

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
**Prairie Political Action Committee**

ADDRESS (number and street) **600 Pennsylvania Ave SE**  
**#15180**  
 Check if different than previously reported. (ACC) **Washington DC 20003**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00347195** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

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)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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 **Nissen, Melissa, , ,**

Signature of Treasurer **Nissen, Melissa, , ,** Date  /  /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Prairie Political Action Committee

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2025"/>	<input type="text"/>	<input type="text" value="76261.28"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="44926.05"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="57350.00"/>	<input type="text" value="179978.62"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="102276.05"/>	<input type="text" value="256239.90"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="87437.63"/>	<input type="text" value="241401.48"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="14838.42"/>	<input type="text" value="14838.42"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="2000.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**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

Write or Type Committee Name

**Prairie Political Action Committee**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	7350.00	48100.00
(ii) Unitemized .....	0.00	226.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	7350.00	48326.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	41000.00	113677.35
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	48350.00	162003.35
12. Transfers From Affiliated/Other Party Committees.....	9000.00	17929.09
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	29.06
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	17.12
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	57350.00	179978.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	57350.00	179978.62

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	77437.63	195651.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	77437.63	195651.48
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	28500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	- 2000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	- 2000.00
29. Other Disbursements (Including Non-Federal Donations).....	5000.00	19250.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	87437.63	241401.48
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	87437.63	241401.48

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	48350.00	162003.35
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	- 2000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	48350.00	164003.35
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	77437.63	195651.48
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	29.06
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	77437.63	195622.42

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 44
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Prairie Political Action Committee**

**A. Brown, James, P., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1660 L St NW  
 Ste 501  
 City Washington State DC Zip Code 20036-5662  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) City of St. Louis Occupation (for Individual) Federal Affairs Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 03 / 2025  
**Transaction ID : 23760963**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. James, Claudia, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3167 19th St N  
 City Arlington State VA Zip Code 22201-5103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Cogent Strategies Occupation (for Individual) Managing Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2025  
**Transaction ID : 24015911**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Potter, James, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 300 E Ash St  
 City Springfield State IL Zip Code 62703-3161  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) James R Potter PC Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 14 / 2025  
**Transaction ID : 22822359**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 44
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Prairie Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Schittek, Anton, , ,</b>		Date of Receipt MM / DD / YYYY 07 / 14 / 2025 <b>Transaction ID : 22824226</b>
Mailing Address 1221 Wilshire Dr		Amount of Each Receipt this Period 2000.00
City Mount Vernon	State IL	Zip Code 62864-2746
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Schittek, Anton, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 07 / 2025 <b>Transaction ID : 23413247</b>
Mailing Address 1221 Wilshire Dr		Amount of Each Receipt this Period 500.00
City Mount Vernon	State IL	Zip Code 62864-2746
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Swann, Adrian, M., ,</b>		Date of Receipt MM / DD / YYYY 07 / 21 / 2025 <b>Transaction ID : 22843341</b>
Mailing Address 909 Hamilton St NE		Amount of Each Receipt this Period 1000.00
City Washington	State DC	Zip Code 20011-6425
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Kroger Co	Occupation (for Individual) Deputy Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 44
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Prairie Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Boulanger, Philomena, , ,</b>		Date of Receipt MM / DD / YYYY 07 / 19 / 2025 <b>Transaction ID : 22835100</b>
Mailing Address 207 N Elmwood Ave		Amount of Each Receipt this Period 100.00
City Oak Park	State IL	Zip Code 60302-2221
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	* Earmarked Contribution through ACTBLUE on 07/20/2025
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Boulanger, Philomena, , ,</b>		Date of Receipt MM / DD / YYYY 08 / 19 / 2025 <b>Transaction ID : 22949461</b>
Mailing Address 207 N Elmwood Ave		Amount of Each Receipt this Period 100.00
City Oak Park	State IL	Zip Code 60302-2221
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	* Earmarked Contribution through ACTBLUE on 08/24/2025
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Boulanger, Philomena, , ,</b>		Date of Receipt MM / DD / YYYY 09 / 19 / 2025 <b>Transaction ID : 23070688</b>
Mailing Address 207 N Elmwood Ave		Amount of Each Receipt this Period 100.00
City Oak Park	State IL	Zip Code 60302-2221
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	* Earmarked Contribution through ACTBLUE on 09/21/2025
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 44
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Prairie Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Boulanger, Philomena, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2025
Mailing Address 207 N Elmwood Ave		<b>Transaction ID : 23272729</b>
City Oak Park	State IL	Zip Code 60302-2221
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	* Earmarked Contribution through ACTBLUE on 10/19/2025

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Boulanger, Philomena, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 19 / 2025
Mailing Address 207 N Elmwood Ave		<b>Transaction ID : 23462492</b>
City Oak Park	State IL	Zip Code 60302-2221
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	* Earmarked Contribution through ACTBLUE on 11/23/2025

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Boulanger, Philomena, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2025
Mailing Address 207 N Elmwood Ave		<b>Transaction ID : 23993465</b>
City Oak Park	State IL	Zip Code 60302-2221
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 600.00	* Earmarked Contribution through ACTBLUE on 12/21/2025

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 10 OF 44  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
**Prairie Political Action Committee**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Kovler, Peter, , ,

Mailing Address 2618 31st St NW

City Washington	State DC	Zip Code 20008-3519
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Judy Peter Blum Kovler Foundation	Occupation (for Individual) Director
------------------------------------------------------------------------	-----------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 11 / 2025

**Transaction ID : 23429613**

Amount of Each Receipt this Period  
1500.00

Memo Item

\* Earmarked Contribution through ACTBLUE on 11/16/2025

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
ACTBLUE

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2100.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2025

**Transaction ID : 23993465E**

Amount of Each Receipt this Period  
2100.00

Memo Item

Note: Total contribution(s) earmarked through this organization.

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	7350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 44
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Prairie Political Action Committee**

**A. AM General LLC PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1401 S Clark St  
Ste 1030

City Arlington State VA Zip Code 22202-4165

FEC ID number of contributing federal political committee. **C** C00432856

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
10 / 31 / 2025  
**Transaction ID : 23389278**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. Ameren Federal PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1331 Pennsylvania Ave NW  
Ste 550S

City Washington State DC Zip Code 20004-1710

FEC ID number of contributing federal political committee. **C** C00206136

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
12 / 22 / 2025  
**Transaction ID : 24015898**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C. BNSF Railway Company RailPAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 961039

City Fort Worth State TX Zip Code 76161-0039

FEC ID number of contributing federal political committee. **C** C00235739

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
12 / 31 / 2025  
**Transaction ID : 24015912**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 44
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Prairie Political Action Committee**

**A. CARPENTERS LEGISLATIVE IMPROVEMENT COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 Constitution Ave NW  
10th Fl West

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00001016

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
09 / 09 / 2025  
**Transaction ID : 23001165**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. CME Group, Inc. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 S Wacker Dr

City Chicago State IL Zip Code 60606-7431

FEC ID number of contributing federal political committee. **C** C00076299

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
12 / 29 / 2025  
**Transaction ID : 24015904**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C. COSTELLO FOR CONGRESS COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 8250

City Belleville State IL Zip Code 62222-8250

FEC ID number of contributing federal political committee. **C** C00238444

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
09 / 25 / 2025  
**Transaction ID : 23097016**

Amount of Each Receipt this Period  
2000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 44
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Prairie Political Action Committee**

**A. DELOITTE POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 365

City Washington	State DC	Zip Code 20044-0365
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00211318

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2025

**Transaction ID : 23413818**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. Food Marketing Institute PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 251 18th St S

City Arlington	State VA	Zip Code 22202-3531
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00014555

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	03	/	2025

**Transaction ID : 23760962**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C. Illinois Political Active Letter Carriers PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 7008

City Rock Island	State IL	Zip Code 61204-7008
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00264689

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2025

**Transaction ID : 22933537**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 44
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Prairie Political Action Committee**

**A. Int'l Assoc. of Bridge, Structural, Ornamental & Iron Workers PAC (IPAL)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1750 New York Ave NW  
Ste 400

City Washington State DC Zip Code 20006-5315

FEC ID number of contributing federal political committee. **C** C00027359

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 18 / 2025

**Transaction ID : 23036313**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. Lockheed Martin Employees PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2121 Crystal Dr  
Ste 100

City Arlington State VA Zip Code 22202-3706

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 17 / 2025

**Transaction ID : 23457240**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C. McGuireWoods Federal PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 800 E Canal St

City Richmond State VA Zip Code 23219-3956

FEC ID number of contributing federal political committee. **C** C00225342

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 25 / 2025

**Transaction ID : 23097014**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 44
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Prairie Political Action Committee**

**A. Midwest Region Laborers' Political League**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 N Old State Capitol Plz  
Ste 525

City Springfield State IL Zip Code 62701-1375

FEC ID number of contributing federal political committee. **C** C00342907

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 09 / 2025  
**Transaction ID : 23001167**

Amount of Each Receipt this Period 2500.00

Memo Item

**B.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

**C.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	41000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 44
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Prairie Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. ILLINOIS VICTORY FUND</b>		Date of Receipt
Mailing Address 600 Pennsylvania Ave SE Unit 15180		<input type="text" value="08"/> / <input type="text" value="18"/> / <input type="text" value="2025"/>
City Washington	State DC	Zip Code 20003-7508
FEC ID number of contributing federal political committee. <b>C</b> C00911578		<b>Transaction ID : 22983899</b>
Name of Employer (for Individual)	Occupation (for Individual)	Amount of Each Receipt this Period <input type="text" value="9000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="9000.00"/>	<input type="checkbox"/> Memo Item
		Joint Fundraising Transfer

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Bartholomew, Joseph, A., ,</b>		Date of Receipt
Mailing Address 23 Public Sq Ste 465		<input type="text" value="08"/> / <input type="text" value="07"/> / <input type="text" value="2025"/>
City Belleville	State IL	Zip Code 62220-1651
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 22983893</b>
Name of Employer (for Individual) Bartholomew Shevlin & Flack LLP	Occupation (for Individual) Attorney	Amount of Each Receipt this Period <input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	<input checked="" type="checkbox"/> Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Callis, Ann, , ,</b>		Date of Receipt
Mailing Address 109 Yorkshire Ct		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2025"/>
City Troy	State IL	Zip Code 62294-2846
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 23002004</b>
Name of Employer (for Individual) Holland Law Firm	Occupation (for Individual) Attorney	Amount of Each Receipt this Period <input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	<input checked="" type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="9000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 44
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Prairie Political Action Committee**

**A. Camille, Pattie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1615 Appalachian Trl  
 City Rochester State IL Zip Code 62563-9289  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 03 / 2025**  
**Transaction ID : 23002014**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Childs, Kenton, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1604 Fiona Pl  
 City Springfield State IL Zip Code 62704-3216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 04 / 2025**  
**Transaction ID : 23002096**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

**C. Childs, Kenton, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1604 Fiona Pl  
 City Springfield State IL Zip Code 62704-3216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 05 / 2025**  
**Transaction ID : 22983910**  
 Amount of Each Receipt this Period 187.50  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 44
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Prairie Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Driscoll, John, , ,</b>		Date of Receipt MM / DD / YYYY 07 / 17 / 2025
Mailing Address 211 N Broadway		<b>Transaction ID : 23002001</b>
City Saint Louis	State MO	Zip Code 63102-2711
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3750.00
Name of Employer (for Individual) The Driscoll Firm LLC	Occupation (for Individual) Attorney	<input checked="" type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3750.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Farney, Kathleen, , ,</b>		Date of Receipt MM / DD / YYYY 08 / 01 / 2025
Mailing Address 55 Golf Rd		<b>Transaction ID : 23002009</b>
City Springfield	State IL	Zip Code 62704-3176
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) State of Illinois	Occupation (for Individual) Research Director	<input checked="" type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. FRIENDS OF CHERI BUSTOS</b>		Date of Receipt MM / DD / YYYY 08 / 05 / 2025
Mailing Address PO Box 65322		<b>Transaction ID : 23002100</b>
City Washington	State DC	Zip Code 20035-5322
FEC ID number of contributing federal political committee. C C00498568		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual)	Occupation (for Individual)	<input checked="" type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 44
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Prairie Political Action Committee**

**A. Johnson, Dennis, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2359 Logan St  
 City Murphysboro State IL Zip Code 62966-1763  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2025  
**Transaction ID : 23002006**  
 Amount of Each Receipt this Period 625.00  
 Memo Item

**B. Layloff, Christopher, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5729 Old Alton Edwardsville Rd  
 City Edwardsville State IL Zip Code 62025-7221  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Gori Law Firm Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 07 / 2025  
**Transaction ID : 22983885**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Marcus, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 106 Lakewood Dr  
 City Glen Carbon State IL Zip Code 62034-2986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Gori Law Firm Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 06 / 2025  
**Transaction ID : 22983882**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 20 OF 44	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Prairie Political Action Committee**

**A. Salvi, Patrick, A., , Sr**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 218 N Martin Luther King Jr Ave  
 City Waukegan State IL Zip Code 60085-4236  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Salvi Schostok & Pritchard Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **07 / 24 / 2025**  
**Transaction ID : 23001997**  
 Amount of Each Receipt this Period 1250.00  
 Memo Item

**B. Sandifer, Greg, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3416 Black Oak Ln  
 City Edwardsville State IL Zip Code 62025-7033  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Gori Law Firm Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 05 / 2025**  
**Transaction ID : 22983911**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Silverman, Natalie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2717 Timber Pointe Dr  
 City Springfield State IL Zip Code 62702-3359  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 26 / 2025**  
**Transaction ID : 23001995**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 44
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Prairie Political Action Committee**

**A. Simmons, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9 E Broadway Apt 300  
 City Alton State IL Zip Code 62002-6277  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Simmons Hanly Conroy Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 08 / 01 / 2025  
**Transaction ID : 23002007**  
 Amount of Each Receipt this Period 1250.00  
 Memo Item

**B. Steinmeyer, Jason, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3170 Forest Lake Ln  
 City Staunton State IL Zip Code 62088-4200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Gori Law Firm Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 05 / 2025  
**Transaction ID : 22983912**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. ILLINOIS VICTORY FUND - Unitemized**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 600 Pennsylvania Ave SE Unit 15180  
 City Washington State DC Zip Code 20003-7508  
 FEC ID number of contributing federal political committee. **C** C00911578  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 08 / 18 / 2025  
**Transaction ID : 22983899J**  
 Amount of Each Receipt this Period 1150.00  
 Memo Item  
 \* Joint Fundraising Transfer

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	9000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Prairie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address PO Box 962017

City  
Boston

State  
MA

Zip Code  
02196-2017

Purpose of Disbursement

Credit Card Processing Fees

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		2	0		2	0	2	5

FEC Identification Number

C [ ]

**Transaction ID : 500598034**

Amount of Each Disbursement this Period

[ ] 3.95

Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address PO Box 962017

City  
Boston

State  
MA

Zip Code  
02196-2017

Purpose of Disbursement

Credit Card Processing Fees

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	8		2	4		2	0	2	5

FEC Identification Number

C [ ]

**Transaction ID : 500602323**

Amount of Each Disbursement this Period

[ ] 3.95

Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address PO Box 962017

City  
Boston

State  
MA

Zip Code  
02196-2017

Purpose of Disbursement

Credit Card Processing Fees

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	9		2	1		2	0	2	5

FEC Identification Number

C [ ]

**Transaction ID : 500605699**

Amount of Each Disbursement this Period

[ ] 3.95

Memo Item

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

[ ] 11.85

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

[ ]





# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Prairie Political Action Committee**

Full Name (Last, First, Middle Initial)

### A. Amalgamated Bank

Mailing Address 1825 K St NW  
Frnt 1

City  
Washington

State  
DC

Zip Code  
20006-1245

Purpose of Disbursement

Bank Fee

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	9		2	6		2	0	2	5

FEC Identification Number

C [REDACTED]

**Transaction ID : 500608886**

Amount of Each Disbursement this Period

[REDACTED] 30.25

Memo Item

Full Name (Last, First, Middle Initial)

### B. Amalgamated Bank

Mailing Address 1825 K St NW  
Frnt 1

City  
Washington

State  
DC

Zip Code  
20006-1245

Purpose of Disbursement

Bank Fee

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
1	0		2	9		2	0	2	5

FEC Identification Number

C [REDACTED]

**Transaction ID : 500611707**

Amount of Each Disbursement this Period

[REDACTED] 30.25

Memo Item

Full Name (Last, First, Middle Initial)

### C. Amalgamated Bank

Mailing Address 1825 K St NW  
Frnt 1

City  
Washington

State  
DC

Zip Code  
20006-1245

Purpose of Disbursement

Bank Fee

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
1	1		2	8		2	0	2	5

FEC Identification Number

C [REDACTED]

**Transaction ID : 500614695**

Amount of Each Disbursement this Period

[REDACTED] 30.25

Memo Item

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

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

[REDACTED] 90.75

[REDACTED]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Prairie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Amalgamated Bank**

Mailing Address 1825 K St NW  
Fmnt 1

City  
Washington

State  
DC

Zip Code  
20006-1245

Purpose of Disbursement

Bank Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				30				2025					

FEC Identification Number

C [ ]

**Transaction ID : 500616980**

Amount of Each Disbursement this Period

[ ] 46.25

Memo Item

Full Name (Last, First, Middle Initial)

**B. Bank of Springfield**

Mailing Address PO Box 2711

City  
Omaha

State  
NE

Zip Code  
68103-2711

Purpose of Disbursement

Credit Card Payment - Detail Below if Itemized

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	5			2	0	2	5		
07				25				2025					

FEC Identification Number

C [ ]

**Transaction ID : 500598035**

Amount of Each Disbursement this Period

[ ] 24398.08

Memo Item

Full Name (Last, First, Middle Initial)

**C. Chicago Cut Steakhouse**

Mailing Address 300 N La Salle Dr

City  
Chicago

State  
IL

Zip Code  
60654-3406

Purpose of Disbursement

Catering

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	5			2	0	2	5		
07				25				2025					

FEC Identification Number

C [ ]

**Transaction ID : 500598039**

Amount of Each Disbursement this Period

[ ] 13597.64

Memo Item

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

[ ] 24444.33

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

[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Prairie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Garrett Brands LLC**

Mailing Address 27 W Jackson Blvd

City  
Chicago

State  
IL

Zip Code  
60604-3804

Purpose of Disbursement

Catering

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
0	7		2	5		2	0	2	5

FEC Identification Number

C [REDACTED]

**Transaction ID : 500598041**

Amount of Each Disbursement this Period

[REDACTED] 617.04

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. London House Chicago**

Mailing Address 85 E Wacker Dr

City  
Chicago

State  
IL

Zip Code  
60601-3703

Purpose of Disbursement

Travel

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
0	7		2	5		2	0	2	5

FEC Identification Number

C [REDACTED]

**Transaction ID : 500598036**

Amount of Each Disbursement this Period

[REDACTED] 5292.70

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. The Gage Restaurant**

Mailing Address 24 S Michigan Ave

City  
Chicago

State  
IL

Zip Code  
60603-3301

Purpose of Disbursement

Catering

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
0	7		2	5		2	0	2	5

FEC Identification Number

C [REDACTED]

**Transaction ID : 500598038**

Amount of Each Disbursement this Period

[REDACTED] 4720.40

Memo Item \*

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

[REDACTED] 0.00

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

[REDACTED]



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Prairie Political Action Committee**

Full Name (Last, First, Middle Initial)

### A. Southwest Airlines

Mailing Address PO Box 36611

City  
Dallas

State  
TX

Zip Code  
75235-1611

Purpose of Disbursement

Travel

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
0	9		2	6		2	0	2	5

FEC Identification Number

C [REDACTED]

**Transaction ID : 500609961**

Amount of Each Disbursement this Period

[REDACTED] 298.18

Memo Item \*

Full Name (Last, First, Middle Initial)

### B. United Airlines

Mailing Address 77 W Wacker Dr

City  
Chicago

State  
IL

Zip Code  
60601-1604

Purpose of Disbursement

Travel

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
0	9		2	6		2	0	2	5

FEC Identification Number

C [REDACTED]

**Transaction ID : 500609958**

Amount of Each Disbursement this Period

[REDACTED] 25.00

Memo Item \*

Full Name (Last, First, Middle Initial)

### C. United Airlines

Mailing Address 77 W Wacker Dr

City  
Chicago

State  
IL

Zip Code  
60601-1604

Purpose of Disbursement

Travel

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
0	9		2	6		2	0	2	5

FEC Identification Number

C [REDACTED]

**Transaction ID : 500609959**

Amount of Each Disbursement this Period

[REDACTED] 348.49

Memo Item \*

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

[REDACTED] 0.00

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

[REDACTED]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Prairie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Bank of Springfield**

Mailing Address PO Box 2711

City  
Omaha

State  
NE

Zip Code  
68103-2711

Purpose of Disbursement

Credit Card Payment - Detail Below if Itemized

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 M	/	D D D	/	Y Y Y Y Y
12		29		2025

FEC Identification Number

C [REDACTED]

**Transaction ID : 500622050**

Amount of Each Disbursement this Period

[REDACTED] 1810.18

Memo Item

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 4255 Amon Carter Blvd

City  
Fort Worth

State  
TX

Zip Code  
76155-2603

Purpose of Disbursement

Travel

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 M	/	D D D	/	Y Y Y Y Y
12		29		2025

FEC Identification Number

C [REDACTED]

**Transaction ID : 500622053**

Amount of Each Disbursement this Period

[REDACTED] 505.48

Memo Item

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address 4255 Amon Carter Blvd

City  
Fort Worth

State  
TX

Zip Code  
76155-2603

Purpose of Disbursement

Travel Refund

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 M	/	D D D	/	Y Y Y Y Y
12		29		2025

FEC Identification Number

C [REDACTED]

**Transaction ID : 500622060**

Amount of Each Disbursement this Period

[REDACTED] - 1591.84

Memo Item

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

[REDACTED] 1810.18

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

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Prairie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Lucille Verde**

Mailing Address 712 H St NE  
Pmb 24

City  
Washington

State  
DC

Zip Code  
20002-3627

Purpose of Disbursement

Catering

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
12			29			2025			

FEC Identification Number

C [ ]

**Transaction ID : 500622051**

Amount of Each Disbursement this Period

[ ] 242.55

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Lucille Verde**

Mailing Address 712 H St NE  
Pmb 24

City  
Washington

State  
DC

Zip Code  
20002-3627

Purpose of Disbursement

Catering

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
12			29			2025			

FEC Identification Number

C [ ]

**Transaction ID : 500622052**

Amount of Each Disbursement this Period

[ ] 242.55

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Lucille Verde**

Mailing Address 712 H St NE  
Pmb 24

City  
Washington

State  
DC

Zip Code  
20002-3627

Purpose of Disbursement

Catering

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
12			29			2025			

FEC Identification Number

C [ ]

**Transaction ID : 500622058**

Amount of Each Disbursement this Period

[ ] 2246.33

Memo Item \*

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

[ ] 0.00

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

[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Prairie Political Action Committee**

Full Name (Last, First, Middle Initial)

### A. Southwest Airlines

Mailing Address PO Box 36611

City  
Dallas

State  
TX

Zip Code  
75235-1611

Purpose of Disbursement

Travel

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			29			2025			

FEC Identification Number

C [REDACTED]

**Transaction ID : 500622054**

Amount of Each Disbursement this Period

[REDACTED] 523.48

Memo Item \*

Full Name (Last, First, Middle Initial)

### B. Southwest Airlines

Mailing Address PO Box 36611

City  
Dallas

State  
TX

Zip Code  
75235-1611

Purpose of Disbursement

Travel

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			29			2025			

FEC Identification Number

C [REDACTED]

**Transaction ID : 500622055**

Amount of Each Disbursement this Period

[REDACTED] 288.30

Memo Item \*

Full Name (Last, First, Middle Initial)

### C. Southwest Airlines

Mailing Address PO Box 36611

City  
Dallas

State  
TX

Zip Code  
75235-1611

Purpose of Disbursement

Travel

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			29			2025			

FEC Identification Number

C [REDACTED]

**Transaction ID : 500622057**

Amount of Each Disbursement this Period

[REDACTED] 523.48

Memo Item \*

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

[REDACTED] 0.00

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

[REDACTED]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Prairie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Southwest Airlines**

Mailing Address PO Box 36611

City  
Dallas

State  
TX

Zip Code  
75235-1611

Purpose of Disbursement

Travel Refund

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
12			29			2025			

FEC Identification Number

C [REDACTED]

**Transaction ID : 500622061**

Amount of Each Disbursement this Period

[REDACTED] - 821.66

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address 77 W Wacker Dr

City  
Chicago

State  
IL

Zip Code  
60601-1604

Purpose of Disbursement

Travel Refund

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
12			29			2025			

FEC Identification Number

C [REDACTED]

**Transaction ID : 500622059**

Amount of Each Disbursement this Period

[REDACTED] - 348.49

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Capitol Compliance Associates, Inc.**

Mailing Address 600 Pennsylvania Ave SE  
Unit 15180

City  
Washington

State  
DC

Zip Code  
20003-7508

Purpose of Disbursement

Compliance Services

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
07			01			2025			

FEC Identification Number

C [REDACTED]

**Transaction ID : 500598127**

Amount of Each Disbursement this Period

[REDACTED] 2000.00

Memo Item

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

[REDACTED] 2000.00

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

[REDACTED]



SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Prairie Political Action Committee

Form A: Capitol Compliance Associates, Inc. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form B: Intuit. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form C: Intuit. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

SUBTOTAL of Disbursements This Page (optional) 2137.80
TOTAL This Period (last page this line number only)



SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
Prairie Political Action Committee

Form A: Intuit. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form B: Lafave, Lori, , , . Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form C: Lafave, Lori, , , . Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

SUBTOTAL of Disbursements This Page (optional) and TOTAL This Period (last page this line number only) summary rows.

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Prairie Political Action Committee**

A. <b>Lafave, Lori, , ,</b>		Date of Disbursement MM / DD / YYYY 09 / 11 / 2025	
Mailing Address 200 E Jefferson St		FEC Identification Number C [ ] <b>Transaction ID : 500605707</b> Amount of Each Disbursement this Period 6000.00	
City Falls Church	State VA	Zip Code 22046-3531	Category/Type [ ]
Purpose of Disbursement Fundraising Consulting Services		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

B. <b>Lafave, Lori, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 06 / 2025	
Mailing Address 200 E Jefferson St		FEC Identification Number C [ ] <b>Transaction ID : 500611705</b> Amount of Each Disbursement this Period 6000.00	
City Falls Church	State VA	Zip Code 22046-3531	Category/Type [ ]
Purpose of Disbursement Fundraising Consulting Services		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

C. <b>Lafave, Lori, , ,</b>		Date of Disbursement MM / DD / YYYY 11 / 13 / 2025	
Mailing Address 200 E Jefferson St		FEC Identification Number C [ ] <b>Transaction ID : 500613117</b> Amount of Each Disbursement this Period 6000.00	
City Falls Church	State VA	Zip Code 22046-3531	Category/Type [ ]
Purpose of Disbursement Fundraising Consulting Services		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	18000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Prairie Political Action Committee**

**A. Lafave, Lori, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 200 E Jefferson St

City Falls Church State VA Zip Code 22046-3531

Purpose of Disbursement Fundraising Consulting Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 02 / 2025

FEC Identification Number: C

Transaction ID : 500613472

Amount of Each Disbursement this Period: 6000.00

Memo Item

**B. O'Beirne, Max, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1140 3rd St NE

City Washington State DC Zip Code 20002-6274

Purpose of Disbursement Reimbursement- Catering, Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 09 / 2025

FEC Identification Number: C

Transaction ID : 500598783

Amount of Each Disbursement this Period: 1546.26

Memo Item

**C. London House Chicago**

Full Name (Last, First, Middle Initial)

Mailing Address 85 E Wacker Dr

City Chicago State IL Zip Code 60601-3703

Purpose of Disbursement Fundraising Event Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 09 / 2025

FEC Identification Number: C

Transaction ID : 500598779

Amount of Each Disbursement this Period: 304.12

Memo Item \*

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 7546.26

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





**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Prairie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. COOPER FOR NORTH CAROLINA**

Mailing Address 301 Hillsborough St  
Ste 950

City  
Raleigh

State  
NC

Zip Code  
27603-4273

Purpose of Disbursement

Contribution

Candidate Name

COOPER, ROY, . . .

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2026

 Primary  General  
 Other (specify) ▼

State: NC

District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	5

FEC Identification Number

**C** C00913566

**Transaction ID : 500598784**

Amount of Each Disbursement this Period

5000.00

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)..... ▶

5000.00

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

5000.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Prairie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Friends of Carbonargi**

Mailing Address PO Box 408213

City  
Chicago

State  
IL

Zip Code  
60640-0005

Purpose of Disbursement  
Non-Federal Contribution

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	Y	Y
0	8		1	9		2	0	2	5		

FEC Identification Number

C [ ]

**Transaction ID : 500602943**

Amount of Each Disbursement this Period

[ ] 5000.00 [ ]

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	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	Y	Y

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ] [ ]

Memo Item

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

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

[ ] 5000.00 [ ]

[ ] 5000.00 [ ]

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 44 OF 44
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Prairie Political Action Committee**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Capitol Compliance Associates, Inc.</b>			Nature of Debt (Purpose): Compliance Services
Mailing Address 600 Pennsylvania Ave SE Unit 15180			
City Washington	State DC	Zip Code 20003-7508	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		<b>Transaction ID : 1250001727</b>	
Amount Incurred This Period <input type="text" value="2000.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2000.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>			
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>			
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="2000.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="2000.00"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="2000.00"/>