

FEC  
FORM 3XREPORT 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

WALBERG VICTORY FUND

ADDRESS (number and street)

PO BOX 1362

▼  
 Check if different  
than previously  
reported. (ACC)

JACKSON

MI

49204

-

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

 C C005779733. IS THIS  
REPORTNEW  
(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

 M M /  D D /  Y Y Y Yin the  
State of(d) 30-Day  
POST-Election  
Report for the: General (30G) Runoff (30R) Special (30S)

Election on

 M M /  D D /  Y Y Y Y Yin the  
State of

5. Covering Period

 07 01 2025

through

 12 31 2025

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

Carlin, Robert, F.,

Signature of Treasurer

Carlin, Robert, F.,

Date

 01 30 2026

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

Office  
Use  
OnlyFEC FORM 3X  
Rev. 05/2016

**SUMMARY PAGE**  
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

WALBERG VICTORY FUND

Report Covering the Period: From:

M M  
07D D  
01Y Y Y Y Y  
2025

To:

M M  
12D D  
31Y Y Y Y Y  
2025**COLUMN A**  
This Period**COLUMN B**  
Calendar Year-to-Date

6. (a) Cash on Hand January 1,	Y Y Y Y Y 2025	9128.45
(b) Cash on Hand at Beginning of Reporting Period.....	10000.00	
(c) Total Receipts (from Line 19) .....	115800.00	226800.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	125800.00	235928.45
7. Total Disbursements (from Line 31).....	120800.00	230928.45
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	5000.00	5000.00
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



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

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

WALBERG VICTORY FUND

Report Covering the Period: From:

M M  
07D D  
01Y Y Y Y Y  
2025

To:

M M  
12D D  
31Y Y Y Y  
2025

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	115800.00	226800.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....►	115800.00	226800.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	115800.00	226800.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
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	0.00
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	0.00
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)) .....	115800.00	226800.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	115800.00	226800.00

## DETAILED SUMMARY PAGE

of Disbursements

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Page 4

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)	0.00	0.00
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	23965.38	28245.95
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	23965.38	28245.95
22. Transfers to Affiliated/Other Party Committees.....	95834.62	201682.50
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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 .....	1000.00	1000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	1000.00	1000.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
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))..	120800.00	230928.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	120800.00	230928.45

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A</b> Total This Period	<b>COLUMN B</b> Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	115800.00	226800.00
34. Total Contribution Refunds (from Line 28(d)) .....	1000.00	1000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	114800.00	225800.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	23965.38	28245.95
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	23965.38	28245.95

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
13	14	15	16
		17	

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)  
WALBERG VICTORY FUND

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

A. 206 Days Avenue Holdings LLC

Mailing Address 303 N 3rd St

City Niles	State MI	Zip Code 49120
---------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

C

Date of Receipt

M M 11	/	D D 05	/	Y Y Y Y Y 2025
-----------	---	-----------	---	-------------------

Transaction ID : SA11AI.4355

Amount of Each Receipt this Period

500.00

 Memo Item

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

Receipt For: Aggregate Year-to-Date ▼

<input type="checkbox"/> Primary	<input type="checkbox"/> General
Other (specify) ▼	

500.00

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

B. Swem, Patrick, , ,

Mailing Address 303 N 3rd St

City Niles	State MI	Zip Code 49120
---------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

C

Date of Receipt

M M 11	/	D D 05	/	Y Y Y Y Y 2025
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Transaction ID : SA11AI.4355.0

Amount of Each Receipt this Period

500.00

 Memo Item

Partner Attribution

Name of Employer (for Individual) Occupation (for Individual)  
206 Days Avenue Holdings LLC Owner

Receipt For: Aggregate Year-to-Date ▼

<input type="checkbox"/> Primary	<input type="checkbox"/> General
Other (specify) ▼	

500.00

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

C. Baker, Scott, W., ,

Mailing Address 8718 S 76th E Ave

City Tulsa	State OK	Zip Code 74133
---------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

C

Date of Receipt

M M 11	/	D D 05	/	Y Y Y Y Y 2025
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Transaction ID : SA11AI.4349

Amount of Each Receipt this Period

1000.00

 Memo ItemName of Employer (for Individual) Occupation (for Individual)  
Farmers Insurance in Oklahoma Owner/Agent

Receipt For: Aggregate Year-to-Date ▼

<input type="checkbox"/> Primary	<input type="checkbox"/> General
Other (specify)	

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

1500.00

TOTAL 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 7 OF 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
13	14	15	16
		17	

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NAME OF COMMITTEE (In Full)  
WALBERG VICTORY FUND

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

A. Brawley, James, , ,

Mailing Address 2587 Lake Shore Dr

City Niles	State MI	Zip Code 49120
---------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

C

Date of Receipt

M = M 10	/	D = D 22	/	Y = Y 2025
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Transaction ID : SA11AI.4342

Amount of Each Receipt this Period

500.00

Memo Item

Name of Employer (for Individual)

Lumber Services

Occupation (for Individual)

Mill Manager

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
Other (specify) ▼	

Aggregate Year-to-Date ▼

500.00

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

B. Burdette, Scott, , ,

Mailing Address 1080 Hyde Park

City Crown Point	State IN	Zip Code 46307
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FEC ID number of contributing  
federal political committee.

C

Date of Receipt

M = M 12	/	D = D 01	/	Y = Y 2025
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Transaction ID : SA11AI.4365

Amount of Each Receipt this Period

1000.00

Memo Item

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
Other (specify) ▼	

Aggregate Year-to-Date ▼

1000.00

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

C. Combs, Ira, , , Jr.

Mailing Address 4580 Eagle Dr.

City Jackson	State MI	Zip Code 49201
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FEC ID number of contributing  
federal political committee.

C

Date of Receipt

M = M 09	/	D = D 22	/	Y = Y 2025
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Transaction ID : SA11AI.4341

Amount of Each Receipt this Period

1000.00

Memo Item

Name of Employer (for Individual)

Greater Bible Way Temple

Occupation (for Individual)

Pastor

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
Other (specify) ▼	

Aggregate Year-to-Date ▼

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

2500.00

TOTAL 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 8 OF 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
13	14	15	16
		17	

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NAME OF COMMITTEE (In Full)  
WALBERG VICTORY FUND

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

A. Conroy, Patricia, , ,

Mailing Address 4755 Bacon School Rd

City St. Joseph	State MI	Zip Code 49085
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FEC ID number of contributing  
federal political committee.

C

Date of Receipt

M M 11	/ D D 05	/ Y Y Y Y 2025
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Transaction ID : SA11AI.4353

Amount of Each Receipt this Period

3500.00

 Memo Item

Name of Employer (for Individual)

CASA of Southwest Michigan

Occupation (for Individual)

Interim Director

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
Other (specify) ▼	

Aggregate Year-to-Date ▼

3500.00

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

B. Conroy, William, , ,

Mailing Address 4755 Bacon School Rd

City St. Joseph	State MI	Zip Code 49085
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FEC ID number of contributing  
federal political committee.

C

Date of Receipt

M M 11	/ D D 05	/ Y Y Y Y 2025
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Transaction ID : SA11AI.4351

Amount of Each Receipt this Period

3500.00

 Memo Item

Name of Employer (for Individual)

Fieldview Capital Management

Occupation (for Individual)

Head of Software Engineering

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
Other (specify) ▼	

Aggregate Year-to-Date ▼

3500.00

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

C. Gaynier, Michael, G., ,

Mailing Address 433 Saint Mary's Ave

City Monroe	State MI	Zip Code 48162
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FEC ID number of contributing  
federal political committee.

C

Date of Receipt

M M 08	/ D D 28	/ Y Y Y Y 2025
-----------	-------------	-------------------

Transaction ID : SA11AI.4338

Amount of Each Receipt this Period

2000.00

 Memo Item

Name of Employer (for Individual)

Spartan Insurance Agency

Occupation (for Individual)

Agent

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
Other (specify) ▼	

Aggregate Year-to-Date ▼

2000.00

SUBTOTAL of Receipts This Page (optional)..... ►

9000.00

TOTAL 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 9 OF 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
13	14	15	16
		17	

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NAME OF COMMITTEE (In Full)  
WALBERG VICTORY FUND

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

A. Gurdjian, Rick, , ,

Mailing Address 311 N Winter St

City Adrian	State MI	Zip Code 49221
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FEC ID number of contributing  
federal political committee.

C

Date of Receipt

M = M 12	/	D = D 03	/	Y = Y 2025
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Transaction ID : SA11AI.4367

Amount of Each Receipt this Period

1000.00

Memo Item

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Insurance Agent

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
Other (specify) ▼	

Aggregate Year-to-Date ▼

1000.00

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

B. Haworth, Matthew, R., ,

Mailing Address 4364 Sailview Dr

City Holland	State MI	Zip Code 49423
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FEC ID number of contributing  
federal political committee.

C

Date of Receipt

M = M 08	/	D = D 14	/	Y = Y 2025
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Transaction ID : SA11AI.4330

Amount of Each Receipt this Period

25000.00

Memo Item

Name of Employer (for Individual)

Haworth, Inc.

Occupation (for Individual)

Chairman

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
Other (specify) ▼	

Aggregate Year-to-Date ▼

25000.00

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

C. Haworth, Richard, G., ,

Mailing Address 864 Newnham St

City Saugatuck	State MI	Zip Code 49453
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FEC ID number of contributing  
federal political committee.

C

Date of Receipt

M = M 08	/	D = D 14	/	Y = Y 2025
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Transaction ID : SA11AI.4331

Amount of Each Receipt this Period

25000.00

Memo Item

Name of Employer (for Individual)

Haworth Inc

Occupation (for Individual)

Chairman Emeritus

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
Other (specify) ▼	

Aggregate Year-to-Date ▼

25000.00

SUBTOTAL of Receipts This Page (optional)..... ►

51000.00

TOTAL 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 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
13	14	15	16
		17	

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NAME OF COMMITTEE (In Full)

WALBERG VICTORY FUND

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

A. Hoffman, Robert, L., ,

Mailing Address 3886 W Higgins Lake Dr

City  
RoscommonState  
MIZip Code  
48653FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
Other (specify) ▼	

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M 08	/	D D 19	/	Y Y Y Y Y 2025
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Transaction ID : SA11AI.4333

Amount of Each Receipt this Period

2000.00

 Memo Item

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

B. Hsieh, Jesse, , Dr., ,

Mailing Address 50665 Ravenna Court

City  
South BendState  
INZip Code  
46628FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Michiana VIP MD

Occupation (for Individual)

Concierge Physician

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
Other (specify) ▼	

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M 10	/	D D 31	/	Y Y Y Y Y 2025
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Transaction ID : SA11AI.4347

Amount of Each Receipt this Period

3500.00

 Memo Item

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

C. Janowski, Braden, , ,

Mailing Address 1997 Morris Dr

City  
NilesState  
MIZip Code  
49120FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Fieldview Capital Management

Occupation (for Individual)

Financial Manager

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
Other (specify) ▼	

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M 11	/	D D 24	/	Y Y Y Y Y 2025
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Transaction ID : SA11AI.4361

Amount of Each Receipt this Period

20000.00

 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

25500.00

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

25500.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 OF 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
13	14	15	16
		17	

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NAME OF COMMITTEE (In Full)

WALBERG VICTORY FUND

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

A. Kenyon, Diane, M., ,

Mailing Address 4530 Grand Blvd.

City Clarklake	State MI	Zip Code 49234
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FEC ID number of contributing  
federal political committee.

C

Date of Receipt

M = M 08	/	D = D 25	/	Y = Y 2025
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Transaction ID : SA11AI.4337

Amount of Each Receipt this Period

1000.00

 Memo Item

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
Other (specify) ▼	

Aggregate Year-to-Date ▼

1000.00

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

B. Kenyon, Paul, S., ,

Mailing Address 4530 Grand Blvd.

City Clarklake	State MI	Zip Code 49234
-------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

C

Date of Receipt

M = M 08	/	D = D 25	/	Y = Y 2025
-------------	---	-------------	---	---------------

Transaction ID : SA11AI.4336

Amount of Each Receipt this Period

1000.00

 Memo Item

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
Other (specify) ▼	

Aggregate Year-to-Date ▼

1000.00

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

C. Klingaman, Eugene, D., ,

Mailing Address 5770 W 700 N

City Larwill	State IN	Zip Code 46764
-----------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

C

Date of Receipt

M = M 11	/	D = D 05	/	Y = Y 2025
-------------	---	-------------	---	---------------

Transaction ID : SA11AI.4357

Amount of Each Receipt this Period

4000.00

 Memo Item

Name of Employer (for Individual)

Schrader Real Estate &amp; Auction Co., In

Occupation (for Individual)

Auctioneer

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
Other (specify)	

Aggregate Year-to-Date ▼

4000.00

SUBTOTAL of Receipts This Page (optional)..... ►

6000.00

TOTAL 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 12 OF 22

(check only one)

11a  11b  11c  12  
13      14      15      16      17

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NAME OF COMMITTEE (In Full)  
WALBERG VICTORY FUND

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

A. Levy, Edward, C., ,

Mailing Address 970 Shirley Road

City Birmingham	State MI	Zip Code 48009
--------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

C

Date of Receipt

M M 08 / D D 22 / Y Y Y Y Y 2025

Transaction ID : SA11AI.4334

Amount of Each Receipt this Period

7000.00

Memo Item

Name of Employer (for Individual) Edward C. Levy	Occupation (for Individual) Chairman
---	---

Receipt For:

Primary  General  
Other (specify) ▼

Aggregate Year-to-Date ▼

7000.00

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

B. Phillips, Hudson, C., ,

Mailing Address 312 W 15th St  
Apt 20

City New York	State NY	Zip Code 10011
------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

C

Date of Receipt

M M 09 / D D 17 / Y Y Y Y Y 2025

Transaction ID : SA11AI.4340

Amount of Each Receipt this Period

1000.00

Memo Item

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

Receipt For:

Primary  General  
Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

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

C. Quinn, Paul, , ,

Mailing Address 3282 Timberidge Trail

City Saugatuck	State MI	Zip Code 49453
-------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

C

Date of Receipt

M M 10 / D D 22 / Y Y Y Y Y 2025

Transaction ID : SA11AI.4343

Amount of Each Receipt this Period

1000.00

Memo Item

Name of Employer (for Individual) JP Morgan Chase	Occupation (for Individual) Executive Director
--	---

Receipt For:

Primary  General  
Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

9000.00

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

9000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 OF 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
13	14	15	16
		17	

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NAME OF COMMITTEE (In Full)  
WALBERG VICTORY FUND

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

A. Rumfelt, Rustin, A., ,

Mailing Address 11078 N 450 E

City Syracuse	State IN	Zip Code 46567
------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

C

Date of Receipt

M = M 12	/	D = D 01	/	Y = Y 2025
-------------	---	-------------	---	---------------

Transaction ID : SA11AI.4363

Amount of Each Receipt this Period

2000.00

 Memo Item

Name of Employer (for Individual) Beyond Landscaping	Occupation (for Individual) Owner
---	--------------------------------------

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
Other (specify) ▼	

Aggregate Year-to-Date ▼

2000.00

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

B. Teel, Charles, W., , Jr.

Mailing Address 875 N. Michigan Ave  
Ste 3100

City Chicago	State IL	Zip Code 60611
-----------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

C

Date of Receipt

M = M 10	/	D = D 31	/	Y = Y 2025
-------------	---	-------------	---	---------------

Transaction ID : SA11AI.4345

Amount of Each Receipt this Period

3500.00

 Memo Item

Name of Employer (for Individual) Teel & Company	Occupation (for Individual) Accountant
---	---

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
Other (specify) ▼	

Aggregate Year-to-Date ▼

3500.00

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

C. Vanek, James, , ,

Mailing Address 24949 S Truder Dr

City Elwood	State IL	Zip Code 60421
----------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

C

Date of Receipt

M = M 11	/	D = D 10	/	Y = Y 2025
-------------	---	-------------	---	---------------

Transaction ID : SA11AI.4359

Amount of Each Receipt this Period

1000.00

 Memo Item

Name of Employer (for Individual) Laner Muchin	Occupation (for Individual) Attorney
---	---

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
Other (specify) ▼	

Aggregate Year-to-Date ▼

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

6500.00

TOTAL 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 14 OF 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
13	14	15	16
		17	

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NAME OF COMMITTEE (In Full)  
WALBERG VICTORY FUND

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

A. Wachtmann, Lynn, R., ,

Mailing Address 694 Circle View Dr

City Coldwater	State MI	Zip Code 49036
-------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

C

Date of Receipt

M = M 08	/	D = D 22	/	Y = Y 2025
-------------	---	-------------	---	---------------

Transaction ID : SA11AI.4335

Amount of Each Receipt this Period

2500.00

 Memo Item

Name of Employer (for Individual)

Retired

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
Other (specify) ▼	

Aggregate Year-to-Date ▼

2500.00

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

B. Werderitsch, Patricia, A., ,

Mailing Address 6371 Saline Ann Arbor Rd

City Saline	State MI	Zip Code 48176
----------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

C

Date of Receipt

M = M 09	/	D = D 02	/	Y = Y 2025
-------------	---	-------------	---	---------------

Transaction ID : SA11AI.4339

Amount of Each Receipt this Period

2000.00

 Memo Item

Name of Employer (for Individual)

Administrative Controls Mgmt

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
Other (specify) ▼	

Aggregate Year-to-Date ▼

2000.00

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

C. White, Celeste, , ,

Mailing Address 14450 Tomer Rd

City Hudson	State MI	Zip Code 49247
----------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

C

Date of Receipt

M = M 08	/	D = D 19	/	Y = Y 2025
-------------	---	-------------	---	---------------

Transaction ID : SA11AI.4332

Amount of Each Receipt this Period

300.00

 Memo Item

Name of Employer (for Individual)

Aerospace Services &amp; Products

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
Other (specify)	

Aggregate Year-to-Date ▼

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

4800.00

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

115800.00

**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

PAGE 15 OF 22

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NAME OF COMMITTEE (In Full)

WALBERG VICTORY FUND

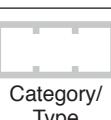
Full Name (Last, First, Middle Initial)

**A. Anedot**Mailing Address 1340 Poydras Street  
#1770City  
New Orleans State  
LA Zip Code  
70112

Purpose of Disbursement

Credit Card Transaction Fee

Candidate Name

Category/  
Type

Date of Disbursement

<input type="checkbox"/> M	<input type="checkbox"/> M	/	<input type="checkbox"/> D	<input type="checkbox"/> D	/	<input type="checkbox"/> Y	<input type="checkbox"/> Y	<input type="checkbox"/> Y	<input type="checkbox"/> Y
09			08			2025			

FEC Identification Number

<input type="checkbox"/> C
----------------------------

Transaction ID : SB21B.4370

Amount of Each Disbursement this Period

80.30
-------

 Memo Item

Full Name (Last, First, Middle Initial)

**B. Anedot**Mailing Address 1340 Poydras Street  
#1770City  
New Orleans State  
LA Zip Code  
70112

Purpose of Disbursement

Credit Card Transaction Fee

Candidate Name

Category/  
Type

Date of Disbursement

<input type="checkbox"/> M	<input type="checkbox"/> M	/	<input type="checkbox"/> D	<input type="checkbox"/> D	/	<input type="checkbox"/> Y	<input type="checkbox"/> Y	<input type="checkbox"/> Y	<input type="checkbox"/> Y
09			17			2025			

FEC Identification Number

<input type="checkbox"/> C
----------------------------

Transaction ID : SB21B.4371

Amount of Each Disbursement this Period

40.30
-------

 Memo Item

Full Name (Last, First, Middle Initial)

**C. Anedot**Mailing Address 1340 Poydras Street  
#1770City  
New Orleans State  
LA Zip Code  
70112

Purpose of Disbursement

Credit Card Transaction Fee

Candidate Name

Category/  
Type

Date of Disbursement

<input type="checkbox"/> M	<input type="checkbox"/> M	/	<input type="checkbox"/> D	<input type="checkbox"/> D	/	<input type="checkbox"/> Y	<input type="checkbox"/> Y	<input type="checkbox"/> Y	<input type="checkbox"/> Y
10			22			2025			

FEC Identification Number

<input type="checkbox"/> C
----------------------------

Transaction ID : SB21B.4372

Amount of Each Disbursement this Period

60.60
-------

 Memo Item

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

181.20

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

,	,	,	,	,	,	,	,	,	,
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**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

PAGE 16 OF 22

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NAME OF COMMITTEE (In Full)

WALBERG VICTORY FUND

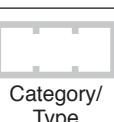
Full Name (Last, First, Middle Initial)

**A. Anedot**Mailing Address 1340 Poydras Street  
#1770City  
New Orleans State  
LA Zip Code  
70112

Purpose of Disbursement

Credit Card Transaction Fee

Candidate Name

Category/  
Type

Date of Disbursement

<input type="checkbox"/> M	<input type="checkbox"/> M	/	<input type="checkbox"/> D	<input type="checkbox"/> D	/	<input type="checkbox"/> Y	<input type="checkbox"/> Y	<input type="checkbox"/> Y	<input type="checkbox"/> Y
10			31			2025			

FEC Identification Number

<input type="checkbox"/> C
----------------------------

Transaction ID : SB21B.4373

Amount of Each Disbursement this Period

280.60
--------

 Memo Item

Office Sought:

Senate  
President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	▼

State:



District:

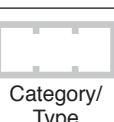
Full Name (Last, First, Middle Initial)

**B. Anedot**Mailing Address 1340 Poydras Street  
#1770City  
New Orleans State  
LA Zip Code  
70112

Purpose of Disbursement

Credit Card Transaction Fee

Candidate Name

Category/  
Type

Date of Disbursement

<input type="checkbox"/> M	<input type="checkbox"/> M	/	<input type="checkbox"/> D	<input type="checkbox"/> D	/	<input type="checkbox"/> Y	<input type="checkbox"/> Y	<input type="checkbox"/> Y	<input type="checkbox"/> Y
12			03			2025			

FEC Identification Number

<input type="checkbox"/> C
----------------------------

Transaction ID : SB21B.4374

Amount of Each Disbursement this Period

40.30
-------

 Memo Item

Full Name (Last, First, Middle Initial)

**C. Concentric Office, LLC**

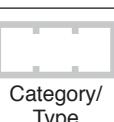
Mailing Address PO Box 2485

City  
Springfield State  
VA Zip Code  
22152

Purpose of Disbursement

Compliance Services

Candidate Name

Category/  
Type

Date of Disbursement

<input type="checkbox"/> M	<input type="checkbox"/> M	/	<input type="checkbox"/> D	<input type="checkbox"/> D	/	<input type="checkbox"/> Y	<input type="checkbox"/> Y	<input type="checkbox"/> Y	<input type="checkbox"/> Y
09			29			2025			

FEC Identification Number

<input type="checkbox"/> C
----------------------------

Transaction ID : SB21B.4368

Amount of Each Disbursement this Period

1500.78
---------

 Memo Item

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

1821.68

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)

21b  22  23  26  27  
 28a  28b  28c  29  30b

PAGE 17 OF 22

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NAME OF COMMITTEE (In Full)

WALBERG VICTORY FUND

Full Name (Last, First, Middle Initial)

**A. Concentric Office, LLC**

Mailing Address PO Box 2485

City Springfield State VA Zip Code 22152

Purpose of Disbursement

Compliance Services

Candidate Name

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  Y  
12 30 2025

FEC Identification Number

C

Transaction ID : SB21B.4375

Amount of Each Disbursement this Period

1534.76

Memo Item

Office Sought:  House  Primary  General

Senate  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Kornegay Consulting**

Mailing Address 211 W. Carolinian Circle

City Nags Head State NC Zip Code 27959

Purpose of Disbursement

Reimb. of Travel Expenses

Candidate Name

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  Y  
11 03 2025

FEC Identification Number

C

Transaction ID : SB21B.4377

Amount of Each Disbursement this Period

1333.54

Memo Item

Office Sought:  House  Primary  General

Senate  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address 1 Skyview Dr

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement

Airfare

Candidate Name

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  Y  
10 28 2025

FEC Identification Number

C

Transaction ID : SB21B.4377.

Amount of Each Disbursement this Period

1134.06

Memo Item

Office Sought:  House  Primary  General

Senate  Other (specify) ▼

State: District:

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

2868.30

**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

PAGE 18 OF 22

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NAME OF COMMITTEE (In Full)

WALBERG VICTORY FUND

Full Name (Last, First, Middle Initial)

**A. Morris Hospitality Group**

Mailing Address 1997 Morris Dr

City Niles State MI Zip Code 49120

Purpose of Disbursement

Catering

Candidate Name

Date of Disbursement

<input type="checkbox"/> M	<input type="checkbox"/> M	/	<input type="checkbox"/> D	<input type="checkbox"/> D	/	<input type="checkbox"/> Y	<input type="checkbox"/> Y	<input type="checkbox"/> Y	<input type="checkbox"/> Y
12			01			2025			

Office Sought: House

Senate  
PresidentDisbursement For:  
 Primary    General  
 Other (specify) ▼
 

FEC Identification Number

<input type="checkbox"/> C
----------------------------

Transaction ID : SB21B.4378

Amount of Each Disbursement this Period

15245.15

 Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**B. Riverrunpress**

Mailing Address 600 Shoppers Lane

City Parchment State MI Zip Code 49004

Purpose of Disbursement

Printing &amp; Shipping

Candidate Name

Date of Disbursement

<input type="checkbox"/> M	<input type="checkbox"/> M	/	<input type="checkbox"/> D	<input type="checkbox"/> D	/	<input type="checkbox"/> Y	<input type="checkbox"/> Y	<input type="checkbox"/> Y	<input type="checkbox"/> Y
09			02			2025			

Office Sought: House

Senate  
PresidentDisbursement For:  
 Primary    General  
 Other (specify) ▼
 

State: District:

FEC Identification Number

<input type="checkbox"/> C
----------------------------

Transaction ID : SB21B.4369

Amount of Each Disbursement this Period

3827.05

 Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Date of Disbursement

<input type="checkbox"/> M	<input type="checkbox"/> M	/	<input type="checkbox"/> D	<input type="checkbox"/> D	/	<input type="checkbox"/> Y	<input type="checkbox"/> Y	<input type="checkbox"/> Y	<input type="checkbox"/> Y

Office Sought: House

Senate  
PresidentDisbursement For:  
 Primary    General  
 Other (specify) ▼
 

State: District:

FEC Identification Number

<input type="checkbox"/> C
----------------------------

Amount of Each Disbursement this Period

19072.20

 Memo Item

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

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)

PAGE 19 OF 22

<input type="checkbox"/> 21b	<input checked="" 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)  
WALBERG VICTORY FUND

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>A. NRCC</b>		<input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y Y Y 09 30 2025	
Mailing Address 320 First Street SE		FEC Identification Number <b>C</b> <input type="checkbox"/>	
City Washington		State DC	Zip Code 20003
Purpose of Disbursement JFC Distribution		Category/ Type	
Candidate Name		Category/ Type	
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:	Amount of Each Disbursement this Period 25832.96	
Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	
<b>B. NRCC</b>		Date of Disbursement	
Mailing Address 320 First Street SE		<input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y Y Y 12 30 2025	
City Washington		State DC	Zip Code 20003
Purpose of Disbursement JFC Distribution		Category/ Type	
Candidate Name		Category/ Type	
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:	Amount of Each Disbursement this Period 4708.10	
Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	
<b>C. Truth Is Markets Work Fund</b>		Date of Disbursement	
Mailing Address PO Box 2485		<input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y Y Y 09 30 2025	
City Springfield		State VA	Zip Code 22152
Purpose of Disbursement JFC Distribution		Category/ Type	
Candidate Name		Category/ Type	
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:	Amount of Each Disbursement this Period 9935.76	
<b>SUBTOTAL of Disbursements This Page (optional)</b> ►		<input type="checkbox"/> Memo Item 40476.82	
<b>TOTAL This Period (last page this line number only)</b> ►		<input type="checkbox"/>	

# 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)

21b  22  23  26  27  
 28a  28b  28c  29  30b

PAGE 20 OF 22

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NAME OF COMMITTEE (In Full)

WALBERG VICTORY FUND

Full Name (Last, First, Middle Initial)

**A. Truth Is Markets Work Fund**

Mailing Address PO Box 2485

City Springfield State VA Zip Code 22152

Purpose of Disbursement

JFC Distribution

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 Y Y  
12 30 2025

FEC Identification Number

C

Transaction ID : SB22.4387

Amount of Each Disbursement this Period

2942.56

Memo Item

Full Name (Last, First, Middle Initial)

**B. WALBERG FOR CONGRESS**

Mailing Address PO BOX 1362

City JACKSON State MI Zip Code 49204

Purpose of Disbursement

JFC Distribution

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For: 2026

Primary  General  
 Other (specify) ▼

State: MI

District: 07

Date of Disbursement

M M /  D D /  Y Y Y Y Y Y  
09 30 2025

FEC Identification Number

C C00390724

Transaction ID : SB22.4381

Amount of Each Disbursement this Period

23129.93

Memo Item

Full Name (Last, First, Middle Initial)

**C. WALBERG FOR CONGRESS**

Mailing Address PO BOX 1362

City JACKSON State MI Zip Code 49204

Purpose of Disbursement

JFC Distribution

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For: 2026

Primary  General  
 Other (specify) ▼

State: MI

District: 07

Date of Disbursement

M M /  D D /  Y Y Y Y Y Y  
09 30 2025

FEC Identification Number

C C00390724

Transaction ID : SB22.4382

Amount of Each Disbursement this Period

10452.92

Memo Item

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

36525.41

**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)

PAGE 21 OF 22

<input type="checkbox"/>	21b	<input checked="" 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)  
WALBERG VICTORY FUND

Full Name (Last, First, Middle Initial)

**A. WALBERG FOR CONGRESS**

Mailing Address PO BOX 1362

City JACKSON	State MI	Zip Code 49204
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Purpose of Disbursement

JFC Distribution

Candidate Name

Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
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State: MI District: 07

Full Name (Last, First, Middle Initial)

**B. WALBERG FOR CONGRESS**

Mailing Address PO BOX 1362

City JACKSON	State MI	Zip Code 49204
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Purpose of Disbursement

JFC Distribution

Candidate Name

Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼
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State: MI District: 07

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
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State: District:

Date of Disbursement

M M 12	/	D D 30	/	Y Y Y Y Y 2025
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FEC Identification Number

C C00390724
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Transaction ID : SB22.4385

Amount of Each Disbursement this Period

16490.41
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Memo Item

Date of Disbursement

M M 12	/	D D 30	/	Y Y Y Y Y 2025
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FEC Identification Number

C C00390724
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Transaction ID : SB22.4386

Amount of Each Disbursement this Period

2341.98
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Memo Item

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
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FEC Identification Number

C
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Amount of Each Disbursement this Period

18832.39
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Memo Item

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

18832.39

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

95834.62

**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 checked="" type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

PAGE 22 OF 22

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NAME OF COMMITTEE (In Full)

WALBERG VICTORY FUND

Full Name (Last, First, Middle Initial)

**A.** Combs, Ira, , , Jr.

Mailing Address 4580 Eagle Dr.

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			02			2025			

City Jackson State MI Zip Code 49201

Purpose of Disbursement

Returned Deposit

Candidate Name

Category/  
Type
 Office Sought:  House  
 Senate  
 President Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

1000.00

FEC Identification Number

C									
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Transaction ID : SB28A.4380

Amount of Each Disbursement this Period

1000.00									
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 Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type
 Office Sought:  House  
 Senate  
 President Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

FEC Identification Number

C									
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Amount of Each Disbursement this Period

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 Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type
 Office Sought:  House  
 Senate  
 President Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

FEC Identification Number

C									
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Amount of Each Disbursement this Period

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 Memo Item

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

1000.00

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

1000.00