PAGE 1 / 20

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An A	authorized Com	mittee		Offic	ce Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRIN		ample: If typing, the the lines.	type <u>1</u>	2FE4M5	
COMMITTEE TO EL	LECT ANN MA	RIE DANIMU	S			
ADDRESS (number and street)	1419 N ARGO	NNE RD				
Chook if different						
Check if different than previously reported. (ACC)	SPOKANE VA	LLEY		\	VA 992	12
2. FEC IDENTIFICATION	NUMBER ▼	CITY ▲		STA	TE 🔺	ZIP CODE ▲
C C00791236		3. IS THIS REPORT	× NEW (N)	OR	AMENDED (A)	STATE ▼ DISTRICT WA 05 U 105
4. TYPE OF REPORT	(Choose One)	(b) 12-Day PRE	-Election Report 1	for the		
(a) Quarterly Reports:		(2) 12 Bay 1112		ioi trio.		
April 15 Quarter	ly Report (Q1)	H	Primary (12P)		General (12G)	Runoff (12R)
July 15 Quarter	lv Report (Q2)	ш	Convention (120	C)	Special (12S)	
	arterly Report (Q3)	Election on	M M / I	D D / Y	YYY	in the State of
January 31 Year	r-End Report (YE)	(c) 30-Day POS	T -Election Report	t for the:		
_			General (30G)		Runoff (30R)	Special (30S)
Termination Rep	oort (TER)	Election on	M M / I	D D / Y	Y Y Y	in the State of
5. Covering Period	M M / D D /	Y Y 2025	through	M M /	30 / Y	Y Y Y 2025
I certify that I have examined Type or Print Name of Trease	DANIMILE A	the best of my kn	owledge and beli	ief it is true,	correct and co	mplete.
Signature of Treasurer	DANIMUS, ANN MARI.	Е, , ,		Date	10 /	29 /
NOTE: Submission of false, en	roneous, or incomple	te information may	subject the person	signing this	Report to the pe	enalties of 52 U.S.C. §30109
Office Use					F	FEC FORM 3

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

,

Write or Type Committee Name

COMMITTEE TO ELECT ANN MARIE DANIMUS

^M09 2025 2025 30 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 1645.00 1646.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 1645.00 1646.00 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 669.95 2574.62 (from Line 17) (b) Total Offsets to Operating 7.55 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 2567.07 669.95 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 935.05 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 13271.52 Schedule C and/or Schedule D).....

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

COMMITTEE TO ELECT ANN MARIE DANIMUS

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
1. CONTRIBUTIONS (other than	loans) FROM:			
(a) Individuals/Persons Othe Political Committees	500.00	500.00		
(i) Itemized (use Schedu	ule A)	7 7		
(ii) Unitemized		1146.00		
(iii) TOTAL of contributio from individuals	4045.00	1646.00		
(b) Political Party Committee	, ,	0.00		
(c) Other Political Committe (such as PACs)	0.00	0.00		
(d) The Candidate(e) TOTAL CONTRIBUTIONS		0.00		
(other than loans) (add Lines 11(a)(iii), (b), ((c), and (d)) 1645.00	1646.00		
2. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00		
3. LOANS:				
(a) Made or Guaranteed by Candidate	0.00	1792.82		
(b) All Other Loans	0.00	0.00		
(c) TOTAL LOANS (add Lines 13(a) and (b))		1792.82		
4. OFFSETS TO OPERATING				
EXPENDITURES (Refunds, Rebates, etc.)	0.00	7.55		
5. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00		
6. TOTAL RECEIPTS (add Line 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page		3446.37		

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 05/2016)

of Disbursements

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	669.95	2574.62
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate	40.00	586.59
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	40.00	586.59
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
1.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	709.95	3161.21
	III. CASH SU	IMMARY	
3.	CASH ON HAND AT BEGINNING OF REPOR	rting period	0.00
4	TOTAL RECEIPTS THIS PERIOD (from Line 1	16, page 3)	1645.00
5.	SUBTOTAL (add Line 23 and Line 24)		1645.00
:6.	TOTAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	709.95
7	CASH ON HAND AT CLOSE OF REPORTING	G PERIOD	935.05

SCHEDULE A (FEC Form 3)

Use separate schedule(s) for each category of the

FOR LINE NUMBER:					PAGE	 5	OF	2	:0
(check only one)									
X	11a		11b		11c	11	d		
	12		13a		13h	14			15

ITEMIZED RECEIPTS **Detailed Summary Page** 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) COMMITTEE TO ELECT ANN MARIE DANIMUS Full Name (Last, First, Middle Initial) Estes, Linda, , , Date of Receipt Mailing Address PO Box 610 12 City State Zip Code Transaction ID: SA11AI.14649 HI 96756 Koloa FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 250.00 Name of Employer Occupation Not Employed Not Employed Memo Item Receipt For: 2026 Election Cycle-to-Date Individual Contribution Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Hofstadter, Douglas, , , Date of Receipt Mailing Address 522 S Ballantine Rd 2025 09 City State Zip Code Transaction ID: SA11AI.14614 Bloomington IN 47401 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Indiana University Professor Memo Item Receipt For: 2026 Election Cycle-to-Date Earmarked ActBlue Contribution > Primary General 250.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) 500.00 SUBTOTAL of Receipts This Page (optional)..... 500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

PAGE 6 OF 20 FOR LINE NUMBER: (check only one) Use separate schedule(s) for each category of the |**X**|11c 11a 11b 11d **Detailed Summary Page** 12 13a 13b 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) COMMITTEE TO ELECT ANN MARIE DANIMUS Full Name (Last, First, Middle Initial) ActBlue Date of Receipt Mailing Address PO Box 441146 13 City State Zip Code Transaction ID: SA11C.14642 MA 02144 West Somerville FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 10.00 Name of Employer Occupation Memo Item Receipt For: 2026 Election Cycle-to-Date Earmarked Contributions 06/29/25 to 07/13/25 Primary General 11.00 Other (specify) Full Name (Last, First, Middle Initial) ActBlue Date of Receipt Mailing Address PO Box 441146 2025 23 City State Zip Code Transaction ID: SA11C.14643 West Somerville MA 02144 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 25.00 Name of Employer Occupation Memo Item Receipt For: 2026 Election Cycle-to-Date Earmarked Contributions 07/13/25 to 07/23/25 | Primary General 36.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) ActBlue Date of Receipt Mailing Address PO Box 441146 09 14 2025 City State Zip Code Transaction ID: SA11C.14644 MA West Somerville 02144 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 725.00 Name of Employer Occupation Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General Earmarked Contributions 07/23/25 to 09/14/25 761 00 Other (specify) 0.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)

PAGE OF 20 FOR LINE NUMBER: (check only one) Use separate schedule(s) for each category of the |**X**|11c 11a 11b 11d **Detailed Summary Page** 12 13a 13b 14

ITEMIZED RECEIPTS 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) COMMITTEE TO ELECT ANN MARIE DANIMUS Full Name (Last, First, Middle Initial) ActBlue Date of Receipt Mailing Address PO Box 441146 21 City State Zip Code Transaction ID: SA11C.14645 MA 02144 West Somerville FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 80.00 Name of Employer Occupation Memo Item Receipt For: 2026 Election Cycle-to-Date Earmarked Contributions 09/14/25 to 09/21/25 Primary General 841.00 Other (specify) Full Name (Last, First, Middle Initial) ActBlue Date of Receipt Mailing Address PO Box 441146 2025 09 24 City State Zip Code Transaction ID: SA11C.14646 West Somerville MA 02144 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation Memo Item Receipt For: 2026 Election Cycle-to-Date Earmarked Contributions 09/21/25 to 09/24/25 | Primary General 941.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) ActBlue Date of Receipt Mailing Address PO Box 441146 09 28 2025 City State Zip Code Transaction ID: SA11C.14647 MA West Somerville 02144 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 290.00 Occupation Name of Employer Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General Earmarked Contributions 09/24/25 to 09/28/25 1231 00 Other (specify) 0.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)

PAGE 8 OF 20 FOR LINE NUMBER: (check only one) Use separate schedule(s) for each category of the |**X**|11c 11a 11b 11d **Detailed Summary Page** 12 13a 13b 14

ITEMIZED RECEIPTS 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) COMMITTEE TO ELECT ANN MARIE DANIMUS Full Name (Last, First, Middle Initial) ActBlue Date of Receipt Mailing Address PO Box 441146 2025 30 City State Zip Code Transaction ID: SA11C.14648 MA 02144 West Somerville FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 165.00 Name of Employer Occupation Memo Item Receipt For: 2026 Election Cycle-to-Date Earmarked Contributions 09/28/25 to 09/30/25 Primary General 1396.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) 0.00 SUBTOTAL of Receipts This Page (optional)..... 0.00

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

SCHEDULE B (FEC Form 3)

20 **PAGE** 9 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c

ITEMIZED DISBURSEMENTS 19b 21 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) COMMITTEE TO ELECT ANN MARIE DANIMUS Full Name (Last, First, Middle Initial) Date of Disbursement A. Weinberg Partners Ltd 2025 09 18 Mailing Address 9205 W Russell Rd City State Zip Code **FEC Identification Number** NV Las Vegas 89148 Purpose of Disbursement C Accounting and Compliance Reporting Services Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 150.00 Office Sought: House Senate Primary General Transaction ID: SB17.14597 Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) B. Weinberg Partners Ltd Date of Disbursement Mailing Address 9205 W Russell Rd 2025 18 09 City State Zip Code **FEC Identification Number** Las Vegas NV 89148 Purpose of Disbursement Accounting and Compliance Reporting Candidate Name Amount of Each Disbursement this Period Category/ Type 212.50 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: SB17.14598 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address State City Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: Disbursement For: House Senate Primary General President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 362.50 TOTAL This Period (last page this line number only)..... 362.50

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

	FOR LIN		PAGE	10	OF	20		
Use separate schedule(s)	(check o							
for each category of the Detailed Summary Page		17		18	×	19a		19b
Detailed Summary Page		20a		20b		20c		21
y not be sold or used by any person for the purpose of soliciting contributions ddress of any political committee to solicit contributions from such committee.								
adreed of any pointed commit	too to oone	or oonenoc	400	10 1101	000	1 0011		<u>.</u>

Any information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ac NAME OF COMMITTEE (In Full) COMMITTEE TO ELECT ANN MARIE DANIMUS Full Name (Last, First, Middle Initial) Date of Disbursement A. DANIMUS, ANN MARIE, , , 09 2025 23 Mailing Address 1419 N. ARGONNE RD. State Zip Code City FEC Identification Number WA SPOKANE VALLEY 99212 Purpose of Disbursement H2WA05097 Loan Repay Candidate Name Amount of Each Disbursement this Period Category/ Type 40.00 Disbursement For: 2026 Office Sought: House Transaction ID: SB19A.14601 Senate Primary General Other (specify) President Memo Item WA 05 State: District: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: Disbursement For: House Senate Primary General President Other (specify) Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Senate General Primary President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 40.00 TOTAL This Period (last page this line number only)..... 40.00

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

PAGE 11 OF FOR LINE NUMBER: **X** | 13a (check only one)

20

13b Transaction ID: SC/10.5842 NAME OF COMMITTEE (In Full) COMMITTEE TO ELECT ANN MARIE DANIMUS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2024 Memo Item Primary DANIMUS, ANN MARIE, , , General Mailing Address Other (specify) 1419 N. ARGONNE RD. State ZIP Code City Personal Funds of the Candidate 99212 WA SPOKANE VALLEY Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 1489.93 1374.09 115.84 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 02 2023 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 115.84 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

PAGE 12 OF

X	13a
	13b

	13b				
NAME OF COMMITTEE (In Full)	Transaction ID : SC/10.6923				
COMMITTEE TO ELECT ANN MARIE DANIMUS					
LOAN SOURCE Full Name (Last, First, Middle Initial)	Memo Item Election: 2024				
DANIMUS, ANN MARIE, , ,	X Primary General				
Mailing Address	Other (specify) ▼				
1419 N. ARGONNE RD.					
City State ZIP C	Porsonal Funds of the Candidate				
SPOKANE VALLEY WA 992	12 Indicate of the canadace				
Original Amount of Loan Cumulative Payment	To Date Balance Outstanding at Close of This Period				
2758.21	0.00 2758.21				
TERMS Date Incurred Date Du	Interest Rate Secured:				
M M / D D / Y Y Y Y M M / D D / Y 2023	YYYY				
	% (apr) Yes X No				
List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial)	Name of Employer				
Mailing Address	Occupation				
	Amount				
City State ZIP Code	Guaranteed Outstanding:				
2. Full Name (Last, First, Middle Initial)	Name of Employer				
Mailing Address	Occupation				
	Amount				
City State ZIP Code	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				
	Amount				
City State ZIP Code	Guaranteed Outstanding:				
SUBTOTALS This Period This Page (optional)	2758.21				
	7 7 7				
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.				

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

PAGE 13 C
FOR LINE NUMBER: (check only one)

X 13a

			Detailed Si	ummary Pag	le	13b	
AME OF COMMITTEE (In Full)				Transac	tion ID : SC/10.6906		
COMMITTEE TO ELECT ANN MARIE	DANIMUS						
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)			Memo Item	Election: 2024		
DANIMUS, ANN MARIE, , ,					Y Primary General		
Mailing Address 1419 N. ARGONNE RD.					Other (specify)		
City	State	ZIP Code					
SPOKANE VALLEY	WA	99212			Personal Funds of the C	andidate	
Original Amount of Loan	Cumulative Pay	yment To D	ate	Bala	nce Outstanding at Close of Th	nis Period	
2300.00	7		1720.00		580	.00	
TERMS Date Incurred	D	ate Due		Interest Rate		:	
M 05	M M / D D	/ Y	YY		% (apr) Yes	X No	
List All Endorsers or Guarantors (if any) t	o Loan Source						
1. Full Name (Last, First, Middle Initial)			Name of Emp	oloyer			
Mailing Address			Occupation				
			Amount				
City	ZIP Code	<u> </u>	Guaranteed Outstanding:		y y x	_	
2. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address		. 1	Occupation				
			Amount Guaranteed			7	
City	ZIP Code	<u> </u>	Outstanding:		9 9		
3. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address			Occupation				
			Amount			7	
City State	ZIP Code		Guaranteed Outstanding:		7 7	_	
4. Full Name (Last, First, Middle Initial)	'		Name of Emp	oloyer			
Mailing Address		- 1	Occupation				
			Amount				
City	ZIP Code		Guaranteed Outstanding:		9 9 9	_	
SUBTOTALS This Period This Page (optional).							
CODICIALO TINO I GIOU TINO PAGE (OPUONAI)					580	UU	
FOTALS This Period (last page in this line only	y)			▶	, , , , ,		
Carry outstanding balance only to LINE 3, Sci	hedule D, for this	s line. If no	Schedule D), carry forw	vard to appropriate line of Su	mmary.	

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

PAGE 14 OF FOR LINE NUMBER: **X** | 13a (check only one)

20

13b Transaction ID: SC/10.6907 NAME OF COMMITTEE (In Full) COMMITTEE TO ELECT ANN MARIE DANIMUS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2024 Memo Item Primary DANIMUS, ANN MARIE, , , General Mailing Address Other (specify) 1419 N. ARGONNE RD. State ZIP Code City Personal Funds of the Candidate 99212 WA SPOKANE VALLEY Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 180.00 0.00 180.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 06 2023 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 180.00 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.

Use separate schedule(s) for each category of the

PAGE 15 OF FOR LINE NUMBER: (check only one)

20

X | 13a Detailed Summary Page 13b Transaction ID: SC/10.6908 NAME OF COMMITTEE (In Full) COMMITTEE TO ELECT ANN MARIE DANIMUS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2024 Memo Item Primary DANIMUS, ANN MARIE, , , General Mailing Address Other (specify) 1419 N. ARGONNE RD. State ZIP Code City Personal Funds of the Candidate 99212 WA SPOKANE VALLEY Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 09 06 2023 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 16
FOR LINE NUMBER: (check only one)

13a

OF

] Detailed ou	iiiiiiaiy i ago	5	13b	
AME OF COMMITTEE (In Full)				•	Transact	ion ID : SC/10.9597		
COMMITTEE TO ELECT ANN								
LOAN SOURCE Full Name (Last, DANIMUS, ANN MARIE,		ddle Initial)		N	Memo Item	Election: 2024 Primary General		
Mailing Address 1419 N. ARGONNE RD.						Other (specify) ▼		
City		State	ZIP Cod	е		Darsonal Funds of the	Condidate	
SPOKANE VALLEY		WA	99212			Personal Funds of the	Candidate	
Original Amount of Loan Cumulative Payment To			Oate 0.00	Balar	nce Outstanding at Close of	This Period 74.65		
TERMS Date Incurred		D	ate Due		nterest Rate f none, enter		d:	
M 11 / D D / Y Y Y 2023	Y	M M / D D	/ Y	YYY			s X No	
List All Endorsers or Guarantors		o Loan Source						
1. Full Name (Last, First, Middle	Initial)			Name of Empl	oyer			
Mailing Address				Occupation				
City	City State ZIP Code			Amount Guaranteed Outstanding:		7		
2. Full Name (Last, First, Middle I	nitial)			Name of Empl	oyer			
Mailing Address				Occupation				
				Amount Guaranteed			\neg	
City	State	ZIP Code		Outstanding:		9 9		
3. Full Name (Last, First, Middle I	nitial)	1		Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:		, ,		
4. Full Name (Last, First, Middle I	nitial)			Name of Employer				
Mailing Address				Occupation				
				Amount				
City	State	ZIP Code		Guaranteed Outstanding:		y y		
SUBTOTALS This Period This Page	(optional)				· [4.65	
FOTALS This Period (last page in the	s line only	/)			<u> </u>	, , , ,		
Carry outstanding balance only to L	INE 3, Sch	nedule D, for this	s line. If n	o Schedule D.	carry forw	ard to appropriate line of S	ummary.	

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

FOR LINE NUMBER: (check only one)

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			Detailed Garrinar	y rage	13b
NAME OF COMMITTEE (In Full)			Tra	nsaction ID : SC/10.12881	
COMMITTEE TO ELECT ANN MARII	E DANIMUS				
LOAN SOURCE Full Name (Last, First, M	iddle Initial)		☐ Memo		
DANIMUS, ANN MARIE, , ,				Primary General	
Mailing Address				Other (specify)	,
1419 N. ARGONNE RD.					
City	State	ZIP Code)		
SPOKANE VALLEY	WA	99212		Personal Funds	of the Candidat
Original Amount of Loan	Cumulative Pa	ayment To D	ate	Balance Outstanding at Cl	ose of This Perio
3870.00			0.00		3870.00
7 7	,	7			
TERMS Date Incurred		Date Due	Interest (If none,	enter 0)	Secured:
04 / D15 / Y Y Y Y Y	M M / D D) / Y Y	YYY	% (apr)	Yes X N
List All Endorsers or Guarantors (if any)	to Loan Source			· · · ·	
Full Name (Last, First, Middle Initial)	10 200 00000		Name of Employer		
Mailing Address			Occupation		
Mailing Address			occupation		
			Amount Guaranteed		
City	ZIP Code		Outstanding:		/W
2. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		(Occupation		
			A		
City State	ZIP Code		Amount Guaranteed		
Gitate	Zii Oodc	(Outstanding:	7	-
3. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		(Occupation		
			Amount		
City State	ZIP Code	(Guaranteed		
			Outstanding:	, , , , , , , , , , , , , , , , , , , ,	
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address		(Occupation		
			Amount		
City	ZIP Code	(Guaranteed		
			Outstanding:	, ,	
SUBTOTALS This Period This Page (optional)			······································		3870.00
TOTALS This Period (last page in this line or	ily)		·····		
Carry outstanding balance only to LINE 3, So	chedule D, for thi	is line. If no	Schedule D, carry	forward to appropriate li	ne of Summarv

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

FOR LINE NUMBER: (check only one)

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	13b

			100
AME OF COMMITTEE (In FU	•	DANIMUS	Transaction ID : SC/10.14581
LOAN SOURCE Full Nan	ne (Last, First, Mic	Idle Initial)	Memo Item Election: 2024
DANIMUS, ANN M	Primary General		
Mailing Address 1419 N. ARGONNE RD.			Other (specify) ▼
City		State	ZIP Code OO212 Personal Funds of the Candida
SPOKANE VALLEY		WA	99212
Original Amount of Loan		Cumulative Pa	yment To Date Balance Outstanding at Close of This Peri
7 7	1697.07		0.00 1697.07
TERMS Date Incurr	ed	Г	Date Due Interest Rate Secured: (If none, enter 0)
01 / 01 /	^Y 2025	M M / D D	/ Y Y Y Y Y W Y Y Y Y Y Y Y Y Y Y Y Y Y
List All Endorsers or Gua	arantors (if any) to	o Loan Source	
1. Full Name (Last, First,	Middle Initial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First,	Middle Initial)		Name of Employer
Mailing Address			Occupation
		T	Amount Guaranteed
City	State	ZIP Code	Outstanding:
3. Full Name (Last, First,	Middle Initial)	'	Name of Employer
Mailing Address			Occupation
		T	Amount Guaranteed
City	State	ZIP Code	Outstanding:
4. Full Name (Last, First,	Middle Initial)	'	Name of Employer
Mailing Address			Occupation
		T	Amount
City	State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period Thi	is Page (optional)		1697.07
FOTALS This Period (last pa	ge in this line only	v)	
Carry outstanding balance of	only to LINE 3, Sch	nedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary

Use separate schedule(s) for each category of the

PAGE 19 OF FOR LINE NUMBER: (check only one)

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X | 13a Detailed Summary Page 13b Transaction ID: SC/10.14589 NAME OF COMMITTEE (In Full) COMMITTEE TO ELECT ANN MARIE DANIMUS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2024 Memo Item Primary DANIMUS, ANN MARIE, , , General Mailing Address Other (specify) 1419 N. ARGONNE RD. State ZIP Code City Personal Funds of the Candidate 99212 WA SPOKANE VALLEY Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 95.75 0.00 95.75 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 2025 04 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 95.75 TOTALS This Period (last page in this line only)..... 10371.52 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3) **DEBTS AND OBLIGATIONS**

Excluding Loans

NAME OF COMMITTEE (In Full)

(Use separate schedule(s) FOR for each (che numbered line)

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R LINE NUMBER:		
eck only one)		9
	X	10

C	COMMITTEE TO ELEC	CT AN	N MARIE DANII	MUS	
	A. Full Name (Last, First, Middle Initial) of D	Nature of Debt (Purpose):			
	Weinberg Partners Ltd			Accounting and compliance	
ŀ	Mailing Address 9205 W Russell Rd				
ŀ	City	State	Zip Code		
ļ	Las Vegas	NV	89148		
	Outstanding Balance Beginning This Period			Transaction ID: SD10.14403	
	2900.00				
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
	0.00		0.00	2900.00	
ŀ	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):	
	Weinberg Partners Ltd		Accounting and Compliance		
ŀ				_	
	Mailing Address 9205 W Russell Rd				
	City Las Vegas	State NV	Zip Code 89148		
ŀ			03140		
	Outstanding Balance Beginning This Period 150.00			Transaction ID : SD10.14591	
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
	0.00		150.00	0.00	
F	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):	
-	Mailing Address				
ļ	O:t	Ctata	7in Codo		
	City	State	Zip Code		
Ī	Outstanding Balance Beginning This Perio				
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
		1 .		1	
	9 9		9 9 9	7 7 7	
1)	SUBTOTALS This Period This Page (optional)			2900.00	
2)	TOTALS This Period (last page this line number only)			2900.00	
3)	3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)			10371.52	
4)	ADD 2) and 3) and carry forward to approp	13271.52			