

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Marter for Congress

ADDRESS (number and street)

233 Fox Chase Drive North

Check if different
than previously
reported. (ACC)

Oswego

IL

60543

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00657361

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

IL

14

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)



Termination Report (TER)

(b) 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 Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
01 / 01 / 2022

through

M M / D D / Y Y Y Y
03 / 31 / 2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Weber, Steve, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Weber, Steve, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y
08 / 09 / 2022

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
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 117

Write or Type Committee Name
Marter for Congress

Report Covering the Period:

From:

M M / D D / Y Y Y Y
 01 / 01 / 2022

To:

M M / D D / Y Y Y Y
 03 / 31 / 2022

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	25316.43	77536.20
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	25316.43	77536.20
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	21737.34	60135.79
(b) Total Offsets to Operating Expenditures (from Line 14)	2000.00	2000.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	19737.34	58135.79
8. Cash on Hand at Close of Reporting Period (from Line 27)	39714.15	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	81761.04	

For further information contact:

Federal Election Commission
 999 E Street, NW
 Washington, DC 20463

Toll Free 800-424-9530
 Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Marter for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	2	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	2

I. RECEIPTS**COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

17482.02

46547.02

(ii) Unitemized.....

6784.41

28439.18

(iii) TOTAL of contributions from individuals ▶

24266.43

74986.20

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

1050.00

2550.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

25316.43

77536.20

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

251.47

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

15540.53

23008.26

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

15540.53

23008.26

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

2000.00

2000.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

42856.96

102795.93

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	21737.34	60135.79
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	1310.00	3063.84
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	23047.34	63199.63

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	19904.53
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	42856.96
25. SUBTOTAL (add Line 23 and Line 24).....	62761.49
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	23047.34
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	39714.15

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
Abaunza, John, , ,
Mailing Address 12619 Camden Drive

City State Zip Code
Goldvein VA 22720

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 18 2022

Transaction ID : SA11AI.6986

Amount of Each Receipt this Period

2900.00

☐ Memo Item
Contribution

B. Full Name (Last, First, Middle Initial)
Ainsworth, Claude, , ,
Mailing Address 19 Old Post Road

City State Zip Code
Montgomery IL 60538

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 30 2022

Transaction ID : SA11AI.6950

Amount of Each Receipt this Period

150.00

☐ Memo Item
Contribution

C. Full Name (Last, First, Middle Initial)
Berger, Alan, , ,
Mailing Address 24 Sutton Pl

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Self Employed

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 21 2022

Transaction ID : SA11AI.6978

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

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

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

3550.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
Curran, Mark, , ,

Mailing Address 540 Ghost Street

City Spookyville	State IL	Zip Code 66600
---------------------	-------------	-------------------

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

Name of Employer Unknown	Occupation Unknown
-----------------------------	-----------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 05 / 2022

Transaction ID : SA11AI.7097

Amount of Each Receipt this Period

200.00

☐ Memo Item
Contribution

B. Full Name (Last, First, Middle Initial)
Duggan, Peter, , ,

Mailing Address 1030 North State Street
44J

City Chicago	State IL	Zip Code 60610
-----------------	-------------	-------------------

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

Name of Employer Booz Allen Hamelton	Occupation IT
---	------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 405.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 01 / 2022

Transaction ID : SA11AI.6912

Amount of Each Receipt this Period

200.00

☐ Memo Item
Contribution

C. Full Name (Last, First, Middle Initial)
DuSell, Fred, , ,

Mailing Address 478 Kelly Ave

City Yorkville	State IL	Zip Code 60560
-------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 01 / 2022

Transaction ID : SA11AI.6909

Amount of Each Receipt this Period

100.00

☐ Memo Item
Contribution
SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

500.00

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
DuSell, Fred, , ,

Mailing Address 478 Kelly Ave

City Yorkville	State IL	Zip Code 60560
-------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 14 2022

Transaction ID : SA11AI.6894

Amount of Each Receipt this Period

100.00

☐ Memo Item
Contribution

B. Full Name (Last, First, Middle Initial)
DuSell, Fred, , ,

Mailing Address 478 Kelly Ave

City Yorkville	State IL	Zip Code 60560
-------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 01 2022

Transaction ID : SA11AI.6939

Amount of Each Receipt this Period

100.00

☐ Memo Item
Contribution

C. Full Name (Last, First, Middle Initial)
DuSell, Fred, , ,

Mailing Address 478 Kelly Ave

City Yorkville	State IL	Zip Code 60560
-------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 01 2022

Transaction ID : SA11AI.7013

Amount of Each Receipt this Period

200.00

☐ Memo Item
Contribution

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

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

400.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
Enright, Rob, , ,

Mailing Address 2506 River Bend

City Plainfield	State IL	Zip Code 60586
--------------------	-------------	-------------------

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

Name of Employer Southside Sound and Lights	Occupation Owner
--	---------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 25 / 2022

Transaction ID : SA11AI.7163

Amount of Each Receipt this Period

350.00

☐ Memo Item

In-kind - South Side Sound and Lights

B. Full Name (Last, First, Middle Initial)
Enright, Rob, , ,

Mailing Address 2506 River Bend

City Plainfield	State IL	Zip Code 60586
--------------------	-------------	-------------------

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

Name of Employer Southside Sound and Lights	Occupation Owner
--	---------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2022

Transaction ID : SA11AI.7152

Amount of Each Receipt this Period

50.00

☐ Memo Item

Contribution

C. Full Name (Last, First, Middle Initial)
Estrada, Raphael, , ,

Mailing Address 1883 Cornelia Rd

City Galesburg	State IL	Zip Code 61410
-------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 439.02

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2022

Transaction ID : SA11AI.7310

Amount of Each Receipt this Period

439.02

☐ Memo Item

In-kind - Food for Meet and Greet

SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

839.02

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

Use separate schedule(s)
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
Findley Smith, Beth, , ,

Mailing Address 270 Easy St

City Somonauk	State IL	Zip Code 60552
------------------	-------------	-------------------

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

Name of Employer Unemployed	Occupation Unemployed
--------------------------------	--------------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 21 2022

Transaction ID : SA11AI.6888

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

B. Full Name (Last, First, Middle Initial)
Findley Smith, Beth, , ,

Mailing Address 270 Easy St

City Somonauk	State IL	Zip Code 60552
------------------	-------------	-------------------

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

Name of Employer Unemployed	Occupation Unemployed
--------------------------------	--------------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 21 2022

Transaction ID : SA11AI.6918

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

C. Full Name (Last, First, Middle Initial)
Findley Smith, Beth, , ,

Mailing Address 270 Easy St

City Somonauk	State IL	Zip Code 60552
------------------	-------------	-------------------

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

Name of Employer Unemployed	Occupation Unemployed
--------------------------------	--------------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 21 2022

Transaction ID : SA11AI.6980

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

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

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

75.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
Gerson, Eloise, , ,

Mailing Address PO Box 10696

City Chicago State IL Zip Code 60611

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

Name of Employer Self Employed Occupation Real Estate

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 3400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 25 2022

Transaction ID : SA11AI.7121

Amount of Each Receipt this Period

1900.00

☐ Memo Item
 Contribution

B. Full Name (Last, First, Middle Initial)
Guss, David, , ,

Mailing Address 508 Redbud Drive

City Yorkville State IL Zip Code 60560

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

Name of Employer Retired Occupation Retired

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 01 25 2022

Transaction ID : SA11AI.7056

Amount of Each Receipt this Period

300.00

☐ Memo Item
 Contribution

C. Full Name (Last, First, Middle Initial)
Hotaling, William, , ,

Mailing Address 125 Quassaick Ave.

City New Windsor State NY Zip Code 12553

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

Name of Employer Retired Occupation Retired

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 30 2022

Transaction ID : SA11AI.6953

Amount of Each Receipt this Period

1000.00

☐ Memo Item
 Contribution

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

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

3200.00

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

Use separate schedule(s)
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FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
Hurst, Steven, , ,

Mailing Address 1 Forest View Dr

City Hawthorn Woods	State IL	Zip Code 60047
------------------------	-------------	-------------------

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

Name of Employer Hurst & Associates	Occupation Video Production
--	--------------------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2022

Transaction ID : SA11AI.7285

Amount of Each Receipt this Period

600.00

☐ Memo Item
In-kind - Video/Photography Services

B. Full Name (Last, First, Middle Initial)
Keeley, Matt, , ,

Mailing Address 564 Mayfair Lane

City Naperville	State IL	Zip Code 60565
--------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 18 / 2022

Transaction ID : SA11AI.6988

Amount of Each Receipt this Period

100.00

☐ Memo Item
Contribution

C. Full Name (Last, First, Middle Initial)
Kuhrt, William, , ,

Mailing Address 213 Woodford Rd

City Oswego	State IL	Zip Code 60543
----------------	-------------	-------------------

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

Name of Employer Kit's Classic Towing	Occupation Owner/Manager
--	-----------------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2022

Transaction ID : SA11AI.6943

Amount of Each Receipt this Period

2400.00

☐ Memo Item
Contribution

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

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

3100.00

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
Kviz, Linda, , ,

Mailing Address 695 Conton Ct

City Oswego	State IL	Zip Code 60543
----------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 05 2022

Transaction ID : SA11AI.7089

Amount of Each Receipt this Period

250.00

☐ Memo Item
 Contribution

B. Full Name (Last, First, Middle Initial)
Mansour, Jessica, , ,

Mailing Address 364 Hemlock Ln

City Oswego	State IL	Zip Code 60543
----------------	-------------	-------------------

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

Name of Employer Ulta	Occupation Graphic Design
--------------------------	------------------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 30 2022

Transaction ID : SA11AI.7168

Amount of Each Receipt this Period

500.00

☐ Memo Item
 In-kind - Graphic Design

C. Full Name (Last, First, Middle Initial)
Mansour, Kris, , ,

Mailing Address 364 hemlock Ln

City Oswego	State IL	Zip Code 60543
----------------	-------------	-------------------

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

Name of Employer Oracle	Occupation Accounting
----------------------------	--------------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 30 2022

Transaction ID : SA11AI.7166

Amount of Each Receipt this Period

500.00

☐ Memo Item
 In-kind - Account Services

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

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

1250.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
Morrissey, Elsie, , ,

Mailing Address 820 N Lafayette St

City Sandwich	State IL	Zip Code 60548
------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
282.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 28 2022

Transaction ID : SA11AI.7130

Amount of Each Receipt this Period

100.00

☐ Memo Item
Contribution

B. Full Name (Last, First, Middle Initial)
Musso, Claire, , ,

Mailing Address 480 Casuarina

City Miami	State FL	Zip Code 33143
---------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 11 2022

Transaction ID : SA11AI.6933

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

C. Full Name (Last, First, Middle Initial)
Musso, Claire, , ,

Mailing Address 480 Casuarina

City Miami	State FL	Zip Code 33143
---------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 11 2022

Transaction ID : SA11AI.7001

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

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

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

150.00

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

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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
Pierce, Michael, , ,

Mailing Address 1135 Cordula Circle

City Naperville	State IL	Zip Code 60564
--------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 29 2022

Transaction ID : SA11AI.6956

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

B. Full Name (Last, First, Middle Initial)
Rittenhouse, Louis, , ,

Mailing Address 660 High St

City Santa Cruz	State CA	Zip Code 85060
--------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 25 2022

Transaction ID : SA11AI.7059

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Contribution

C. Full Name (Last, First, Middle Initial)
Runge, Russel, , ,

Mailing Address 15200 Melms

City Genoa	State IL	Zip Code 60135
---------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 05 2022

Transaction ID : SA11AI.6903

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

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

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

1275.00

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

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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
Runge, Russel, , ,

Mailing Address 15200 Melms

City Genoa	State IL	Zip Code 60135
---------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 11 2022

Transaction ID : SA11AI.6897

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

B. Full Name (Last, First, Middle Initial)
Runge, Russel, , ,

Mailing Address 15200 Melms

City Genoa	State IL	Zip Code 60135
---------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 27 2022

Transaction ID : SA11AI.6886

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

C. Full Name (Last, First, Middle Initial)
Runge, Russel, , ,

Mailing Address 15200 Melms

City Genoa	State IL	Zip Code 60135
---------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 17 2022

Transaction ID : SA11AI.6924

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

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

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

75.00

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

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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
Runge, Russel, , ,

Mailing Address 15200 Melms

City Genoa	State IL	Zip Code 60135
---------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 06 2022

Transaction ID : SA11AI.7006

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

B. Full Name (Last, First, Middle Initial)
Runge, Russel, , ,

Mailing Address 15200 Melms

City Genoa	State IL	Zip Code 60135
---------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2022

Transaction ID : SA11AI.6948

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution

C. Full Name (Last, First, Middle Initial)
Shaw, Frances, , ,

Mailing Address 1109 West Downer Pl

City Aurora	State IL	Zip Code 60506
----------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 15 2022

Transaction ID : SA11AI.7067

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

300.00

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

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

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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
Siwicki, Brian, , ,

Mailing Address 572 Clark St

City
Hinckley

State
IL

Zip Code
60520

FEC ID number of contributing federal political committee.
C

Name of Employer
Self

Occupation
Carpenter

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 02 2022

Transaction ID : SA11AI.6908

Amount of Each Receipt this Period

100.00

☐ Memo Item
Contribution

B. Full Name (Last, First, Middle Initial)
Siwicki, Brian, , ,

Mailing Address 572 Clark St

City
Hinckley

State
IL

Zip Code
60520

FEC ID number of contributing federal political committee.
C

Name of Employer
Self

Occupation
Carpenter

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
925.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 15 2022

Transaction ID : SA11AI.7061

Amount of Each Receipt this Period

300.00

☐ Memo Item
Contribution

C. Full Name (Last, First, Middle Initial)
Siwicki, Brian, , ,

Mailing Address 572 Clark St

City
Hinckley

State
IL

Zip Code
60520

FEC ID number of contributing federal political committee.
C

Name of Employer
Self

Occupation
Carpenter

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 28 2022

Transaction ID : SA11AI.7133

Amount of Each Receipt this Period

200.00

☐ Memo Item
Contribution

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

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

600.00

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

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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
Siwicki, Gennie, , ,

Mailing Address 572 Clark St

City
Hinckley

State
IL

Zip Code
60520

FEC ID number of contributing federal political committee.
C

Name of Employer
Beko US

Occupation
HR Manager

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1030.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 08 / 2022

Transaction ID : SA11AI.7314

Amount of Each Receipt this Period

1000.00

☐ Memo Item
In-kind - Food for Meet and Greet

B. Full Name (Last, First, Middle Initial)
Siwicki, Gennie, , ,

Mailing Address 572 Clark St

City
Hinckley

State
IL

Zip Code
60520

FEC ID number of contributing federal political committee.
C

Name of Employer
Beko US

Occupation
HR Manager

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1148.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2022

Transaction ID : SA11AI.7108

Amount of Each Receipt this Period

118.00

☐ Memo Item
Contribution

C. Full Name (Last, First, Middle Initial)
Weir, John, , ,

Mailing Address 2N190 Harley Rd

City
Elburn

State
IL

Zip Code
60119

FEC ID number of contributing federal political committee.
C

Name of Employer
Van Guard Energy Services

Occupation
Owner

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2022

Transaction ID : SA11AI.6962

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

1618.00

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

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

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

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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
Weise, Sally, , ,

Mailing Address 7106 Dunham Rd

City Union	State IL	Zip Code 60180
---------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 10 2022

Transaction ID : SA11AI.6900

Amount of Each Receipt this Period

100.00

☐ Memo Item
Contribution

B. Full Name (Last, First, Middle Initial)
Weise, Sally, , ,

Mailing Address 7106 Dunham Rd

City Union	State IL	Zip Code 60180
---------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 01 2022

Transaction ID : SA11AI.7014

Amount of Each Receipt this Period

50.00

☐ Memo Item
Contribution

C. Full Name (Last, First, Middle Initial)
Weise, Sally, , ,

Mailing Address 7106 Dunham Rd

City Union	State IL	Zip Code 60180
---------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2022

Transaction ID : SA11AI.6946

Amount of Each Receipt this Period

50.00

☐ Memo Item
Contribution

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

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

200.00

SCHEDULE A (FEC Form 3)
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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
West, Joe, , ,

Mailing Address 304 Stoneleigh Ln

City Oswego	State IL	Zip Code 60543
----------------	-------------	-------------------

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

Name of Employer Oswego Township	Occupation Supervisor
-------------------------------------	--------------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 378.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 15 / 2022

Transaction ID : SA11AI.7069

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

B. Full Name (Last, First, Middle Initial)
Wooten, Judy, , ,

Mailing Address 24659 Bell Road

City Minooka	State IL	Zip Code 60447
-----------------	-------------	-------------------

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

Name of Employer FOFCA	Occupation Teacher
---------------------------	-----------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2022

Transaction ID : SA11AI.7146

Amount of Each Receipt this Period

100.00

☐ Memo Item
Contribution

C. Full Name (Last, First, Middle Initial)

Mailing Address

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

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

Name of Employer	Occupation
------------------	------------

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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☐ Memo Item
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350.00
17482.02

**SCHEDULE A (FEC Form 3)
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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
Friends to Elect Judge DeWilkins

Mailing Address 111 N Ottawa St

City	State	Zip Code
Joliet	IL	60432

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		28		2022

Transaction ID : SA11C.7135

Amount of Each Receipt this Period

50.00

☐ Memo Item
Contribution

B. Full Name (Last, First, Middle Initial)
UNITED FOR LIBERTY PAC

Mailing Address 19 BAKERS CREEK RD

City	State	Zip Code
WARWICK	RI	02886

FEC ID number of contributing
federal political committee.

C C00794222

Name of Employer

Occupation

Receipt For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		05		2022

Transaction ID : SA11C.7092

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

C. Full Name (Last, First, Middle Initial)
UNITED FOR LIBERTY PAC

Mailing Address 19 BAKERS CREEK RD

City	State	Zip Code
WARWICK	RI	02886

FEC ID number of contributing
federal political committee.

C C00794222

Name of Employer

Occupation

Receipt For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2022

Transaction ID : SA11C.7161

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution
SUBTOTAL of Receipts This Page (optional)..... ▶

1050.00

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

1050.00

SCHEDULE A (FEC Form 3)
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NAME OF COMMITTEE (In Full)
Marter for Congress

Full Name (Last, First, Middle Initial) Keap			Date of Receipt M M / D D / Y Y Y Y Y 01 / 31 / 2022	
Mailing Address 1260 S. Spectrum Blvd			Transaction ID : SA13A.7271	
City Chandler	State AZ	Zip Code 85286	Amount of Each Receipt this Period 549.00	
FEC ID number of contributing federal political committee. C		Memo Item Email Marketing		
Name of Employer		Occupation		
Receipt For: 2022 ☒ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼ 549.00		

Full Name (Last, First, Middle Initial) Marter, James, Thomas, ,			Date of Receipt M M / D D / Y Y Y Y Y 01 / 08 / 2022	
Mailing Address 233 Fox Chase Drive North			Transaction ID : SA13A.7200	
City Oswego	State IL	Zip Code 60543	Amount of Each Receipt this Period 18.00	
FEC ID number of contributing federal political committee. C H8IL16153		Memo Item Parking Fee		
Name of Employer Self-Employed		Occupation CEO		
Receipt For: 2022 ☒ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼ 6882.95		

Full Name (Last, First, Middle Initial) Marter, James, Thomas, ,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 01 / 2022	
Mailing Address 233 Fox Chase Drive North			Transaction ID : SA13A.7270	
City Oswego	State IL	Zip Code 60543	Amount of Each Receipt this Period 549.00	
FEC ID number of contributing federal political committee. C H8IL16153		Memo Item Email Marketing		
Name of Employer Self-Employed		Occupation CEO		
Receipt For: 2022 ☒ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼ 7431.95		

SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

1116.00

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

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☐ 11a ☒ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
Marter, James, Thomas, ,

Mailing Address 233 Fox Chase Drive North

City Oswego	State IL	Zip Code 60543
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** H8IL16153

Name of Employer Self-Employed	Occupation CEO
-----------------------------------	-------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
8307.11

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 21 / 2022

Transaction ID : SA13A.7263

Amount of Each Receipt this Period

875.16

☐ Memo Item
Fundraiser Food

B. Full Name (Last, First, Middle Initial)
Marter, James, Thomas, ,

Mailing Address 233 Fox Chase Drive North

City Oswego	State IL	Zip Code 60543
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** H8IL16153

Name of Employer Self-Employed	Occupation CEO
-----------------------------------	-------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
12628.11

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 22 / 2022

Transaction ID : SA13A.7275

Amount of Each Receipt this Period

4321.00

☐ Memo Item
Signs and Frames

C. Full Name (Last, First, Middle Initial)
Marter, James, Thomas, ,

Mailing Address 233 Fox Chase Drive North

City Oswego	State IL	Zip Code 60543
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** H8IL16153

Name of Employer Self-Employed	Occupation CEO
-----------------------------------	-------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
12637.11

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2022

Transaction ID : SA13A.7268

Amount of Each Receipt this Period

9.00

☐ Memo Item
Parking

5205.16

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

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 24 OF 117

☐ 11a ☐ 11b ☐ 11c ☐ 11d
12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
Marter, James, Thomas, ,

Mailing Address 233 Fox Chase Drive North

City Oswego	State IL	Zip Code 60543
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** H8IL16153

Name of Employer Self-Employed	Occupation CEO
-----------------------------------	-------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
13389.63

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 27 / 2022

Transaction ID : SA13A.7276

Amount of Each Receipt this Period

752.52

☐ Memo Item
Fundraiser Food

B. Full Name (Last, First, Middle Initial)
Marter, James, Thomas, ,

Mailing Address 233 Fox Chase Drive North

City Oswego	State IL	Zip Code 60543
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** H8IL16153

Name of Employer Self-Employed	Occupation CEO
-----------------------------------	-------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
20889.63

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2022

Transaction ID : SA13A.7159

Amount of Each Receipt this Period

7500.00

☐ Memo Item
Loan

C. Full Name (Last, First, Middle Initial)
Marter, James, Thomas, ,

Mailing Address 233 Fox Chase Drive North

City Oswego	State IL	Zip Code 60543
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** H8IL16153

Name of Employer Self-Employed	Occupation CEO
-----------------------------------	-------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
21438.63

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2022

Transaction ID : SA13A.7280

Amount of Each Receipt this Period

549.00

☐ Memo Item
Email Marketing

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

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

8801.52

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

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

FOR LINE NUMBER:
(check only one)

PAGE 25 OF 117

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial)
Marter, James, Thomas, ,

Mailing Address 233 Fox Chase Drive North

City Oswego	State IL	Zip Code 60543
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** H8IL16153

Name of Employer Self-Employed	Occupation CEO
-----------------------------------	-------------------

Receipt For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 21856.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2022

Transaction ID : SA13A.7281

Amount of Each Receipt this Period

417.85

☐ Memo Item
 Advertising

B. Full Name (Last, First, Middle Initial)

Mailing Address

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

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

Name of Employer	Occupation
------------------	------------

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

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

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

Name of Employer	Occupation
------------------	------------

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

417.85

15540.53

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

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

FOR LINE NUMBER:
(check only one)

PAGE 26 OF 117

☐ 11a ☐ 11b ☐ 11c ☒ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Marter for Congress

A. Full Name (Last, First, Middle Initial) The Venue at Goebbert's			Date of Receipt M M / D D / Y Y Y Y Y 03 / 30 / 2022	
Mailing Address 42W813 Reinking Rd			Transaction ID : SA14.7320	
City Pinegree Grove	State IL	Zip Code 60140	Amount of Each Receipt this Period _____ 2000.00	
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date _____ 2000.00		
Name of Employer		Occupation		
Receipt For: 2022 ☒ Primary ☐ General ☐ Other (specify) ▼		☐ Memo Item Check never cashed		

B. Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address			Amount of Each Receipt this Period _____	
City	State	Zip Code	☐ Memo Item	
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date _____		
Name of Employer		Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		☐ Memo Item		

C. Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address			Amount of Each Receipt this Period _____	
City	State	Zip Code	☐ Memo Item	
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date _____		
Name of Employer		Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		☐ Memo Item		

SUBTOTAL of Receipts This Page (optional).....	_____ 2000.00
TOTAL This Period (last page this line number only).....	_____ 2000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 117

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Marter for Congress

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 1920 McKinney Ave
7th FloorCity
DallasState
TXZip Code
75201Purpose of Disbursement
Anedot Fees

001

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	2	2

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

14.90

Transaction ID : SB17.6915

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AnedotMailing Address 1920 McKinney Ave
7th FloorCity
DallasState
TXZip Code
75201Purpose of Disbursement
Contribution

001

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	8	/	2	0	2	2

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

16.50

Transaction ID : SB17.6941

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AnedotMailing Address 1920 McKinney Ave
7th FloorCity
DallasState
TXZip Code
75201Purpose of Disbursement
Anedot Fees

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	2	2

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

206.65

Transaction ID : SB17.7016

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

238.05

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 117

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Marter for Congress

Full Name (Last, First, Middle Initial)

A. Awesome Campaign

Mailing Address 1220 St. Charles

Date of Disbursement

M M	D D	Y Y Y Y
03	22	2022

City
ElginState
ILZip Code
60120Purpose of Disbursement
Signs and Frames

006

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

4321.00

Transaction ID : SB17.7273

☐ Memo Item

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Full Name (Last, First, Middle Initial)

B. Chop'dMailing Address 12337 S Illinois Rt 59
Suite 155

Date of Disbursement

M M	D D	Y Y Y Y
03	27	2022

City
PlainfieldState
ILZip Code
60585Purpose of Disbursement
Fundraiser Food

003

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

752.52

Transaction ID : SB17.7277

☐ Memo Item

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Full Name (Last, First, Middle Initial)

c. Colasante, Christa, , ,

Mailing Address 4171 Lobo Ln

Date of Disbursement

M M	D D	Y Y Y Y
01	03	2022

City
NapervilleState
ILZip Code
60564Purpose of Disbursement
Campaign Consultant

001

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

1250.00

Transaction ID : SB17.7175

☐ Memo Item

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

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

6323.52

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 117

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
Marter for Congress

Full Name (Last, First, Middle Initial)

A. Colasante, Christa, , ,

Mailing Address 4171 Lobo Ln

City
NapervilleState
ILZip Code
60564Purpose of Disbursement
Fundraiser Reimbursement

003

Candidate Name

Marter for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	2	2

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

177.83

Transaction ID : SB17.7179

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Colasante, Christa, , ,

Mailing Address 4171 Lobo Ln

City
NapervilleState
ILZip Code
60564Purpose of Disbursement
Reimbursement

001

Candidate Name

Marter for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	0		2	0	2	2

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

86.99

Transaction ID : SB17.7183

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Colasante, Christa, , ,

Mailing Address 4171 Lobo Ln

City
NapervilleState
ILZip Code
60564Purpose of Disbursement
Consultant

001

Candidate Name

Marter for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	2	2

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

1250.00

Transaction ID : SB17.7201

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1514.82

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Marter for Congress

Full Name (Last, First, Middle Initial)

A. Colasante, Christa, , ,

Mailing Address 4171 Lobo Ln

City
NapervilleState
ILZip Code
60564Purpose of Disbursement
Reimburse for Fundraiser

003

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		11		2022

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

193.91

Transaction ID : SB17.7205

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Colasante, Christa, , ,

Mailing Address 4171 Lobo Ln

City
NapervilleState
ILZip Code
60564Purpose of Disbursement
Consultant

001

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		21		2022

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

1250.00

Transaction ID : SB17.7234

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Enright, Rob, , ,

Mailing Address 2506 River Bend

City
PlainfieldState
ILZip Code
60586Purpose of Disbursement
In-kind - South Side Sound and Lights

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

350.00

Transaction ID : SB17.7165

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1793.91

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 117

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Marter for Congress

Full Name (Last, First, Middle Initial)

A. Estrada, Raphael, , ,

Mailing Address 1883 Cornelia Rd

City
GalesburgState
ILZip Code
61410Purpose of Disbursement
In-kind - Food for Meet and Greet

Candidate Name

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8					2022

FEC Identification Number

C

Amount of Each Disbursement this Period

439.02

Transaction ID : SB17.7312

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Facebook

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025Purpose of Disbursement
Advertising

Candidate Name

Marter for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3					2022

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

244.14

Transaction ID : SB17.7173

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Facebook

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025Purpose of Disbursement
Advertising

Candidate Name

Marter for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1					2022

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

551.66

Transaction ID : SB17.7242

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1234.82

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 117

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Marter for Congress

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025Purpose of Disbursement
Advertising

004

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	2

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

417.85

Transaction ID : SB17.7282

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of NRA

Mailing Address 11250 Waples Mill Rd

City
FairfaxState
VAZip Code
22030Purpose of Disbursement
Dinner Tickets

007

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	2	2

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.7264

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hurst & Associates, Inc.

Mailing Address 1 Forest View Dr.

City
Hawthorn WoodsState
ILZip Code
60047Purpose of Disbursement
Website Service

004

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	6		2	0	2	2

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.7190

☐ Memo Item

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

1117.85

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
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NAME OF COMMITTEE (In Full)
Marter for Congress

Full Name (Last, First, Middle Initial)

A. Hurst, Steven, , ,

Mailing Address 1 Forest View Dr

City
Hawthorn WoodsState
ILZip Code
60047Purpose of Disbursement
In-kind - Video/Photography Services

Candidate Name

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
03	30	2022

FEC Identification Number

C

Amount of Each Disbursement this Period

600.00

Transaction ID : SB17.7287

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Keap

Mailing Address 1260 S. Spectrum Blvd

City
ChandlerState
AZZip Code
85286Purpose of Disbursement
Email Marketing

Candidate Name

Marter for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M M	D D	Y Y Y Y
01	31	2022

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

549.00

Transaction ID : SB17.7272

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Keap

Mailing Address 1260 S. Spectrum Blvd

City
ChandlerState
AZZip Code
85286Purpose of Disbursement
Email Marketing

Candidate Name

Marter for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M M	D D	Y Y Y Y
03	01	2022

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

549.00

Transaction ID : SB17.7269

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1698.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Marter for Congress

Full Name (Last, First, Middle Initial)

A. Keap

Mailing Address 1260 S. Spectrum Blvd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2022

City
ChandlerState
AZZip Code
85286

FEC Identification Number

C C00657361

Purpose of Disbursement
Email Marketing

001

Amount of Each Disbursement this Period

549.00

Transaction ID : SB17.7279

☐ Memo Item

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Full Name (Last, First, Middle Initial)

B. Kelley, Daniel, , ,

Mailing Address 5738 N Richmond St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		20		2022

City
ChicagoState
ILZip Code
60659

FEC Identification Number

C C00657361

Purpose of Disbursement
Legal Fees

001

Amount of Each Disbursement this Period

750.00

Transaction ID : SB17.7256

☐ Memo Item

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Full Name (Last, First, Middle Initial)

C. Mansour, Jessica, , ,

Mailing Address 364 Hemlock Ln

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2022

City
OswegoState
ILZip Code
60543

FEC Identification Number

C

Purpose of Disbursement
In-kind - Graphic DesignCategory/
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.7171

☐ Memo Item

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

1799.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Marter for Congress

Full Name (Last, First, Middle Initial)

A. Mansour, Kris, , ,

Mailing Address 364 hemlock Ln

City
OswegoState
ILZip Code
60543Purpose of Disbursement
In-kind - Account Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.7172

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Microsoft

Mailing Address One Microsoft Way

City
RedmondState
WAZip Code
98053Purpose of Disbursement
Computer Software

Candidate Name

Marter for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	2		2	0	2	2

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

43.40

Transaction ID : SB17.7184

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Microsoft

Mailing Address One Microsoft Way

City
RedmondState
WAZip Code
98053Purpose of Disbursement
Software

Candidate Name

Marter for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	4		2	0	2	2

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

43.40

Transaction ID : SB17.7218

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

586.80

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Marter for Congress

Full Name (Last, First, Middle Initial)

A. Microsoft

Mailing Address One Microsoft Way

City
RedmondState
WAZip Code
98053Purpose of Disbursement
Website

001

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	2	2

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

47.74

Transaction ID : SB17.7252

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Oswego Chamber of Commerce

Mailing Address 73 W Van Buren St

City
OswegoState
ILZip Code
60543Purpose of Disbursement
Booth Rental

007

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	4		2	0	2	2

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

230.00

Transaction ID : SB17.7189

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Oswegoland Park

Mailing Address 311 E Washington

City
OswegoState
ILZip Code
60543Purpose of Disbursement
Booth Rental

007

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	4		2	0	2	2

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

231.75

Transaction ID : SB17.7215

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

509.49

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Marter for Congress

Full Name (Last, First, Middle Initial)

A. Premier MailingMailing Address 37 Stone Hill
Unit DCity
OswegoState
ILZip Code
60543Purpose of Disbursement
Business Cards

006

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2022

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

364.88

Transaction ID : SB17.7243

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RKA Enterprises LTD

Mailing Address 3029 Eldamain Rd

City
PlanoState
ILZip Code
60545Purpose of Disbursement
Rental Lanes

007

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		14		2022

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.7186

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RKA Enterprises LTD

Mailing Address 3029 Eldamain Rd

City
PlanoState
ILZip Code
60545Purpose of Disbursement
Fundraiser

003

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		11		2022

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.7206

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

964.88

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)
Marter for Congress

Full Name (Last, First, Middle Initial)

A. Siwicki, Gennie, , ,

Mailing Address 572 Clark St

City
HinckleyState
ILZip Code
60520Purpose of Disbursement
In-kind - Food for Meet and Greet

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.7315

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TFG LLCMailing Address 94 Medway St
Unit GLCity
PovidenceState
RIZip Code
02906Purpose of Disbursement
Consultant

Candidate Name

Marter for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	2	2

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.7177

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TFG LLCMailing Address 94 Medway St
Unit GLCity
PovidenceState
RIZip Code
02906Purpose of Disbursement
Campaign consulting

Candidate Name

Marter for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	2	2

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.7197

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1800.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Marter for Congress

Full Name (Last, First, Middle Initial)

A. TFG LLCMailing Address 94 Medway St
Unit GLCity
PovidenceState
RIZip Code
02906Purpose of Disbursement
Consulting

001

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	2		2	0	2	2

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.7249

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 601 E Countryside Pkwy

City
YorkvilleState
ILZip Code
60560Purpose of Disbursement
Postage

001

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	2		2	0	2	2

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

66.95

Transaction ID : SB17.7185

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 601 E Countryside Pkwy

City
YorkvilleState
ILZip Code
60560Purpose of Disbursement
Postage

001

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	4		2	0	2	2

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

8.95

Transaction ID : SB17.7188

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

575.90

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)
Marter for Congress

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 601 E Countryside Pkwy

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		12		2022

City
YorkvilleState
ILZip Code
60560

FEC Identification Number

C C00657361

Purpose of Disbursement
Postage

001

Amount of Each Disbursement this Period

7.94

Transaction ID : SB17.7251

☐ Memo Item

Candidate Name

Marter for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 14

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 601 E Countryside Pkwy

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		18		2022

City
YorkvilleState
ILZip Code
60560

FEC Identification Number

C C00657361

Purpose of Disbursement
Postage

001

Amount of Each Disbursement this Period

7.99

Transaction ID : SB17.7253

☐ Memo Item

Candidate Name

Marter for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 14

Full Name (Last, First, Middle Initial)

c. Whitetail Ridge Golf club

Mailing Address 7671 Clubhouse Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2022

City
YorkvilleState
ILZip Code
60560

FEC Identification Number

C C00657361

Purpose of Disbursement
Fundraiser Food

003

Amount of Each Disbursement this Period

875.16

Transaction ID : SB17.7261

☐ Memo Item

Candidate Name

Marter for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 14

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

891.09

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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☒ 17	☐ 18	☐ 19a	☐ 19b
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NAME OF COMMITTEE (In Full)

Marter for Congress

Full Name (Last, First, Middle Initial)

A. Whitetail Ridge Golf club

Mailing Address 7671 Clubhouse Drive

City
YorkvilleState
ILZip Code
60560Purpose of Disbursement
Fundraiser Food

003

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	2	2

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

115.25

Transaction ID : SB17.7265

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Whitetail Ridge Golf club

Mailing Address 7671 Clubhouse Drive

City
YorkvilleState
ILZip Code
60560Purpose of Disbursement
Fundraiser Food

003

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	2	2

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.7266

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

140.25

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

21188.38

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☐ 17	☒ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
Marter for Congress

Full Name (Last, First, Middle Initial)

A. AMERICAN CONSERVATIVE UNIONMailing Address 201 NORTH UNION STREET
SUITE 370City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
CPAC Registration

002

Candidate Name

Marter for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	2	2

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

295.00

Transaction ID : SB18.7213

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN CONSERVATIVE UNIONMailing Address 201 NORTH UNION STREET
SUITE 370City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
Reagan Dinner

002

Candidate Name

Marter for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	6		2	0	2	2

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

375.00

Transaction ID : SB18.7220

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Bureau County Republican Central Committee

Mailing Address 2440 Ridgefield Rd

City
PrincetonState
ILZip Code
61356Purpose of Disbursement
Dinner Tickets

008

Candidate Name

Marter for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	2		2	0	2	2

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

90.00

Transaction ID : SB18.7209

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

760.00

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 43 OF 117

☐ 17 20a	☒ 18 20b	☐ 19a 20c	☐ 19b 21
------------------------------------	---	-------------------------------------	------------------------------------

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NAME OF COMMITTEE (In Full)

Marter for Congress

Full Name (Last, First, Middle Initial)

A. Citizens for Fritz

Mailing Address PO Box 1354

Date of Disbursement

M M	D D	Y Y Y Y
03	25	2022

City
PlainfieldState
ILZip Code
60544

FEC Identification Number

C C00657361

Purpose of Disbursement
Donation

002

Amount of Each Disbursement this Period

35.00

Transaction ID : SB18.7259

☐ Memo Item

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Full Name (Last, First, Middle Initial)

B. Citizens to Elect Michelle Smith

Mailing Address 24837 W Pine Cone Lane

Date of Disbursement

M M	D D	Y Y Y Y
01	31	2022

City
PlainfieldState
ILZip Code
60586

FEC Identification Number

C C00657361

Purpose of Disbursement
Petition Drive

003

Amount of Each Disbursement this Period

60.00

Transaction ID : SB18.7192

☐ Memo Item

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Full Name (Last, First, Middle Initial)

c. Dupage GOP

Mailing Address Drury Lane Banquet Hall

Date of Disbursement

M M	D D	Y Y Y Y
02	21	2022

City
Oak BrookState
ILZip Code
60523

FEC Identification Number

C C00657361

Purpose of Disbursement
Petition Even

007

Amount of Each Disbursement this Period

75.00

Transaction ID : SB18.7236

☐ Memo Item

Candidate Name

Marter for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

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

170.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 44 OF 117

☐ 17	☒ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Marter for Congress

Full Name (Last, First, Middle Initial)

A. Joliet Township Republican Organization

Mailing Address 221 Jessie St.

Date of Disbursement

M M	D D	Y Y Y Y
02	21	2022

City
JolietState
ILZip Code
60433

FEC Identification Number

C C00657361

Purpose of Disbursement
Meet and Greet

002

Candidate Name

Marter for Congress

Category/
Type

Amount of Each Disbursement this Period

30.00

Transaction ID : SB18.7232

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Full Name (Last, First, Middle Initial)

B. Kendall County Young Republicans

Mailing Address PO Box 411

Date of Disbursement

M M	D D	Y Y Y Y
02	16	2022

City
BristolState
ILZip Code
60512

FEC Identification Number

C C00657361

Purpose of Disbursement
Meet and Greet

002

Candidate Name

Marter for Congress

Category/
Type

Amount of Each Disbursement this Period

200.00

Transaction ID : SB18.7222

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Full Name (Last, First, Middle Initial)

C. Lockport Township Republican Organization

Mailing Address 2209 Greengold St.

Date of Disbursement

M M	D D	Y Y Y Y
01	15	2022

City
Crest HillState
ILZip Code
60403

FEC Identification Number

C C00657361

Purpose of Disbursement
Contribution

008

Candidate Name

Marter for Congress

Category/
Type

Amount of Each Disbursement this Period

50.00

Transaction ID : SB18.7181

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

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

280.00

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 45 OF 117

☐ 17	☒ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
Marter for Congress

Full Name (Last, First, Middle Initial)

A. Michelle Lee for Rockdale Dist 43

Mailing Address 24837 W Pine Cone Lane

Date of Disbursement

M M	D D	Y Y Y Y
03	05	2022

City
PlainfieldState
ILZip Code
60586Purpose of Disbursement
Meet and Greet

007

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

25.00

Transaction ID : SB18.7245

☐ Memo Item

Candidate Name

Marter for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Full Name (Last, First, Middle Initial)

B. Troy Township Republicans

Mailing Address 705 Ravina Dr

Date of Disbursement

M M	D D	Y Y Y Y
02	08	2022

City
ShorewoodState
ILZip Code
60404Purpose of Disbursement
Petition Signings

003

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

25.00

Transaction ID : SB18.7203

☐ Memo Item

Candidate Name

Marter for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Full Name (Last, First, Middle Initial)

C. Will County Young Republican Org

Mailing Address 328 Stonegate Rd

Date of Disbursement

M M	D D	Y Y Y Y
02	21	2022

City
BolingbrookState
ILZip Code
60440Purpose of Disbursement
Voter Appreciation/Petitions

007

FEC Identification Number

C C00657361

Amount of Each Disbursement this Period

50.00

Transaction ID : SB18.7238

☐ Memo Item

Candidate Name

Marter for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

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

100.00

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

1310.00

SCHEDULE C (FEC Form 3)
LOANS

PAGE 46 OF 117

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6609

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2022

Been Verified

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
307 5th Ave
16th Floor

City

State

ZIP Code

New York

NY

10016

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

26.89

0.00

26.89

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 07^MD 09^D

Y 2021 Y

M M

D D

Y na Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

26.89

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 47 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6611

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Been Verified

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
307 5th Ave
16th Floor

City

State

ZIP Code

New York

NY

10016

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

26.89

0.00

26.89

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 08

/ D 09

/ Y 2021

M M

/ D D

/ Y na

Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

26.89

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 48 OF 117

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.7271

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Keap

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
1260 S. Spectrum Blvd

City

State

ZIP Code

Chandler

AZ

85286

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

549.00

0.00

549.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 01 M

D 31 D

Y 2022 Y

M M

D D

Y n/a Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

549.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 49 OF 117

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.4107

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2018

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

343.84

0.00

343.84

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 10^MD 01^D

Y 2017 Y

M M

D D

Y N/A Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

343.84

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 50 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.4570

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2018

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

238.80

0.00

238.80

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 10 M /

D 01 D /

Y 2017 Y

M M /

D D /

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

238.80

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 51 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.4168

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2018

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

233 Fox Chase Drive North

City

Oswego

State

IL

ZIP Code

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M 10^MD 13^D

Y 2017 Y

M M

D D

Y N/A Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

1000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 52 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.4169

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2018

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

1000.00

0.00

1000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 10^MD 23^D

Y 2017 Y

M M

D D

Y n/a Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

1000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 53 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.4167

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2018

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

233 Fox Chase Drive North

City

Oswego

State

IL

ZIP Code

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

95.47

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

95.47

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M 10^MD 25^D

Y 2017 Y

M M

D D

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

95.47

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 54 OF 117

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.4569

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2018

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

233 Fox Chase Drive North

City

Oswego

State

IL

ZIP Code

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

3.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 10 M /

D 30 D /

Y 2017 Y

M M /

D D /

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

3.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 55 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.4208

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2018

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

233 Fox Chase Drive North

City

Oswego

State

IL

ZIP Code

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

3500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3500.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 01 M

D 13 D

Y 2018 Y

M M

D D

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

3500.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 56 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.4572

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2018

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

17.00

0.00

17.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 01 M

D 14 D

Y 2018 Y

M M

D D

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

17.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 57 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.4209

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2018

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

233 Fox Chase Drive North

City

Oswego

State

IL

ZIP Code

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

7000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

7000.00

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M 01 M

D 16 D

Y 2018 Y

M M

D D

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

7000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 58 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.4210

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2018

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

233 Fox Chase Drive North

City

Oswego

State

IL

ZIP Code

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M 01 M

D 16 D

Y 2018 Y

M M

D D

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

5000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.4211

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2018

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

17000.00

0.00

17000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 01 M

D 17 D

Y 2018 Y

M M

D D

Y n/a Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

17000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 60 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.4571

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2018

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

233 Fox Chase Drive North

City

Oswego

State

IL

ZIP Code

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

61.48

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

61.48

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 01 M

D 28 D

Y 2018 Y

M M

D D

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

61.48

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.4363

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2018

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

233 Fox Chase Drive North

City

Oswego

State

IL

ZIP Code

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

61.48

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

61.48

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M 02 /

D 28 /

Y 2018 Y

M M /

D D /

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

61.48

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 62 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.4364

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2018

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

50.20

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50.20

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 02 M /

D 28 D /

Y 2018 Y

M M /

D D /

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

50.20

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 63 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.4491

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2018

☐ Primary☒ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

66.19

0.00

66.19

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 03 M

D 01 D

Y 2018 Y

M M

D D

Y n/a Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

66.19

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.4603

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2018

☐ Primary☒ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

200.00

0.00

200.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 09 M

D 11 D

Y 2018 Y

M M

D D

Y n/a Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

200.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.4612

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

233 Fox Chase Drive North

City

Oswego

State

IL

ZIP Code

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

50.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 11 M

D 13 D

Y 2018 Y

M M

D D

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

50.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 66 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.4627

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

233 Fox Chase Drive North

City

Oswego

State

IL

ZIP Code

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

200.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

200.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 03 M

D 16 D

Y 2019 Y

M M

D D

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

200.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.4728

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2020

☐ Primary☒ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

2800.00

0.00

2800.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 05 M

D 14 D

Y 2019 Y

M M

D D

Y n/a Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

2800.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 68 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.4729

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2020

☐ Primary☒ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

550.96

0.00

550.96

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 05 M

D 14 D

Y 2019 Y

M M

D D

Y n/a Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

550.96

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 69 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.4730

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2020

☐ Primary☒ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

46.80

0.00

46.80

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 05 M

D 14 D

Y 2019 Y

M M

D D

Y n/a Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

46.80

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 70 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.4731

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2020

☐ Primary☒ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

37.20

0.00

37.20

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 05 M

D 14 D

Y 2019 Y

M M

D D

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

37.20

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 71 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.4732

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2020

☐ Primary☒ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

80.00

0.00

80.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 05 M

D 15 D

Y 2019 Y

M M

D D

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

80.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 72 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.4629

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2020

☐ Primary☒ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

2000.00

0.00

2000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 05 M

D 17 D

Y 2019 Y

M M

D D

Y n/a Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

2000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 73 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.4733

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2020

☐ Primary☒ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

78.50

0.00

78.50

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 06 M

D 26 D

Y 2019 Y

M M

D D

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

78.50

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 74 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.4661

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2020

☐ Primary☒ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

9000.00

0.00

9000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 06 M

D 28 D

Y 2019 Y

M M

D D

Y n/a Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

9000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 75 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.5547

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2020

☐ Primary☒ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

999.00

0.00

999.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 03 M

D 11 D

Y 2020 Y

M M

D D

Y n/a Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

999.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 76 OF 117

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.5594

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2020

☐ Primary☒ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

3800.00

0.00

3800.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 03 M /

D 25 D /

Y 2020 Y

M M /

D D /

Y n/a Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

3800.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 77 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.5477

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2020

☐ Primary☒ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

3472.86

0.00

3472.86

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 03^MD 30^D

Y 2020 Y

M M

D D

Y n/a Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

3472.86

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 78 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.5614

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

424.50

0.00

424.50

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 01 M

D 31 D

Y 2021 Y

M M

D D

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

424.50

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 79 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.5615

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

233 Fox Chase Drive North

City

Oswego

State

IL

ZIP Code

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

425.50

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

425.50

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M 03 M /

D 01 D /

Y 2021 Y

M M /

D D /

Y n/a Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

425.50

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 80 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6172

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

1.00

0.00

1.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 04 M

D 02 D

Y 2021 Y

M M

D D

Y n/a Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

1.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 81 OF 117

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6165

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

109.84

0.00

109.84

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 04 M /

D 05 D /

Y 2021 Y

M M /

D D /

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

109.84

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 82 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6166

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

233 Fox Chase Drive North

City

Oswego

State

IL

ZIP Code

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

26.89

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

26.89

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 04 M

D 10 D

Y 2021 Y

M M

D D

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

26.89

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 83 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6220

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2021

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

424.50

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

424.50

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 05 M

D 01 D

Y 2021 Y

M M

D D

Y n/a Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

424.50

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6222

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

21.97

0.00

21.97

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 05 M

D 01 D

Y 2021 Y

M M

D D

Y n/a Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

21.97

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 85 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6173

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

26.89

0.00

26.89

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 05 M

D 09 D

Y 2021 Y

M M

D D

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

26.89

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6188

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

233 Fox Chase Drive North

City

Oswego

State

IL

ZIP Code

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100.00

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M 05 M

D 12 D

Y 2021 Y

M M

D D

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

100.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 87 OF 117

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6221

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2021

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

233 Fox Chase Drive North

City

Oswego

State

IL

ZIP Code

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

594.30

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

594.30

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M 05 M

D 31 D

Y 2021 Y

M M

D D

Y n/a Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

594.30

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 88 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6189

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

31.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

31.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 06 M /

D 04 D /

Y 2021 Y

M M /

D D /

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

31.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 89 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6176

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

26.89

0.00

26.89

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 06 M

D 09 D

Y 2021 Y

M M

D D

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

26.89

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 90 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6190

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

50.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 06 M

D 22 D

Y 2021 Y

M M

D D

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

50.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 91 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6191

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

11.29

0.00

11.29

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 06 M

D 30 D

Y 2021 Y

M M

D D

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

11.29

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 92 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6607

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

549.00

0.00

549.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 07 M

D 01 D

Y 2021 Y

M M

D D

Y na Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

549.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 93 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6608

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

120.45

0.00

120.45

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 07 M

D 08 D

Y 2021 Y

M M

D D

Y na Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

120.45

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 94 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6610

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

549.00

0.00

549.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 07 M

D 31 D

Y 2021 Y

M M

D D

Y na Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

549.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 95 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6612

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

549.00

0.00

549.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 08 M

D 31 D

Y 2021 Y

M M

D D

Y na Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

549.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 96 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6606

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

25.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 09

D 08

Y 2021 Y

M M

D D

Y n/a Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

25.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 97 OF 117

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6613

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

233 Fox Chase Drive North

City

Oswego

State

IL

ZIP Code

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

26.89

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

26.89

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 09 M

D 09 D

Y 2021 Y

M M

D D

Y na Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

26.89

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 98 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6614

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

233 Fox Chase Drive North

City

Oswego

State

IL

ZIP Code

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

549.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

549.00

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M 09 M

D 30 D

Y

2021

Y

M M

D D

Y

na

Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

549.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 99 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6687

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

104.84

0.00

104.84

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 10^MD 12^D

Y 2021 Y

M M

D D

Y n/a Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

104.84

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 100 OF 117

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6698

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

207.00

0.00

207.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 10^MD 21^D

Y 2021 Y

M M

D D

Y n/a Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

207.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 101 OF 117

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6707

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

233 Fox Chase Drive North

City

Oswego

State

IL

ZIP Code

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

240.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

240.00

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M 11 M

D 11 D

Y 2021 Y

M M

D D

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

240.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 102 OF 117

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6711

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

251.35

0.00

251.35

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 11 M /

D 11 D /

Y 2021 Y

M M /

D D /

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

251.35

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 103 OF 117

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6686

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

233 Fox Chase Drive North

City

Oswego

State

IL

ZIP Code

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

73.85

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

73.85

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M 11 M

D 30 D

Y 2021 Y

M M

D D

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

73.85

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 104 OF 117

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6701

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

549.00

0.00

549.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 12^MD 01^DY 2021^Y

M M

D D

Y 0.00^Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

549.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 105 OF 117

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6699

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

233 Fox Chase Drive North

City

Oswego

State

IL

ZIP Code

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

97.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

97.00

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M 12^MD 05^DY 2021^Y

M M

D D

Y n/a^Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

97.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 106 OF 117

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6706

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

150.00

0.00

150.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 12^MD 10^D

Y 2021 Y

M M

D D

Y n/a Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

150.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 107 OF 117

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6702

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

233 Fox Chase Drive North

City

Oswego

State

IL

ZIP Code

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

549.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

549.00

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M 12^MD 31^D

Y 2021 Y

M M

D D

Y n/a Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

549.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 108 OF 117

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.7200

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

233 Fox Chase Drive North

City

Oswego

State

IL

ZIP Code

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

18.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

18.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 01 M

D 08 D

Y 2022 Y

M M

D D

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

18.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 109 OF 117

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.7270

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

549.00

0.00

549.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 03 M

D 01 D

Y 2022 Y

M M

D D

Y n/a Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

549.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 110 OF 117

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.7263

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

875.16

0.00

875.16

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 03 M

D 21 D

Y 2022 Y

M M

D D

Y n/a Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

875.16

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 111 OF 117

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.7275

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

233 Fox Chase Drive North

City

Oswego

State

IL

ZIP Code

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

4321.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

4321.00

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M 03 M

D 22 D

Y 2022 Y

M M

D D

Y n/a Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

4321.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 112 OF 117

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.7268

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

233 Fox Chase Drive North

City

Oswego

State

IL

ZIP Code

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

9.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

9.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 03^MD 24^D

Y 2022 Y

M M

D D

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

9.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 113 OF 117

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.7276

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

752.52

0.00

752.52

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 03^MD 27^D

Y 2022 Y

M M

D D

Y n/a Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

752.52

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 114 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.7159

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

233 Fox Chase Drive North

City

Oswego

State

IL

ZIP Code

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

7500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

7500.00

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M 03 M

D 30 D

Y 2022 Y

M M

D D

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

7500.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 115 OF 117

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.7280

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

549.00

0.00

549.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 03^MD 30^D

Y 2022 Y

M M

D D

Y n/a Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

549.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 116 OF 117

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.7281

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter, James, Thomas, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

417.85

0.00

417.85

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 03 M

D 31 D

Y 2022 Y

M M

D D

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

417.85

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 117 OF 117

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Marter for Congress

Transaction ID : SC/10.6700

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Marter for Congress

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
233 Fox Chase Drive North

City

State

ZIP Code

Oswego

IL

60543

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

549.00

0.00

549.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 10 M /

D 31 D /

Y 2021 Y

M M /

D D /

Y n/a Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

549.00

TOTALS This Period (last page in this line only).....▶

81761.04

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.