

# 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><br>Bill Foster for Congress                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                    |                               |                                                             |                                       |                                                                                                                                                                |  |  |                                     |                                       |                   |                                    |  |  |                                 |  |  |                           |                    |                               |                                 |  |  |
| ADDRESS (number and street) PO Box 9104                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |                               |                                                             |                                       |                                                                                                                                                                |  |  |                                     |                                       |                   |                                    |  |  |                                 |  |  |                           |                    |                               |                                 |  |  |
| <b>CITY</b><br>Aurora                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                    | <b>STATE</b><br>IL            |                                                             | <b>ZIP CODE</b><br>60598              |                                                                                                                                                                |  |  |                                     |                                       |                   |                                    |  |  |                                 |  |  |                           |                    |                               |                                 |  |  |
| <b>2. NAME OF CANDIDATE</b><br>Foster, G., William (Bill), ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                    |                               | <b>3. OFFICE SOUGHT</b> (State and District)<br>House IL 11 |                                       |                                                                                                                                                                |  |  |                                     |                                       |                   |                                    |  |  |                                 |  |  |                           |                    |                               |                                 |  |  |
| <b>4. FEC IDENTIFICATION NUMBER</b><br>C00435099                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                    |                               |                                                             |                                       |                                                                                                                                                                |  |  |                                     |                                       |                   |                                    |  |  |                                 |  |  |                           |                    |                               |                                 |  |  |
| <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 ____ / ____ / ____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                    |                               |                                                             |                                       |                                                                                                                                                                |  |  |                                     |                                       |                   |                                    |  |  |                                 |  |  |                           |                    |                               |                                 |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3"> <b>A. FULL NAME</b><br/>           Coopsmith, Jonathan, , ,         </td> <td>           Name of Employer<br/>           TAMU         </td> <td>           Date (month, day, year)<br/>           06/20/2022         </td> <td>           Amount<br/>           1200.00         </td> </tr> <tr> <td colspan="3">           MAILING ADDRESS<br/>           1808 24th St NW         </td> <td> <b>Transaction ID : 2844526</b> </td> <td></td> <td></td> </tr> <tr> <td> <b>CITY</b><br/>           Washington         </td> <td> <b>STATE</b><br/>           DC         </td> <td> <b>ZIP CODE</b><br/>           20008-4024         </td> <td>           Occupation<br/>           Academic         </td> <td></td> <td></td> </tr> </table>                    |                    |                               |                                                             |                                       | <b>A. FULL NAME</b><br>Coopsmith, Jonathan, , ,                                                                                                                |  |  | Name of Employer<br>TAMU            | Date (month, day, year)<br>06/20/2022 | Amount<br>1200.00 | MAILING ADDRESS<br>1808 24th St NW |  |  | <b>Transaction ID : 2844526</b> |  |  | <b>CITY</b><br>Washington | <b>STATE</b><br>DC | <b>ZIP CODE</b><br>20008-4024 | Occupation<br>Academic          |  |  |
| <b>A. FULL NAME</b><br>Coopsmith, Jonathan, , ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                    |                               | Name of Employer<br>TAMU                                    | Date (month, day, year)<br>06/20/2022 | Amount<br>1200.00                                                                                                                                              |  |  |                                     |                                       |                   |                                    |  |  |                                 |  |  |                           |                    |                               |                                 |  |  |
| MAILING ADDRESS<br>1808 24th St NW                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                    |                               | <b>Transaction ID : 2844526</b>                             |                                       |                                                                                                                                                                |  |  |                                     |                                       |                   |                                    |  |  |                                 |  |  |                           |                    |                               |                                 |  |  |
| <b>CITY</b><br>Washington                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>STATE</b><br>DC | <b>ZIP CODE</b><br>20008-4024 | Occupation<br>Academic                                      |                                       |                                                                                                                                                                |  |  |                                     |                                       |                   |                                    |  |  |                                 |  |  |                           |                    |                               |                                 |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3"> <b>B. FULL NAME</b><br/>           Edelson, Allan, , ,         </td> <td>           Name of Employer<br/>           Walker &amp; Dunlop         </td> <td>           Date (month, day, year)<br/>           06/20/2022         </td> <td>           Amount<br/>           2900.00         </td> </tr> <tr> <td colspan="3">           MAILING ADDRESS<br/>           5247 Hilltop Rd         </td> <td> <b>Transaction ID : 2859259</b> </td> <td></td> <td></td> </tr> <tr> <td> <b>CITY</b><br/>           Long Grove         </td> <td> <b>STATE</b><br/>           IL         </td> <td> <b>ZIP CODE</b><br/>           60047-5199         </td> <td>           Occupation<br/>           Managing Director         </td> <td></td> <td></td> </tr> </table> |                    |                               |                                                             |                                       | <b>B. FULL NAME</b><br>Edelson, Allan, , ,                                                                                                                     |  |  | Name of Employer<br>Walker & Dunlop | Date (month, day, year)<br>06/20/2022 | Amount<br>2900.00 | MAILING ADDRESS<br>5247 Hilltop Rd |  |  | <b>Transaction ID : 2859259</b> |  |  | <b>CITY</b><br>Long Grove | <b>STATE</b><br>IL | <b>ZIP CODE</b><br>60047-5199 | Occupation<br>Managing Director |  |  |
| <b>B. FULL NAME</b><br>Edelson, Allan, , ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                    |                               | Name of Employer<br>Walker & Dunlop                         | Date (month, day, year)<br>06/20/2022 | Amount<br>2900.00                                                                                                                                              |  |  |                                     |                                       |                   |                                    |  |  |                                 |  |  |                           |                    |                               |                                 |  |  |
| MAILING ADDRESS<br>5247 Hilltop Rd                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                    |                               | <b>Transaction ID : 2859259</b>                             |                                       |                                                                                                                                                                |  |  |                                     |                                       |                   |                                    |  |  |                                 |  |  |                           |                    |                               |                                 |  |  |
| <b>CITY</b><br>Long Grove                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>STATE</b><br>IL | <b>ZIP CODE</b><br>60047-5199 | Occupation<br>Managing Director                             |                                       |                                                                                                                                                                |  |  |                                     |                                       |                   |                                    |  |  |                                 |  |  |                           |                    |                               |                                 |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3"> <b>C. FULL NAME</b><br/>           Edelson, Denise, , ,         </td> <td>           Name of Employer<br/>           Not Employed         </td> <td>           Date (month, day, year)<br/>           06/20/2022         </td> <td>           Amount<br/>           1900.00         </td> </tr> <tr> <td colspan="3">           MAILING ADDRESS<br/>           5247 Hilltop Rd         </td> <td> <b>Transaction ID : 2859471</b> </td> <td></td> <td></td> </tr> <tr> <td> <b>CITY</b><br/>           Long Grove         </td> <td> <b>STATE</b><br/>           IL         </td> <td> <b>ZIP CODE</b><br/>           60047-5199         </td> <td>           Occupation<br/>           Not Employed         </td> <td></td> <td></td> </tr> </table>            |                    |                               |                                                             |                                       | <b>C. FULL NAME</b><br>Edelson, Denise, , ,                                                                                                                    |  |  | Name of Employer<br>Not Employed    | Date (month, day, year)<br>06/20/2022 | Amount<br>1900.00 | MAILING ADDRESS<br>5247 Hilltop Rd |  |  | <b>Transaction ID : 2859471</b> |  |  | <b>CITY</b><br>Long Grove | <b>STATE</b><br>IL | <b>ZIP CODE</b><br>60047-5199 | Occupation<br>Not Employed      |  |  |
| <b>C. FULL NAME</b><br>Edelson, Denise, , ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                    |                               | Name of Employer<br>Not Employed                            | Date (month, day, year)<br>06/20/2022 | Amount<br>1900.00                                                                                                                                              |  |  |                                     |                                       |                   |                                    |  |  |                                 |  |  |                           |                    |                               |                                 |  |  |
| MAILING ADDRESS<br>5247 Hilltop Rd                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                    |                               | <b>Transaction ID : 2859471</b>                             |                                       |                                                                                                                                                                |  |  |                                     |                                       |                   |                                    |  |  |                                 |  |  |                           |                    |                               |                                 |  |  |
| <b>CITY</b><br>Long Grove                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>STATE</b><br>IL | <b>ZIP CODE</b><br>60047-5199 | Occupation<br>Not Employed                                  |                                       |                                                                                                                                                                |  |  |                                     |                                       |                   |                                    |  |  |                                 |  |  |                           |                    |                               |                                 |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3"> <b>D. FULL NAME</b> </td> <td>           Name of Employer         </td> <td>           Date (month, day, year)         </td> <td>           Amount         </td> </tr> <tr> <td colspan="3">           MAILING ADDRESS         </td> <td></td> <td></td> <td></td> </tr> <tr> <td> <b>CITY</b> </td> <td> <b>STATE</b> </td> <td> <b>ZIP CODE</b> </td> <td>           Occupation         </td> <td></td> <td></td> </tr> </table>                                                                                                                                                                                                                                                                                                                               |                    |                               |                                                             |                                       | <b>D. FULL NAME</b>                                                                                                                                            |  |  | Name of Employer                    | Date (month, day, year)               | Amount            | MAILING ADDRESS                    |  |  |                                 |  |  | <b>CITY</b>               | <b>STATE</b>       | <b>ZIP CODE</b>               | Occupation                      |  |  |
| <b>D. FULL NAME</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                    |                               | Name of Employer                                            | Date (month, day, year)               | Amount                                                                                                                                                         |  |  |                                     |                                       |                   |                                    |  |  |                                 |  |  |                           |                    |                               |                                 |  |  |
| MAILING ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                    |                               |                                                             |                                       |                                                                                                                                                                |  |  |                                     |                                       |                   |                                    |  |  |                                 |  |  |                           |                    |                               |                                 |  |  |
| <b>CITY</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>STATE</b>       | <b>ZIP CODE</b>               | Occupation                                                  |                                       |                                                                                                                                                                |  |  |                                     |                                       |                   |                                    |  |  |                                 |  |  |                           |                    |                               |                                 |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3"> <b>E. FULL NAME</b> </td> <td>           Name of Employer         </td> <td>           Date (month, day, year)         </td> <td>           Amount         </td> </tr> <tr> <td colspan="3">           MAILING ADDRESS         </td> <td></td> <td></td> <td></td> </tr> <tr> <td> <b>CITY</b> </td> <td> <b>STATE</b> </td> <td> <b>ZIP CODE</b> </td> <td>           Occupation         </td> <td></td> <td></td> </tr> </table>                                                                                                                                                                                                                                                                                                                               |                    |                               |                                                             |                                       | <b>E. FULL NAME</b>                                                                                                                                            |  |  | Name of Employer                    | Date (month, day, year)               | Amount            | MAILING ADDRESS                    |  |  |                                 |  |  | <b>CITY</b>               | <b>STATE</b>       | <b>ZIP CODE</b>               | Occupation                      |  |  |
| <b>E. FULL NAME</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                    |                               | Name of Employer                                            | Date (month, day, year)               | Amount                                                                                                                                                         |  |  |                                     |                                       |                   |                                    |  |  |                                 |  |  |                           |                    |                               |                                 |  |  |
| MAILING ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                    |                               |                                                             |                                       |                                                                                                                                                                |  |  |                                     |                                       |                   |                                    |  |  |                                 |  |  |                           |                    |                               |                                 |  |  |
| <b>CITY</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>STATE</b>       | <b>ZIP CODE</b>               | Occupation                                                  |                                       |                                                                                                                                                                |  |  |                                     |                                       |                   |                                    |  |  |                                 |  |  |                           |                    |                               |                                 |  |  |
| <b>SIGNATURE (optional)</b><br>Byon, Aesook, , ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                    |                               | <b>DATE</b><br>06/22/2022                                   |                                       | <b>For further information contact:</b><br>Federal Election Commission<br>999 E Street, NW, Washington, DC 20463<br>Toll Free 800-424-9530, Local 202-694-1100 |  |  |                                     |                                       |                   |                                    |  |  |                                 |  |  |                           |                    |                               |                                 |  |  |
| <b>[Electronically Filed]</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |                               |                                                             |                                       |                                                                                                                                                                |  |  |                                     |                                       |                   |                                    |  |  |                                 |  |  |                           |                    |                               |                                 |  |  |

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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)