CODE 64069
2. NAME OF CANDIDATE WILLETT, NATHAN, , ,			3. OFFICE SOUGHT (State and District) House MO 06	
4. FEC IDENTIFICATION NUMBER C00945584				
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____				
A. FULL NAME ANTES, JEREMY, , ,			Name of Employer PRISM REAL ESTATE SERVICES	Date (month, day, year) 07/31/2026
MAILING ADDRESS 3104 WEST 154TH STREET			Transaction ID : F65-1377	Amount 1000.00
CITY OVERLAND PARK	STATE KS	ZIP CODE 66224	Occupation REAL ESTATE	
B. FULL NAME BOTHWELL, JULIE, , ,			Name of Employer RETIRED	Date (month, day, year) 07/31/2026
MAILING ADDRESS 17121 LIV 403			Transaction ID : F65-1355	Amount 1500.00
CITY MOORESVILLE	STATE MO	ZIP CODE 64664	Occupation RETIRED	
C. FULL NAME BROWNELL, BOBBY, , ,			Name of Employer BROWNELL FLATWORK, LLC	Date (month, day, year) 08/01/2026
MAILING ADDRESS 21411 SW CLOVER HILLS RD			Transaction ID : F65-1380	Amount 1041.02
CITY CLEVELAND	STATE MO	ZIP CODE 64734	Occupation FLATWORKER	
D. FULL NAME BUTTERFIELD, RICK, , ,			Name of Employer RETIRED	Date (month, day, year) 07/31/2026
MAILING ADDRESS 20891 HWY 5			Transaction ID : F65-1360	Amount 1041.02
CITY LINNEUS	STATE MO	ZIP CODE 64653	Occupation RETIRED	
E. FULL NAME C. HOLTHOUSE, ANGELA, , ,			Name of Employer RETIRED	Date (month, day, year) 07/31/2026
MAILING ADDRESS 10020 LANCASTER ROAD			Transaction ID : F65-1354	Amount 1000.00
CITY LIBERTY	STATE MO	ZIP CODE 64068	Occupation RETIRED	
SIGNATURE (optional) BOLES, JASON, D, ,			DATE 08/01/2026	For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

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Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

FEC FORM 6
(Revised 03/2016)

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continuation page			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE CURTIS NARRON, BRIAN, , , 609 PATRICK DRIVE EXCELSIOR SPRINGS MO 64024		Name of Employer RETIRED Transaction ID : F65-1352 Occupation RETIRED	
		Date (month, day, year) 07/31/2026	
		Amount 3500.00	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE GREER, ROSS, , , 36374 SSR-T CAMDEN MO 64017		Name of Employer RAY COUNTY STONE Transaction ID : F65-1376 Occupation MINER	
		Date (month, day, year) 07/31/2026	
		Amount 2082.03	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE K MANN, DRAKE, , , 1205 CEDAR AVENUE WELLMAN IA 52356		Name of Employer RETIRED Transaction ID : F65-1351 Occupation RETIRED	
		Date (month, day, year) 07/31/2026	
		Amount 3500.00	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE NOLAN POPE, JAMES, , , 12426 LIVE OAK CIRCLE PECULIAR MO 64078		Name of Employer RETIRED Transaction ID : F65-1350 Occupation RETIRED	
		Date (month, day, year) 07/31/2026	
		Amount 2500.00	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE POPE, JAMES, , , PO BOX 267 HARRISONVILLE MO 64701		Name of Employer RETIRED Transaction ID : F65-1353 Occupation RETIRED	
		Date (month, day, year) 07/31/2026	
		Amount 2500.00	

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE PRENGER, JOE, , , 10809 NE 106TH TER KANSAS CITY MO 64157		Name of Employer ECCO SELECT Transaction ID : F65-1378 Occupation DIRECTOR Date (month, day, year) 07/31/2026 Amount 3643.56	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE ROBERTSON, JAMES, , , P.O. BOX 165 LIBERTY MO 64069		Name of Employer ROBERTSON PROPERTIES Transaction ID : F65-1379 Occupation CONTRACTOR Date (month, day, year) 07/31/2026 Amount 1041.02	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer Occupation Date (month, day, year) Amount	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer Occupation Date (month, day, year) Amount	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer Occupation Date (month, day, year) Amount	