

# 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.

<b>1. NAME OF COMMITTEE IN FULL</b> DON TRACY FOR ILLINOIS, NFP			
<b>ADDRESS</b> (number and street) PO BOX 135			
<b>CITY</b> SPRINGFIELD	<b>STATE</b> IL	<b>ZIP CODE</b> 62705	
<b>2. NAME OF CANDIDATE</b> Tracy, Don, , ,		<b>3. OFFICE SOUGHT</b> (State and District) Senate IL 00	
		<b>4. FEC IDENTIFICATION NUMBER</b> C00917120	
<b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
<b>A. FULL NAME</b> Hurley, Mark, , ,			
<b>MAILING ADDRESS</b> 9 Williamsburg Rd		<b>Name of Employer</b> Retired	
<b>CITY</b> Sherman	<b>STATE</b> IL	<b>ZIP CODE</b> 62684	<b>Date (month, day, year)</b> 03/11/2026
		<b>Amount</b> 1000.00	
		<b>Transaction ID : WFT202621397-1</b>	
<b>B. FULL NAME</b> Hanson Professional Services Inc PAC			
<b>MAILING ADDRESS</b> 1525 S 6th St		<b>Name of Employer</b> Retired	
<b>CITY</b> Springfield	<b>STATE</b> IL	<b>ZIP CODE</b> 62703	<b>Date (month, day, year)</b> 03/11/2026
		<b>Amount</b> 1000.00	
		<b>Transaction ID : WFT202621398-1</b>	
<b>C. FULL NAME</b> Tracy, Ted, , ,			
<b>MAILING ADDRESS</b> 6201 North Hampton LN		<b>Name of Employer</b> Retired	
<b>CITY</b> Springfield	<b>STATE</b> IL	<b>ZIP CODE</b> 62711	<b>Date (month, day, year)</b> 03/11/2026
		<b>Amount</b> 1000.00	
		<b>Transaction ID : WFT202621399-1</b>	
<b>D. FULL NAME</b> Deering, Regan, , ,			
<b>MAILING ADDRESS</b> PO Box 922		<b>Name of Employer</b> State of IL	
<b>CITY</b> Decatur	<b>STATE</b> IL	<b>ZIP CODE</b> 62525	<b>Date (month, day, year)</b> 03/11/2026
		<b>Amount</b> 1000.00	
		<b>Transaction ID : WFT2026213910-1</b>	
<b>E. FULL NAME</b> Bunn, Robert, , ,			
<b>MAILING ADDRESS</b> 1615 S. Wiggins Ave		<b>Name of Employer</b> BUNN Corperation	
<b>CITY</b> Springfield	<b>STATE</b> IL	<b>ZIP CODE</b> 62704	<b>Date (month, day, year)</b> 03/11/2026
		<b>Amount</b> 2500.00	
		<b>Transaction ID : WFT2026213911-1</b>	
<b>SIGNATURE (optional)</b> Lekas, Constantine, , ,			<b>DATE</b> 03/13/2026
			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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<b>ADDRESS</b> (number and street) PO BOX 135			
<b>CITY, STATE, and ZIP CODE</b> SPRINGFIELD		IL 62705	
<b>2. NAME OF CANDIDATE</b> Tracy, Don, , ,	<b>3. OFFICE SOUGHT</b> (State and District) Senate IL 00	<b>4. FEC IDENTIFICATION NUMBER</b> C00917120	

**5. IS THIS AN AMENDMENT?**
 NO, THIS IS A NEW FILING
  YES, IT AMENDS THE NOTICE FILED ON \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
Podlasek, Robert, , ,  2512 Churchill  Springfield IL 62702	Retired  Occupation Retired	03/11/2026	1500.00
<b>Transaction ID : WFT2026213912-1</b>			
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		