

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 TERRI DEBOER FOR CONGRESS			
ADDRESS (number and street) PO BOX 435			
CITY BYRON CENTER	STATE MI	ZIP CODE 49315	
2. NAME OF CANDIDATE DEBOER, TERRI, , ,		3. OFFICE SOUGHT (State and District) House MI 03	
		4. FEC IDENTIFICATION NUMBER C00941823	
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____			
A. FULL NAME C WOJTCZAK, BRIAN, , ,		Name of Employer SELF EMPLOYED	Date (month, day, year) 07/31/2026
MAILING ADDRESS 6485 DONNEGAL LANE SOUTHEAST		Transaction ID : F65-880	Amount 7000.00
CITY GRAND RAPIDS	STATE MI	ZIP CODE 49546	Occupation SELF EMPLOYED
B. FULL NAME C WOJTCZAK, BRIAN, , ,		Name of Employer SELF EMPLOYED	Date (month, day, year) 07/31/2026
MAILING ADDRESS 6485 DONNEGAL LANE SOUTHEAST		Transaction ID : F65-881	Amount 7000.00
CITY GRAND RAPIDS	STATE MI	ZIP CODE 49546	Occupation SELF EMPLOYED
C. FULL NAME COLUNGA, PATRICK, , ,		Name of Employer SELF EMPLOYED	Date (month, day, year) 07/31/2026
MAILING ADDRESS 7064 SPAULDING ROAD		Transaction ID : F65-868	Amount 7000.00
CITY RAVENNA	STATE MI	ZIP CODE 49451	Occupation SELF EMPLOYED
D. FULL NAME COLUNGA, PATRICK, , ,		Name of Employer SELF EMPLOYED	Date (month, day, year) 07/31/2026
MAILING ADDRESS 7064 SPAULDING ROAD		Transaction ID : F65-875	Amount 1000.00
CITY RAVENNA	STATE MI	ZIP CODE 49451	Occupation SELF EMPLOYED
E. FULL NAME DEN DULK, MARIETTA, , ,		Name of Employer RETIRED	Date (month, day, year) 07/31/2026
MAILING ADDRESS 4101 REEDS LAKE BOULEVARD		Transaction ID : F65-858	Amount 5000.00
CITY GRAND RAPIDS	STATE MI	ZIP CODE 49506	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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		4. FEC IDENTIFICATION NUMBER C00941823	
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
continuation page			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE DOANE, JACOB, , , 6919 CRYSTAL VIEW DRIVE SOUTHEAST CALEDONIA MI 49316		Name of Employer SELF EMPLOYED Transaction ID : F65-866 Occupation SELF EMPLOYED Date (month, day, year) 07/31/2026 Amount 7000.00	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE DOANE, JACOB, , , 6919 CRYSTAL VIEW DRIVE SOUTHEAST CALEDONIA MI 49316		Name of Employer SELF EMPLOYED Transaction ID : F65-867 Occupation SELF EMPLOYED Date (month, day, year) 07/31/2026 Amount 7000.00	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE F. DENARDO, ANTHONY, , , II 7167 TRAMORE COURT NORTHEAST BELMONT MI 49306		Name of Employer SELF EMPLOYED Transaction ID : F65-878 Occupation SELF EMPLOYED Date (month, day, year) 07/31/2026 Amount 7000.00	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE F. DENARDO, ANTHONY, , , II 7167 TRAMORE COURT NORTHEAST BELMONT MI 49306		Name of Employer SELF EMPLOYED Transaction ID : F65-879 Occupation SELF EMPLOYED Date (month, day, year) 07/31/2026 Amount 7000.00	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE HILLEARY, BRAD, , , 4391 DAVIS ROAD MUSKEGON MI 49441		Name of Employer WEBB CHEMICAL Transaction ID : F65-891 Occupation CEO Date (month, day, year) 08/01/2026 Amount 1041.02	

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE			
W SPOELHOF, JOHN, , ,		Name of Employer	
341 WAUKAZOO DRIVE		RETIRED	
HOLLAND MI 49424		Transaction ID : F65-862	
		Occupation	
		RETIRED	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			
		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	

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