



## SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**Marter for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2026 To: M M / D D / Y Y Y Y 02 / 25 / 2026

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	19841.24	85252.13
(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)) .....	19841.24	85252.13
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	14362.43	55616.74
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	14362.43	55616.74
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>	<b>33920.25</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<b>31597.47</b>	

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov).**

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**Marter for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	15450.00	66095.00
(ii) Unitemized.....	4391.24	19057.13
(iii) TOTAL of contributions from individuals ▶	19841.24	85152.13
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	100.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	19841.24	85252.13
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	95.48	238.70
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	95.48	238.70
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	19936.72	85490.83

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

**II. DISBURSEMENTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	14362.43	55616.74
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	9712.47
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	9712.47
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 .....	495.00	5831.61
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	14857.43	71160.82

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	28840.96
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	19936.72
25. SUBTOTAL (add Line 23 and Line 24).....	48777.68
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	14857.43
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	33920.25

**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 5 OF 73	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)  
**Marter for Congress**

Full Name (Last, First, Middle Initial) Beary, Rod, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 03 / 2026	
Mailing Address 2226 Roth Road			<b>Transaction ID : SA11AI.11357</b>	
City Oswego	State IL	Zip Code 60543	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Contribution	
Name of Employer Retired		Occupation Retired	<input type="checkbox"/> Memo Item Contribution	
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 250.00		

Full Name (Last, First, Middle Initial) Bieber, Albert, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 29 / 2026	
Mailing Address PO Box 270			<b>Transaction ID : SA11AI.11353</b>	
City China	State TX	Zip Code 77613	Amount of Each Receipt this Period _____ 350.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Contribution	
Name of Employer Retired		Occupation Retired	<input type="checkbox"/> Memo Item Contribution	
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 3150.00		

Full Name (Last, First, Middle Initial) Bieber, Albert, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 11 / 2026	
Mailing Address PO Box 270			<b>Transaction ID : SA11AI.11374</b>	
City China	State TX	Zip Code 77613	Amount of Each Receipt this Period _____ 350.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Contribution	
Name of Employer Retired		Occupation Retired	<input type="checkbox"/> Memo Item Contribution	
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 3500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 750.00
<b>TOTAL</b> 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 6 OF 73	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Marter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
Boyle, Robert, , ,

Mailing Address 915 Raleigh Rd

City Glenview	State IL	Zip Code 60025
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FEC ID number of contributing federal political committee.

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

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11395**

Amount of Each Receipt this Period

Memo Item  
Contribution

**B.** Full Name (Last, First, Middle Initial)  
Carpenter, Dorothy, , ,

Mailing Address 1505 Donegal Dr

City Normal	State IL	Zip Code 61761
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FEC ID number of contributing federal political committee.

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

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11460**

Amount of Each Receipt this Period

Memo Item  
Contribution

**C.** Full Name (Last, First, Middle Initial)  
Chlebek, Casimer, , ,

Mailing Address 1270 Kurtis Lane

City Lake Forest	State IL	Zip Code 60045
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FEC ID number of contributing federal political committee.

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

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11447**

Amount of Each Receipt this Period

Memo Item  
Contribution

**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 7 OF 73	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Marter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
Dupps, John, , ,

Mailing Address 4968 Timberline Dr

City Middletown	State OH	Zip Code 45042
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

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

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11434**

Amount of Each Receipt this Period

Memo Item  
Contribution

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

Mailing Address 478 Kelly Ave

City Yorkville	State IL	Zip Code 60560
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FEC ID number of contributing federal political committee.

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

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11333**

Amount of Each Receipt this Period

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.

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

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11366**

Amount of Each Receipt this Period

Memo Item  
Contribution

**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: PAGE 8 OF 73  
(check only one)  
 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)  
Entwistle, Andrew, , ,

Mailing Address 2902 Oak Park Dr

City Autin State TX Zip Code 78704

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Businessman

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 28 / 2026

Transaction ID : SA11AI.11348

Amount of Each Receipt this Period  
250.00

Memo Item Contribution

**B.** Full Name (Last, First, Middle Initial)  
Estrada, Ray, , ,

Mailing Address PO Box 1614

City Galesburg State IL Zip Code 61402

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 02 / 2026

Transaction ID : SA11AI.11449

Amount of Each Receipt this Period  
500.00

Memo Item Contribution

**C.** Full Name (Last, First, Middle Initial)  
Hayden, Agnes, , ,

Mailing Address 929 Peninsula Dr

City Traverse City State MI Zip Code 49686

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2150.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 27 / 2026

Transaction ID : SA11AI.11438

Amount of Each Receipt this Period  
300.00

Memo Item Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1050.00

**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 9 OF 73	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Marter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
Hughart, Lyle, , ,

Mailing Address 15515 Dan Patch Dr

City Plainfield	State IL	Zip Code 60544
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FEC ID number of contributing federal political committee.

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

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11462**

Amount of Each Receipt this Period

Memo Item  
Contribution

**B.** Full Name (Last, First, Middle Initial)  
Kozlowski, Paul, , ,

Mailing Address 11142 S Campbell Ave

City Chicago	State IL	Zip Code 60655
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FEC ID number of contributing federal political committee.

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

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11433**

Amount of Each Receipt this Period

Memo Item  
Contribution

**C.** Full Name (Last, First, Middle Initial)  
Krempski, Mike, , ,

Mailing Address 6790 Minkler Rd

City Yorkville	State IL	Zip Code 60560
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FEC ID number of contributing federal political committee.

Name of Employer Mead Electric	Occupation Electrician
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Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11421**

Amount of Each Receipt this Period

Memo Item  
Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1400.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

# 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 10 OF 73	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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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
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FEC ID number of contributing federal political committee.

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

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11439**

Amount of Each Receipt this Period

Memo Item  
Contribution

**B.** Full Name (Last, First, Middle Initial)  
Langston, Larry, , ,

Mailing Address 4032 E 2351st Road

City Serena	State IL	Zip Code 60549
----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

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

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11413**

Amount of Each Receipt this Period

Memo Item  
Contribution

**C.** Full Name (Last, First, Middle Initial)  
Lowry, David, , ,

Mailing Address 1440 W Greenbriar Drive

City Mount Prospect	State IL	Zip Code 60056
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FEC ID number of contributing federal political committee.

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

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11430**

Amount of Each Receipt this Period

Memo Item  
Contribution

**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 11 OF 73	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Marter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
Maple, Ralph, , ,

Mailing Address 3702 Sunset Blvd

City Houston	State TX	Zip Code 77005
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 02 / 2026

**Transaction ID : SA11AI.11441**

Amount of Each Receipt this Period  
250.00

Memo Item  
Contribution

**B.** Full Name (Last, First, Middle Initial)  
Marzano, William, , , Sr.

Mailing Address 2941 Trillium Ct E

City Aurora	State IL	Zip Code 60506
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 05 / 2026

**Transaction ID : SA11AI.11406**

Amount of Each Receipt this Period  
250.00

Memo Item  
Contribution

**C.** Full Name (Last, First, Middle Initial)  
McFadden, Carol, , ,

Mailing Address 929 Wesleyan Street

City Houston	State TX	Zip Code 77027
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Manufacturing
--------------------------	-----------------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 20 / 2026

**Transaction ID : SA11AI.11341**

Amount of Each Receipt this Period  
2500.00

Memo Item  
Contribution

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

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

3000.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 73  
(check only one)  
 11a 12  11b 13a  11c 13b  11d 14  15

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NAME OF COMMITTEE (In Full)  
**Marter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
Morrisey, 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: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 650.00

Date of Receipt: 01 / 05 / 2026

Transaction ID : SA11AI.11423

Amount of Each Receipt this Period: 100.00

Memo Item Contribution

**B.** Full Name (Last, First, Middle Initial)  
Morrisey, 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: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 750.00

Date of Receipt: 02 / 10 / 2026

Transaction ID : SA11AI.11455

Amount of Each Receipt this Period: 100.00

Memo Item Contribution

**C.** Full Name (Last, First, Middle Initial)  
Morrisey, 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: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 800.00

Date of Receipt: 02 / 17 / 2026

Transaction ID : SA11AI.11472

Amount of Each Receipt this Period: 50.00

Memo Item Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 250.00

**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: PAGE 13 OF 73  
(check only one)  
 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)  
Oelke, Melissa, , ,

Mailing Address 904 9th Street Court East

City: Andalusia State: IL Zip Code: 61232

FEC ID number of contributing federal political committee: C

Name of Employer: Self Occupation: Self

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 250.00

Date of Receipt: 01 / 27 / 2026

Transaction ID : SA11AI.11437

Amount of Each Receipt this Period: 250.00

Memo Item Contribution

**B.** Full Name (Last, First, Middle Initial)  
Peck, John, , ,

Mailing Address 5940 Watson Ave

City: Dallas State: TX Zip Code: 75225

FEC ID number of contributing federal political committee: C

Name of Employer: Retired Occupation: Retired

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 3500.00

Date of Receipt: 02 / 09 / 2026

Transaction ID : SA11AI.11372

Amount of Each Receipt this Period: 3500.00

Memo Item Contribution

**C.** Full Name (Last, First, Middle Initial)  
Pillai, Rajesh, , ,

Mailing Address 13442 South Sunflower Ct

City: Plainfield State: IL Zip Code: 60585

FEC ID number of contributing federal political committee: C

Name of Employer: Harmer Occupation: Business Development Director

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 400.00

Date of Receipt: 02 / 24 / 2026

Transaction ID : SA11AI.11399

Amount of Each Receipt this Period: 250.00

Memo Item Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4000.00

**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 14 OF 73
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Marter for Congress**

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

Mailing Address 2601 Caliendo Cir

City Montgomery	State IL	Zip Code 60538
--------------------	-------------	-------------------

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

Name of Employer CME Group	Occupation Risk Analyst
-------------------------------	----------------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 02 / 2026

**Transaction ID : SA11AI.11330**

Amount of Each Receipt this Period  
250.00

Memo Item  
Contribution

**B.** Full Name (Last, First, Middle Initial)  
Radcliffe, Danetta, , ,

Mailing Address 806 Thomas Dr

City Morris	State IL	Zip Code 60450
----------------	-------------	-------------------

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

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

Receipt For: 2026  
 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 / 2026

**Transaction ID : SA11AI.11410**

Amount of Each Receipt this Period  
500.00

Memo Item  
Contribution

**C.** Full Name (Last, First, Middle Initial)  
Radnitzer, Karl, , ,

Mailing Address 1189 county Road 800 E

City Champaign	State IL	Zip Code 61822
-------------------	-------------	-------------------

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

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

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 06 / 2026

**Transaction ID : SA11AI.11367**

Amount of Each Receipt this Period  
250.00

Memo Item  
Contribution

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

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

1000.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 OF 73  
(check only one)  
 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)  
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: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 250.00

Date of Receipt: 02 / 18 / 2026

Transaction ID : SA11AI.11393

Amount of Each Receipt this Period: 50.00

Memo Item Contribution

**B.** Full Name (Last, First, Middle Initial)  
Smith, Larry, , ,

Mailing Address 270 Easy St

City: Somonauk State: IL Zip Code: 60552

FEC ID number of contributing federal political committee: C

Name of Employer: Retired Occupation: Retired

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 1000.00

Date of Receipt: 01 / 05 / 2026

Transaction ID : SA11AI.11402

Amount of Each Receipt this Period: 500.00

Memo Item Contribution

**C.** Full Name (Last, First, Middle Initial)  
Wehrle, David, , ,

Mailing Address 663 Bell Rd

City: Minooka State: IL Zip Code: 60447

FEC ID number of contributing federal political committee: C

Name of Employer: Retired Occupation: Retired

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 500.00

Date of Receipt: 02 / 25 / 2026

Transaction ID : SA11AI.11400

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) ..... ▶

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

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

FOR LINE NUMBER: PAGE 16 OF 73  
(check only one)  
 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)  
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: 2026  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 23 2026  
Transaction ID : SA11AI.11345  
Amount of Each Receipt this Period  
200.00  
 Memo Item  
Contribution

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	15450.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 OF 73  
(check only one)  
 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: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
190.96

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 10 / 2026

Transaction ID : SA13A.11564

Amount of Each Receipt this Period  
47.74

Memo Item  
Microsoft

**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: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
238.70

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 10 / 2026

Transaction ID : SA13A.11565

Amount of Each Receipt this Period  
47.74

Memo Item  
Microsoft

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	95.48
<b>TOTAL</b> This Period (last page this line number only).....▶	95.48

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Marter for Congress**

Full Name (Last, First, Middle Initial)

**A. 113 Main**

Mailing Address 113 S Main St.

City Oswego State IL Zip Code 60543

Purpose of Disbursement Fundraising Food Category/Type 003

Candidate Name Marter for Congress

Office Sought:  House  Senate  President Disbursement For: 2026  Primary  General  Other (specify) ▼

State: IL District: 14

Date of Disbursement: 02 / 05 / 2026

FEC Identification Number: C C00657361

Amount of Each Disbursement this Period: 304.74

Transaction ID : SB17.11548

Memo Item

Full Name (Last, First, Middle Initial)

**B. Amazon**

Mailing Address 410 Terry Ave

City Seattle State WA Zip Code 98109

Purpose of Disbursement Supplies Category/Type 006

Candidate Name Marter for Congress

Office Sought:  House  Senate  President Disbursement For: 2026  Primary  General  Other (specify) ▼

State: IL District: 14

Date of Disbursement: 01 / 28 / 2026

FEC Identification Number: C C00657361

Amount of Each Disbursement this Period: 259.96

Transaction ID : SB17.11503

Memo Item

Full Name (Last, First, Middle Initial)

**C. Amazon**

Mailing Address 410 Terry Ave

City Seattle State WA Zip Code 98109

Purpose of Disbursement Supplies Category/Type 006

Candidate Name Marter for Congress

Office Sought:  House  Senate  President Disbursement For: 2026  Primary  General  Other (specify) ▼

State: IL District: 14

Date of Disbursement: 01 / 29 / 2026

FEC Identification Number: C C00657361

Amount of Each Disbursement this Period: 9.75

Transaction ID : SB17.11504

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 574.45

**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 Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Marter for Congress**

**A. Chefitzyourpalate**

Full Name (Last, First, Middle Initial)

Mailing Address 502 Suite A, 1st Street

City LaSalle State IL Zip Code 61301

Purpose of Disbursement Fundraising Food Category/Type 003

Candidate Name Marter for Congress

Office Sought:  House  Senate  President Disbursement For: 2026  Primary  General  Other (specify) ▼

State: IL District: 14

Date of Disbursement: 01 / 30 / 2026

FEC Identification Number: C C00657361

Amount of Each Disbursement this Period: 242.75

Transaction ID : SB17.11507

Memo Item

**B. Chefitzyourpalate**

Full Name (Last, First, Middle Initial)

Mailing Address 502 Suite A, 1st Street

City LaSalle State IL Zip Code 61301

Purpose of Disbursement Fundraiser Food Category/Type 003

Candidate Name Marter for Congress

Office Sought:  House  Senate  President Disbursement For: 2026  Primary  General  Other (specify) ▼

State: IL District: 14

Date of Disbursement: 02 / 01 / 2026

FEC Identification Number: C C00657361

Amount of Each Disbursement this Period: 30.00

Transaction ID : SB17.11519

Memo Item

**C. Colasante, Christa, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 4171 Lobo Ln

City Naperville State IL Zip Code 60564

Purpose of Disbursement December 2025 work Category/Type 001

Candidate Name Marter for Congress

Office Sought:  House  Senate  President Disbursement For: 2026  Primary  General  Other (specify) ▼

State: IL District: 14

Date of Disbursement: 01 / 02 / 2026

FEC Identification Number: C C00657361

Amount of Each Disbursement this Period: 300.00

Transaction ID : SB17.11479

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 572.75

**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 Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Marter for Congress**

**A. Colasante, Christa, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 4171 Lobo Ln

City Naperville State IL Zip Code 60564

Purpose of Disbursement Jan 2026 Category/Type 001

Candidate Name Marter for Congress

Office Sought:  House  Senate  President Disbursement For: 2026  Primary  General  Other (specify) ▼

State: IL District: 14

Date of Disbursement 02 / 01 / 2026

FEC Identification Number C C00657361

Amount of Each Disbursement this Period 2000.00

Transaction ID : SB17.11518

Memo Item

**B. Concerned Parents**

Full Name (Last, First, Middle Initial)

Mailing Address 212 N Clay St

City Hinsdale State IL Zip Code 60521

Purpose of Disbursement Dinner Category/Type 007

Candidate Name Marter for Congress

Office Sought:  House  Senate  President Disbursement For: 2026  Primary  General  Other (specify) ▼

State: IL District: 14

Date of Disbursement 01 / 13 / 2026

FEC Identification Number C C00657361

Amount of Each Disbursement this Period 350.00

Transaction ID : SB17.11486

Memo Item

**C. Constant Contact**

Full Name (Last, First, Middle Initial)

Mailing Address 1601 Trapelo Road Suite 329

City Waltham State MA Zip Code 02451

Purpose of Disbursement Email Marketing Category/Type 004

Candidate Name Marter for Congress

Office Sought:  House  Senate  President Disbursement For: 2026  Primary  General  Other (specify) ▼

State: IL District: 14

Date of Disbursement 01 / 29 / 2026

FEC Identification Number C C00657361

Amount of Each Disbursement this Period 227.00

Transaction ID : SB17.11505

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 2577.00

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 73			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Marter for Congress**

Full Name (Last, First, Middle Initial)

**A. Constant Contact**

Mailing Address 1601 Trapelo Road Suite 329

City Waltham State MA Zip Code 02451

Purpose of Disbursement Email Marketing Category/Type 004

Candidate Name Marter for Congress

Office Sought:  House  Senate  President Disbursement For: 2026  Primary  General  Other (specify) ▼

State: IL District: 14

Date of Disbursement 02 / 24 / 2026

FEC Identification Number C C00657361

Amount of Each Disbursement this Period 227.00

Transaction ID : SB17.11561

Memo Item

Full Name (Last, First, Middle Initial)

**B. Edgebrook Golf Club**

Mailing Address 2100 Suydam Rd

City Sandwich State IL Zip Code 60548

Purpose of Disbursement Fundraiser, Food Category/Type 003

Candidate Name Marter for Congress

Office Sought:  House  Senate  President Disbursement For: 2026  Primary  General  Other (specify) ▼

State: IL District: 14

Date of Disbursement 01 / 05 / 2026

FEC Identification Number C C00657361

Amount of Each Disbursement this Period 538.88

Transaction ID : SB17.11475

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook**

Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement Ads Category/Type 004

Candidate Name Marter for Congress

Office Sought:  House  Senate  President Disbursement For: 2026  Primary  General  Other (specify) ▼

State: IL District: 14

Date of Disbursement 01 / 02 / 2026

FEC Identification Number C C00657361

Amount of Each Disbursement this Period 379.79

Transaction ID : SB17.11474

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 1145.67

**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 Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Marter for Congress**

Full Name (Last, First, Middle Initial) <b>A. Facebook</b>		Date of Disbursement MM / DD / YYYY 02 / 02 / 2026
Mailing Address 1 Hacker Way		FEC Identification Number C 00657361
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement Ads	Category/ Type 004	Amount of Each Disbursement this Period 175.83
Candidate Name Marter for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: IL District: 14	Transaction ID : SB17.11534 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Hurst &amp; Associates, Inc.</b>		Date of Disbursement MM / DD / YYYY 01 / 06 / 2026
Mailing Address 1 Forest View Dr.		FEC Identification Number C 00657361
City Hawthorn Woods	State IL	Zip Code 60047
Purpose of Disbursement Digital Marketin	Category/ Type 004	Amount of Each Disbursement this Period 18.00
Candidate Name Marter for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: IL District: 14	Transaction ID : SB17.11480 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Hurst &amp; Associates, Inc.</b>		Date of Disbursement MM / DD / YYYY 01 / 06 / 2026
Mailing Address 1 Forest View Dr.		FEC Identification Number C 00657361
City Hawthorn Woods	State IL	Zip Code 60047
Purpose of Disbursement Digital Marketing	Category/ Type 004	Amount of Each Disbursement this Period 96.04
Candidate Name Marter for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: IL District: 14	Transaction ID : SB17.11481 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	289.87
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Marter for Congress**

Full Name (Last, First, Middle Initial) <b>A. Hurst &amp; Associates, Inc.</b>			Date of Disbursement MM / DD / YYYY 02 / 02 / 2026	
Mailing Address 1 Forest View Dr.			FEC Identification Number C 00657361	
City Hawthorn Woods	State IL	Zip Code 60047	Amount of Each Disbursement this Period 5.25	
Purpose of Disbursement Digital Marketing		Category/ Type 004	Transaction ID : SB17.11540	
Candidate Name Marter for Congress		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: IL District: 14				

Full Name (Last, First, Middle Initial) <b>B. Hurst &amp; Associates, Inc.</b>			Date of Disbursement MM / DD / YYYY 02 / 06 / 2026	
Mailing Address 1 Forest View Dr.			FEC Identification Number C 00657361	
City Hawthorn Woods	State IL	Zip Code 60047	Amount of Each Disbursement this Period 30.00	
Purpose of Disbursement Digital Marketing		Category/ Type 004	Transaction ID : SB17.11542	
Candidate Name Marter for Congress		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: IL District: 14				

Full Name (Last, First, Middle Initial) <b>C. Hurst &amp; Associates, Inc.</b>			Date of Disbursement MM / DD / YYYY 02 / 09 / 2026	
Mailing Address 1 Forest View Dr.			FEC Identification Number C 00657361	
City Hawthorn Woods	State IL	Zip Code 60047	Amount of Each Disbursement this Period 26.25	
Purpose of Disbursement Digital Marketing		Category/ Type 004	Transaction ID : SB17.11544	
Candidate Name Marter for Congress		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: IL District: 14				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	61.50
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Marter for Congress**

Full Name (Last, First, Middle Initial) <b>A. Illinois Family Institute</b>		Date of Disbursement MM / DD / YYYY 02 / 23 / 2026
Mailing Address PO Box 876		FEC Identification Number C C00657361
City Tinley Park	State IL	Zip Code 60477
Purpose of Disbursement Conference	Category/ Type 007	Amount of Each Disbursement this Period 150.00
Candidate Name Marter for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: IL District: 14	Transaction ID : SB17.11558 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Illinois State Board of Elections</b>		Date of Disbursement MM / DD / YYYY 01 / 07 / 2026
Mailing Address 2329 S MacArthur Blvd		FEC Identification Number C C00657361
City Springfield	State IL	Zip Code 62704
Purpose of Disbursement Voter Registration	Category/ Type 005	Amount of Each Disbursement this Period 76.69
Candidate Name Marter for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: IL District: 14	Transaction ID : SB17.11482 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Microsoft</b>		Date of Disbursement MM / DD / YYYY 02 / 10 / 2026
Mailing Address One Microsoft Way		FEC Identification Number C C00657361
City Redmond	State WA	Zip Code 98053
Purpose of Disbursement Online Services	Category/ Type 001	Amount of Each Disbursement this Period 47.74
Candidate Name Marter for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: IL District: 14	Transaction ID : SB17.11563 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	274.43
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 73			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Marter for Congress**

Full Name (Last, First, Middle Initial) <b>A. Oswego Chamber of Commerce</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2026		
Mailing Address 73 W Van Buren St			FEC Identification Number C C00657361		
City Oswego	State IL	Zip Code 60543	Amount of Each Disbursement this Period 185.00		
Purpose of Disbursement Business Expo		Category/ Type 007	Transaction ID : SB17.11478		
Candidate Name Marter for Congress		Memo Item <input type="checkbox"/>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: IL	District: 14				

Full Name (Last, First, Middle Initial) <b>B. Premier Mailing</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2026		
Mailing Address 37 Stone Hill Unit D			FEC Identification Number C C00657361		
City Oswego	State IL	Zip Code 60543	Amount of Each Disbursement this Period 1436.64		
Purpose of Disbursement Postcards		Category/ Type 006	Transaction ID : SB17.11509		
Candidate Name Marter for Congress		Memo Item <input type="checkbox"/>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: IL	District: 14				

Full Name (Last, First, Middle Initial) <b>C. Premier Mailing</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2026		
Mailing Address 37 Stone Hill Unit D			FEC Identification Number C C00657361		
City Oswego	State IL	Zip Code 60543	Amount of Each Disbursement this Period 604.88		
Purpose of Disbursement Printing		Category/ Type 006	Transaction ID : SB17.11511		
Candidate Name Marter for Congress		Memo Item <input type="checkbox"/>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: IL	District: 14				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2226.52
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Marter for Congress**

Full Name (Last, First, Middle Initial)

**A. Premier Mailing**

Mailing Address 37 Stone Hill  
Unit D

City Oswego State IL Zip Code 60543

Purpose of Disbursement Flyers Category/Type 006

Candidate Name Marter for Congress

Office Sought:  House  Senate  President  
Disbursement For: 2026  Primary  General  Other (specify) ▼  
State: IL District: 14

Date of Disbursement 02 / 04 / 2026

FEC Identification Number C C00657361

Amount of Each Disbursement this Period 604.88

Transaction ID : SB17.11536

Memo Item

Full Name (Last, First, Middle Initial)

**B. Premier Mailing**

Mailing Address 37 Stone Hill  
Unit D

City Oswego State IL Zip Code 60543

Purpose of Disbursement Door Hangers Category/Type 006

Candidate Name Marter for Congress

Office Sought:  House  Senate  President  
Disbursement For: 2026  Primary  General  Other (specify) ▼  
State: IL District: 14

Date of Disbursement 02 / 11 / 2026

FEC Identification Number C C00657361

Amount of Each Disbursement this Period 616.45

Transaction ID : SB17.11538

Memo Item

Full Name (Last, First, Middle Initial)

**C. Spartan Ale House**

Mailing Address 3032 English Rows Ave

City Naperville State IL Zip Code 60564

Purpose of Disbursement Fundraiser Food Category/Type 003

Candidate Name Marter for Congress

Office Sought:  House  Senate  President  
Disbursement For: 2026  Primary  General  Other (specify) ▼  
State: IL District: 14

Date of Disbursement 02 / 16 / 2026

FEC Identification Number C C00657361

Amount of Each Disbursement this Period 145.95

Transaction ID : SB17.11555

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 1367.28

**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 Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Marter for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. TFG LLC</b>		M M / D D / Y Y Y Y 01 / 05 / 2026
Mailing Address 94 Medway St Unit GL		FEC Identification Number
City Povidence	State RI	Zip Code 02906
Purpose of Disbursement Consultant	Category/ Type 001	
Candidate Name Marter for Congress	Amount of Each Disbursement this Period	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District: 14	Transaction ID : SB17.11476	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. TFG LLC</b>		M M / D D / Y Y Y Y 01 / 26 / 2026
Mailing Address 94 Medway St Unit GL		FEC Identification Number
City Povidence	State RI	Zip Code 02906
Purpose of Disbursement Consultant	Category/ Type 001	
Candidate Name Marter for Congress	Amount of Each Disbursement this Period	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District: 14	Transaction ID : SB17.11502	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. TFG LLC</b>		M M / D D / Y Y Y Y 02 / 09 / 2026
Mailing Address 94 Medway St Unit GL		FEC Identification Number
City Povidence	State RI	Zip Code 02906
Purpose of Disbursement Consulting	Category/ Type 001	
Candidate Name Marter for Congress	Amount of Each Disbursement this Period	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District: 14	Transaction ID : SB17.11546	
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1809.00
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 73			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Marter for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. TFG LLC</b>		M M / D D / Y Y Y Y 02 / 17 / 2026
Mailing Address 94 Medway St Unit GL		FEC Identification Number
City Povidence	State RI	Zip Code 02906
Purpose of Disbursement Consultant	Category/ Type 001	
Candidate Name Marter for Congress	Amount of Each Disbursement this Period 848.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District: 14	Transaction ID : SB17.11556 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. The Auditorium Ballroom</b>		M M / D D / Y Y Y Y 01 / 09 / 2026
Mailing Address 109 Wright St		FEC Identification Number
City LaSalle	State IL	Zip Code 61301
Purpose of Disbursement Fundraising, building rental	Category/ Type 003	
Candidate Name Marter for Congress	Amount of Each Disbursement this Period 400.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District: 14	Transaction ID : SB17.11483 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. The Auditorium Ballroom</b>		M M / D D / Y Y Y Y 01 / 30 / 2026
Mailing Address 109 Wright St		FEC Identification Number
City LaSalle	State IL	Zip Code 61301
Purpose of Disbursement Fundrasing drinks	Category/ Type 003	
Candidate Name Marter for Congress	Amount of Each Disbursement this Period 51.60	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District: 14	Transaction ID : SB17.11506 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1299.60
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Marter for Congress**

Full Name (Last, First, Middle Initial) <b>A. Weber, Steve, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2026
Mailing Address 600 E Lincoln Hwy Ste C		FEC Identification Number C C00657361
City New Lenox	State IL	Zip Code 60451
Purpose of Disbursement Accounting Fees	Category/ Type 001	
Candidate Name Marter for Congress	Amount of Each Disbursement this Period 1096.40	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District: 14	Transaction ID : SB17.11520 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Memo Item	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1096.40
<b>TOTAL</b> This Period (last page this line number only).....▶	13294.47

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 73			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Marter for Congress**

Full Name (Last, First, Middle Initial) <b>A. Illinois Freedom Civic Coalition</b>			Date of Disbursement MM / DD / YYYY 01 / 20 / 2026
Mailing Address 1529 46th Avenue Ste 6			FEC Identification Number C C00657361
City Moline	State IL	Zip Code 61265	Amount of Each Disbursement this Period 200.00
Purpose of Disbursement Advertisement		Category/ Type 004	Transaction ID : SB21.11493
Candidate Name Marter for Congress		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: IL District: 14	

Full Name (Last, First, Middle Initial) <b>B. Illinois Freedom Civic Coalition</b>			Date of Disbursement MM / DD / YYYY 02 / 17 / 2026
Mailing Address 1529 46th Avenue Ste 6			FEC Identification Number C C00657361
City Moline	State IL	Zip Code 61265	Amount of Each Disbursement this Period 100.00
Purpose of Disbursement Vendor Table		Category/ Type 007	Transaction ID : SB21.11550
Candidate Name Marter for Congress		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: IL District: 14	

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement MM / DD / YYYY
Mailing Address			FEC Identification Number C
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For:		State: District:	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6609**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2022
Been Verified			<input checked="" type="checkbox"/> Primary
Mailing Address			<input type="checkbox"/> General
307 5th Ave			<input type="checkbox"/> Other (specify) ▼
16th Floor			
City	State	ZIP Code	<input checked="" type="checkbox"/> Personal Funds of the Candidate
New York	NY	10016	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
26.89	0.00	26.89

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y	M M / D D / Y Y Y Y	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	07 / 09 / 2021	na		

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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	26.89
<b>TOTALS</b> 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

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6611**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2022
Been Verified			<input checked="" type="checkbox"/> Primary
Mailing Address			<input type="checkbox"/> General
307 5th Ave			<input type="checkbox"/> Other (specify) ▼
16th Floor			
City	State	ZIP Code	<input checked="" type="checkbox"/> Personal Funds of the Candidate
New York	NY	10016	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
26.89	0.00	26.89

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y	M M / D D / Y Y Y Y	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	08 / 09 / 2021	na		

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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	26.89
<b>TOTALS</b> 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**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.7271**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2022
Keap			<input checked="" type="checkbox"/> Primary
Mailing Address 1260 S. Spectrum Blvd			<input type="checkbox"/> General
City Chandler		State AZ	<input type="checkbox"/> Other (specify) ▼
ZIP Code 85286		<input checked="" type="checkbox"/> 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

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	01 / 31 / 2022	n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	549.00
<b>TOTALS</b> 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**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6189**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> 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
----------------------------------	------------------------------------	--

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 06 / 04 / 2021	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	[ ] 31.00
<b>TOTALS</b> 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

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6176**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> 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

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	06 / 09 / 2021	n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	26.89
<b>TOTALS</b> 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**

NAME OF COMMITTEE (In Full) **Marter for Congress** Transaction ID : **SC/10.6190**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> 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
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<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	06 / 22 / 2021	n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	50.00
<b>TOTALS</b> 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**

NAME OF COMMITTEE (In Full) **Marter for Congress** Transaction ID : **SC/10.6191**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2022
Marter, James, Thomas, ,			<input checked="" type="checkbox"/> Primary
Mailing Address			<input type="checkbox"/> General
233 Fox Chase Drive North			<input type="checkbox"/> Other (specify) ▼
City	State	ZIP Code	<input checked="" type="checkbox"/> Personal Funds of the Candidate
Oswego	IL	60543	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
11.29	0.00	11.29

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	06 / 30 / 2021	n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	11.29
<b>TOTALS</b> 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

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6607**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> 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

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	07 / 01 / 2021	na	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	549.00
<b>TOTALS</b> 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**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6608**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> 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

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	07 / 08 / 2021	na	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	120.45
<b>TOTALS</b> 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**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6610**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> 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

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	07 / 31 / 2021	na	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	549.00
<b>TOTALS</b> 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**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6612**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
<input checked="" type="checkbox"/> 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

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 08 / 31 / 2021	M M / D D / Y Y Y Y na	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	549.00
<b>TOTALS</b> 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**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6606**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
<input checked="" type="checkbox"/> 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
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<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 09 / 08 / 2021	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	[ ] 25.00
<b>TOTALS</b> 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**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6613**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> 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

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 09 / 09 / 2021	M M / D D / Y Y Y Y na	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	26.89
<b>TOTALS</b> 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**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6614**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
City Oswego		<input type="checkbox"/> Other (specify) ▼
State IL	ZIP Code 60543	<input checked="" type="checkbox"/> 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

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	09 / 30 / 2021	na	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	549.00
<b>TOTALS</b> 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

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6687**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> 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

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 10 / 12 / 2021	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	104.84
<b>TOTALS</b> 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**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6698**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
<input checked="" type="checkbox"/> Personal Funds of the Candidate		

Original Amount of Loan 207.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 207.00
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<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 10 / 21 / 2021	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	[ ] 207.00
<b>TOTALS</b> 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

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6707**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> 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
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<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 11 / 11 / 2021	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	[ ] 240.00
<b>TOTALS</b> 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

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6711**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> 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

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	MM / DD / YYYY 11 / 11 / 2021	MM / DD / YYYY n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	251.35
<b>TOTALS</b> 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**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6686**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
City Oswego		<input type="checkbox"/> Other (specify) ▼
State IL	ZIP Code 60543	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
73.85	0.00	73.85

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 11 / 30 / 2021	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	73.85
<b>TOTALS</b> 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**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6701**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> 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

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 12 / 01 / 2021	M M / D D / Y Y Y Y / / 0.00	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	549.00
<b>TOTALS</b> 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**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6699**  
**Marter for Congress**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
<b>Marter, James, Thomas, ,</b>		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> 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
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<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 12 / 05 / 2021	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	97.00
<b>TOTALS</b> 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

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6706**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 150.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 150.00
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<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 12 / 10 / 2021	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	[ ] 150.00
<b>TOTALS</b> 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**

NAME OF COMMITTEE (In Full) **Marter for Congress** Transaction ID : **SC/10.6702**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> 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

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 12 / 31 / 2021	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	549.00
<b>TOTALS</b> 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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.7200

Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

Memo Item

Election: 2022

Marter, James, Thomas, ,

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

18.00

0.00

18.00

TERMS

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

01

08

2022

n/a

n/a

n/a

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

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.7270**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> 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
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<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 03 / 01 / 2022	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	549.00
<b>TOTALS</b> 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

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.7263**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
<input checked="" type="checkbox"/> 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

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 03 / 21 / 2022	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	875.16
<b>TOTALS</b> 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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.7275

Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

Memo Item

Election: 2022

Marter, James, Thomas, ,

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

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:

03

22

2022

n/a

n/a

n/a

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.7268

Marter for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

Memo Item

Election: 2022

Marter, James, Thomas, ,

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

9.00

0.00

9.00

TERMS

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

03 / 24 / 2022

n/a

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

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.7276**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> 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

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 03 / 27 / 2022	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	752.52
<b>TOTALS</b> 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**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.7159**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
<input checked="" type="checkbox"/> Personal Funds of the Candidate		

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
7500.00	0.00	7500.00

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 03 / 30 / 2022	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	7500.00
<b>TOTALS</b> 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

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.7280**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> 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

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 03 / 30 / 2022	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	549.00
<b>TOTALS</b> 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**

NAME OF COMMITTEE (In Full) **Marter for Congress** Transaction ID : **SC/10.7281**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2022
Marter, James, Thomas, ,			<input checked="" type="checkbox"/> Primary
Mailing Address			<input type="checkbox"/> General
233 Fox Chase Drive North			<input type="checkbox"/> Other (specify) ▼
City	State	ZIP Code	<input checked="" type="checkbox"/> Personal Funds of the Candidate
Oswego	IL	60543	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
417.85	0.00	417.85

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y	M M / D D / Y Y Y Y	% (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	03 / 31 / 2022	n/a	0.00	

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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	417.85
<b>TOTALS</b> 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**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.7445**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> 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
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<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 04 / 30 / 2022	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	549.00
<b>TOTALS</b> 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**

NAME OF COMMITTEE (In Full) **Marter for Congress** Transaction ID : **SC/10.7446**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
324.52	0.00	324.52

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 04 / 30 / 2022	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	324.52
<b>TOTALS</b> 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**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.7480**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
City Oswego		<input type="checkbox"/> Other (specify) ▼
State IL	ZIP Code 60543	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 37.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 37.00
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<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 05 / 07 / 2022	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	[ ] 37.00
<b>TOTALS</b> 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**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.7598**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 9345.38	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 9345.38
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<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 06 / 30 / 2022	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	9345.38
<b>TOTALS</b> 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

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.7622**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2022
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 233 Fox Chase Drive North		
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 250.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 250.00
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<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 08 / 15 / 2022	M M / D D / Y Y Y Y n/a	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	[ ] 250.00
<b>TOTALS</b> 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

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.11298**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2026
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 47.74	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 47.74
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<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 10 / 10 / 2025	M M / D D / Y Y Y Y na	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	47.74
<b>TOTALS</b> 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**

NAME OF COMMITTEE (In Full) **Marter for Congress** Transaction ID : **SC/10.11299**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2026
Marter, James, Thomas, ,			<input checked="" type="checkbox"/> Primary
Mailing Address			<input type="checkbox"/> General
233 Fox Chase Drive North			<input type="checkbox"/> Other (specify) ▼
City	State	ZIP Code	<input checked="" type="checkbox"/> Personal Funds of the Candidate
Oswego	IL	60543	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
47.74	0.00	47.74

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y	M M / D D / Y Y Y Y	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	11 / 10 / 2025	na		

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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	47.74
<b>TOTALS</b> 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**

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.11300  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item Marter, James, Thomas, ,		Election: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 233 Fox Chase Drive North		
City Oswego	State IL	ZIP Code 60543
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
47.74	0.00	47.74

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 12 / 10 / 2025	M M / D D / Y Y Y Y na	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: <input style="width: 150px;" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 150px;" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 150px;" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 150px;" type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....▶	<input style="width: 100%;" type="text" value="47.74"/>
<b>TOTALS</b> This Period (last page in this line only) .....▶	<input style="width: 100%;" type="text"/>

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

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.11564**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2026
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
City Oswego		<input type="checkbox"/> Other (specify) ▼
State IL	ZIP Code 60543	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 47.74	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 47.74
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<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 01 / 10 / 2026	M M / D D / Y Y Y Y na	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	47.74
<b>TOTALS</b> 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

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.11565**  
 Marter for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2026
Marter, James, Thomas, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 233 Fox Chase Drive North		<input type="checkbox"/> General
City Oswego		<input type="checkbox"/> Other (specify) ▼
State IL	ZIP Code 60543	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
47.74	0.00	47.74

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 02 / 10 / 2026	M M / D D / Y Y Y Y na	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	47.74
<b>TOTALS</b> 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

NAME OF COMMITTEE (In Full) **Marter for Congress** Transaction ID : **SC/10.6700**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Marter for Congress</b>		<input type="checkbox"/> Memo Item	Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 233 Fox Chase Drive North			
City Oswego	State IL	ZIP Code 60543	<input checked="" type="checkbox"/> 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
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<b>TERMS</b>	Date Incurred M M / D D / Y Y Y Y 10 / 31 / 2021	Date Due M M / D D / Y Y Y Y n/a	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	549.00
<b>TOTALS</b> This Period (last page in this line only).....▶	31597.47

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