

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

SCHAKOWSKY 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 03 / 31 / 2026

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	0.00	416412.82
(b) Total Contribution Refunds (from Line 20(d))	2000.00	5125.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	- 2000.00	411287.82
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	92430.90	706192.72
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	509.38
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	92430.90	705683.34
8. Cash on Hand at Close of Reporting Period (from Line 27)	327698.85	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

SCHAKOWSKY FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	248885.16
(ii) Unitemized	0.00	78876.66
(iii) TOTAL of contributions from individuals	0.00	327761.82
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	88651.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	416412.82
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	509.38
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	649.73
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	0.00	417571.93

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.....	92430.90	706192.72
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	2000.00	4125.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2000.00	5125.00
21. OTHER DISBURSEMENTS	15900.00	280578.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	110330.90	991895.72

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	438029.75
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	438029.75
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	110330.90
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	327698.85

**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 5 OF 29			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 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)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. ADP		M M / D D / Y Y Y Y 01 / 14 / 2026	
Mailing Address 100 N. Northwest Pt. Road		FEC Identification Number	
City Elk Grove Village	State IL	Zip Code 60007	C
Purpose of Disbursement Payroll Taxes		Category/ Type	Amount of Each Disbursement this Period
Candidate Name			16862.10
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) ▼		Transaction ID : SB17.26182
State: District:			<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. ADP		M M / D D / Y Y Y Y 01 / 16 / 2026	
Mailing Address 100 N. Northwest Pt. Road		FEC Identification Number	
City Elk Grove Village	State IL	Zip Code 60007	C
Purpose of Disbursement Payroll Processing Fees		Category/ Type	Amount of Each Disbursement this Period
Candidate Name			168.40
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) ▼		Transaction ID : SB17.26188
State: District:			<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. ADP		M M / D D / Y Y Y Y 01 / 20 / 2026	
Mailing Address 100 N. Northwest Pt. Road		FEC Identification Number	
City Elk Grove Village	State IL	Zip Code 60007	C
Purpose of Disbursement Payroll Taxes		Category/ Type	Amount of Each Disbursement this Period
Candidate Name			307.88
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) ▼		Transaction ID : SB17.26191
State: District:			<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	17338.38
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 6 OF 29	
	<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)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. ADP		M M / D D / Y Y Y Y 01 / 30 / 2026
Mailing Address 100 N. Northwest Pt. Road		FEC Identification Number
City Elk Grove Village	State IL	Zip Code 60007
Purpose of Disbursement Payroll Taxes	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:	1770.67	
		Transaction ID : SB17.26198
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. ADP		M M / D D / Y Y Y Y 01 / 30 / 2026
Mailing Address 100 N. Northwest Pt. Road		FEC Identification Number
City Elk Grove Village	State IL	Zip Code 60007
Purpose of Disbursement Payroll Processing Fees	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:	158.92	
		Transaction ID : SB17.26200
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. ADP		M M / D D / Y Y Y Y 02 / 04 / 2026
Mailing Address 100 N. Northwest Pt. Road		FEC Identification Number
City Elk Grove Village	State IL	Zip Code 60007
Purpose of Disbursement Payroll Processing Fees	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:	101.70	
		Transaction ID : SB17.26215
		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	2031.29
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 7 OF 29			
	<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)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. ADP		M M / D D / Y Y Y Y 02 / 12 / 2026	
Mailing Address 100 N. Northwest Pt. Road		FEC Identification Number	
City Elk Grove Village	State IL	Zip Code 60007	C
Purpose of Disbursement Payroll Taxes		Category/ Type	Amount of Each Disbursement this Period
Candidate Name			1170.92
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) ▼		Transaction ID : SB17.26220
State: District:			<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. ADP		M M / D D / Y Y Y Y 02 / 20 / 2026	
Mailing Address 100 N. Northwest Pt. Road		FEC Identification Number	
City Elk Grove Village	State IL	Zip Code 60007	C
Purpose of Disbursement Payroll Processing Fees		Category/ Type	Amount of Each Disbursement this Period
Candidate Name			158.92
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) ▼		Transaction ID : SB17.26246
State: District:			<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. ADP		M M / D D / Y Y Y Y 02 / 26 / 2026	
Mailing Address 100 N. Northwest Pt. Road		FEC Identification Number	
City Elk Grove Village	State IL	Zip Code 60007	C
Purpose of Disbursement Payroll Taxes		Category/ Type	Amount of Each Disbursement this Period
Candidate Name			1770.68
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) ▼		Transaction ID : SB17.26248
State: District:			<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	3100.52
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 29			
	<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)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement					
A. ADP		<table border="1"> <tr> <td>M M / D D / Y Y Y Y</td> <td></td> </tr> <tr> <td>03 / 06 / 2026</td> <td></td> </tr> </table>		M M / D D / Y Y Y Y		03 / 06 / 2026	
M M / D D / Y Y Y Y							
03 / 06 / 2026							
Mailing Address 100 N. Northwest Pt. Road		FEC Identification Number					
City Elk Grove Village	State IL	Zip Code 60007	C				
Purpose of Disbursement Payroll Processing Fees		Category/ Type	Amount of Each Disbursement this Period				
Candidate Name			158.92				
Office Sought:	Disbursement For:	Transaction ID : SB17.26291					
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item					
State: District:							

Full Name (Last, First, Middle Initial)		Date of Disbursement					
B. ADP		<table border="1"> <tr> <td>M M / D D / Y Y Y Y</td> <td></td> </tr> <tr> <td>03 / 12 / 2026</td> <td></td> </tr> </table>		M M / D D / Y Y Y Y		03 / 12 / 2026	
M M / D D / Y Y Y Y							
03 / 12 / 2026							
Mailing Address 100 N. Northwest Pt. Road		FEC Identification Number					
City Elk Grove Village	State IL	Zip Code 60007	C				
Purpose of Disbursement Payroll Taxes		Category/ Type	Amount of Each Disbursement this Period				
Candidate Name			1170.92				
Office Sought:	Disbursement For:	Transaction ID : SB17.26297					
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item					
State: District:							

Full Name (Last, First, Middle Initial)		Date of Disbursement					
C. ADP		<table border="1"> <tr> <td>M M / D D / Y Y Y Y</td> <td></td> </tr> <tr> <td>03 / 20 / 2026</td> <td></td> </tr> </table>		M M / D D / Y Y Y Y		03 / 20 / 2026	
M M / D D / Y Y Y Y							
03 / 20 / 2026							
Mailing Address 100 N. Northwest Pt. Road		FEC Identification Number					
City Elk Grove Village	State IL	Zip Code 60007	C				
Purpose of Disbursement Payroll Processing Fees		Category/ Type	Amount of Each Disbursement this Period				
Candidate Name			158.92				
Office Sought:	Disbursement For:	Transaction ID : SB17.26306					
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item					
State: District:							

SUBTOTAL of Disbursements This Page (optional).....▶	1488.76
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 9 OF 29			
	<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)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement MM / DD / YYYY 03 / 30 / 2026
Mailing Address 100 N. Northwest Pt. Road		FEC Identification Number C
City Elk Grove Village	State IL	Zip Code 60007
Purpose of Disbursement Payroll Taxes	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 1770.68	
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) ▼	Transaction ID : SB17.26308
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Astound		Date of Disbursement MM / DD / YYYY 02 / 09 / 2026
Mailing Address 2640 West Bradley Place		FEC Identification Number C
City Chicago	State IL	Zip Code 60618
Purpose of Disbursement Internet Access	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 147.77	
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) ▼	Transaction ID : SB17.26218
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. AT&T Mobility		Date of Disbursement MM / DD / YYYY 01 / 23 / 2026
Mailing Address 208 Akard Street		FEC Identification Number C
City Dallas	State TX	Zip Code 75202
Purpose of Disbursement Cell Phones	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 300.95	
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) ▼	Transaction ID : SB17.26193
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	2219.40
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 10 OF 29	
	<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)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T Mobility		Date of Disbursement MM / DD / YYYY 02 / 25 / 2026
Mailing Address 208 Akard Street		FEC Identification Number C
City Dallas	State TX	Zip Code 75202
Purpose of Disbursement Cell Phones		Amount of Each Disbursement this Period 248.26
Candidate Name		Transaction ID : SB17.26247
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T Mobility		Date of Disbursement MM / DD / YYYY 03 / 19 / 2026
Mailing Address 208 Akard Street		FEC Identification Number C
City Dallas	State TX	Zip Code 75202
Purpose of Disbursement Cell Phones		Amount of Each Disbursement this Period 297.66
Candidate Name		Transaction ID : SB17.26305
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Authorize.net		Date of Disbursement MM / DD / YYYY 01 / 09 / 2026
Mailing Address 915 S. 500 East #200		FEC Identification Number C
City American Fork	State UT	Zip Code 84003
Purpose of Disbursement Credit Card Processing Fees		Amount of Each Disbursement this Period 149.85
Candidate Name		Transaction ID : SB17.26177
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	695.77
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)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address 915 S. 500 East #200

City American Fork State UT Zip Code 84003

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 10 / 2026

FEC Identification Number

C

Amount of Each Disbursement this Period

5.00

Transaction ID : SB17.26219

Memo Item

Full Name (Last, First, Middle Initial)

B. Blue Cross Blue Shield of IL

Mailing Address PO Box 1364

City Chicago State IL Zip Code 60690

Purpose of Disbursement Insurance

Candidate Name

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 06 / 2026

FEC Identification Number

C

Amount of Each Disbursement this Period

4691.11

Transaction ID : SB17.26214

Memo Item

Full Name (Last, First, Middle Initial)

C. Blue Cross Blue Shield of IL

Mailing Address PO Box 1364

City Chicago State IL Zip Code 60690

Purpose of Disbursement Insurance

Candidate Name

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 28 / 2026

FEC Identification Number

C

Amount of Each Disbursement this Period

4691.11

Transaction ID : SB17.26194

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 9387.22

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 12 OF 29	
	<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)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Blue Cross Blue Shield of IL		Date of Disbursement MM / DD / YYYY 02 / 27 / 2026
Mailing Address PO Box 1364		FEC Identification Number C
City Chicago	State IL	Zip Code 60690
Purpose of Disbursement Insurance		Amount of Each Disbursement this Period 4691.11
Candidate Name		Transaction ID : SB17.26250
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Blue Cross Blue Shield of IL		Date of Disbursement MM / DD / YYYY 03 / 25 / 2026
Mailing Address PO Box 1364		FEC Identification Number C
City Chicago	State IL	Zip Code 60690
Purpose of Disbursement Insurance		Amount of Each Disbursement this Period 4691.11
Candidate Name		Transaction ID : SB17.26307
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Chase Card Services		Date of Disbursement MM / DD / YYYY 01 / 20 / 2026
Mailing Address PO Box 53084		FEC Identification Number C
City Atlanta	State GA	Zip Code 30353
Purpose of Disbursement Itemized Transactions Below		Amount of Each Disbursement this Period 702.70
Candidate Name		Transaction ID : SB17.26190
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	10084.92
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 13 OF 29			
	<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)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. We the Pizza		Date of Disbursement MM / DD / YYYY 01 / 20 / 2026
Mailing Address Pennsylvania Ave SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Food & Beverage		Amount of Each Disbursement this Period 175.90
Candidate Name		Transaction ID : SB17.26190.1
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. AOL		Date of Disbursement MM / DD / YYYY 01 / 20 / 2026
Mailing Address 770 Broadway		FEC Identification Number C
City New York	State NY	Zip Code 10013
Purpose of Disbursement Internet Access		Amount of Each Disbursement this Period 33.91
Candidate Name		Transaction ID : SB17.26190.2
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. Adobe		Date of Disbursement MM / DD / YYYY 01 / 20 / 2026
Mailing Address 345 Park Avenue		FEC Identification Number C
City San Jose	State CA	Zip Code 95110
Purpose of Disbursement Internet Utlity		Amount of Each Disbursement this Period 22.04
Candidate Name		Transaction ID : SB17.26190.5
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 14 OF 29	
	<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)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SIS LLC		Date of Disbursement MM / DD / YYYY 01 / 20 / 2026
Mailing Address 3700 Crestwood Pkwy NW #1050		FEC Identification Number C
City Duluth	State GA	Zip Code 30096
Purpose of Disbursement Research	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 30.00	
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) ▼	Transaction ID : SB17.26190.6
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. U.S. Postal Service		Date of Disbursement MM / DD / YYYY 01 / 20 / 2026
Mailing Address 1101 Davis		FEC Identification Number C
City Evanston	State IL	Zip Code 60201
Purpose of Disbursement Postage	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 156.00	
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) ▼	Transaction ID : SB17.26190.7
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Chase Card Services		Date of Disbursement MM / DD / YYYY 02 / 17 / 2026
Mailing Address PO Box 53084		FEC Identification Number C
City Atlanta	State GA	Zip Code 30353
Purpose of Disbursement Itemized Transactions Below	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 854.54	
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) ▼	Transaction ID : SB17.26222
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	854.54
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 15 OF 29	
	<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)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. U.S. Postal Service		Date of Disbursement MM / DD / YYYY 02 / 17 / 2026
Mailing Address 1101 Davis		FEC Identification Number C
City Evanston	State IL	Zip Code 60201
Purpose of Disbursement Post Office Box Rental		Amount of Each Disbursement this Period 167.63
Candidate Name		Transaction ID : SB17.26222.0
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. AOL		Date of Disbursement MM / DD / YYYY 02 / 17 / 2026
Mailing Address 770 Broadway		FEC Identification Number C
City New York	State NY	Zip Code 10013
Purpose of Disbursement Internet Access		Amount of Each Disbursement this Period 327.86
Candidate Name		Transaction ID : SB17.26222.1
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. We the Pizza		Date of Disbursement MM / DD / YYYY 02 / 17 / 2026
Mailing Address Pennsylvania Ave SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Food & Beverage		Amount of Each Disbursement this Period 99.22
Candidate Name		Transaction ID : SB17.26222.3
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 16 OF 29	
	<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)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Wills Place

Mailing Address 7927 Lincoln Ave

City Skokie State IL Zip Code 60077

Purpose of Disbursement Food & Beverage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 17 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 117.90

Transaction ID : SB17.26222.5

Memo Item

Full Name (Last, First, Middle Initial)

B. Chase Card Services

Mailing Address PO Box 53084

City Atlanta State GA Zip Code 30353

Purpose of Disbursement Itemized Tranactions Below

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 12 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 590.86

Transaction ID : SB17.26298

Memo Item

Full Name (Last, First, Middle Initial)

C. U.S. Postal Service

Mailing Address 1101 Davis

City Evanston State IL Zip Code 60201

Purpose of Disbursement PO Box Rental & Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 12 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 335.00

Transaction ID : SB17.26298.0

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 590.86

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 17 OF 29			
	<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)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AOL			Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2026		
Mailing Address 770 Broadway			FEC Identification Number C		
City New York	State NY	Zip Code 10013	Amount of Each Disbursement this Period 33.91		
Purpose of Disbursement Internet Access		Category/Type	Transaction ID : SB17.26298.1		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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:					

Full Name (Last, First, Middle Initial) B. Federal Express			Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2026		
Mailing Address 3690 Hacks Cross Road			FEC Identification Number C		
City Memphis	State TN	Zip Code 38125	Amount of Each Disbursement this Period 105.22		
Purpose of Disbursement Shipping		Category/Type	Transaction ID : SB17.26298.2		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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:					

Full Name (Last, First, Middle Initial) C. Democratic Party of Evanston			Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2026		
Mailing Address 826 N. Custer			FEC Identification Number C		
City Evanston	State IL	Zip Code 60201	Amount of Each Disbursement this Period 1200.00		
Purpose of Disbursement Office Rent		Category/Type	Transaction ID : SB17.26304		
Candidate Name		<input type="checkbox"/> Memo Item			
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:					

SUBTOTAL of Disbursements This Page (optional).....▶	1200.00
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 18 OF 29			
	<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)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Gersten, Sarah			Date of Disbursement MM / DD / YYYY 01 / 15 / 2026		
Mailing Address 4050 Emerson			FEC Identification Number C		
City Skokie	State IL	Zip Code 60076	Amount of Each Disbursement this Period 2549.06		
Purpose of Disbursement Salary		Category/ Type	Transaction ID : SB17.26184		
Candidate Name			<input type="checkbox"/> Memo Item		
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:					

Full Name (Last, First, Middle Initial) B. Gersten, Sarah			Date of Disbursement MM / DD / YYYY 01 / 15 / 2026		
Mailing Address 4050 Emerson			FEC Identification Number C		
City Skokie	State IL	Zip Code 60076	Amount of Each Disbursement this Period 10842.66		
Purpose of Disbursement Salary		Category/ Type	Transaction ID : SB17.26185		
Candidate Name			<input type="checkbox"/> Memo Item		
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:					

Full Name (Last, First, Middle Initial) C. Gersten, Sarah			Date of Disbursement MM / DD / YYYY 01 / 30 / 2026		
Mailing Address 4050 Emerson			FEC Identification Number C		
City Skokie	State IL	Zip Code 60076	Amount of Each Disbursement this Period 3469.74		
Purpose of Disbursement Salary		Category/ Type	Transaction ID : SB17.26199		
Candidate Name			<input type="checkbox"/> Memo Item		
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:					

SUBTOTAL of Disbursements This Page (optional).....▶	16861.46
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 29	
	<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)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Gersten, Sarah		Date of Disbursement MM / DD / YYYY 02 / 13 / 2026
Mailing Address 4050 Emerson		FEC Identification Number C
City Skokie	State IL	Zip Code 60076
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 2549.06
Candidate Name		Transaction ID : SB17.26221
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Gersten, Sarah		Date of Disbursement MM / DD / YYYY 02 / 27 / 2026
Mailing Address 4050 Emerson		FEC Identification Number C
City Skokie	State IL	Zip Code 60076
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 3469.73
Candidate Name		Transaction ID : SB17.26249
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. Gersten, Sarah		Date of Disbursement MM / DD / YYYY 03 / 12 / 2026
Mailing Address 4050 Emerson		FEC Identification Number C
City Skokie	State IL	Zip Code 60076
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 2549.06
Candidate Name		Transaction ID : SB17.26296
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	8567.85
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 29	
	<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)
SCHAKOWSKY FOR CONGRESS

A. Gersten, Sarah

Full Name (Last, First, Middle Initial)

Mailing Address 4050 Emerson

City Skokie State IL Zip Code 60076

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 30 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 3469.73

Transaction ID : SB17.26309

Memo Item

B. Head, Benjamin

Full Name (Last, First, Middle Initial)

Mailing Address 2300 N. Lincoln Park West #701

City Chicago State IL Zip Code 60614

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 15 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 7458.74

Transaction ID : SB17.26186

Memo Item

C. New Blue Interactive LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1146 19th Street NW #750

City Washington State DC Zip Code 20036

Purpose of Disbursement Digital Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 05 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 225.00

Transaction ID : SB17.26217

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 11153.47

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 29			
	<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)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Polpress Inc.		Date of Disbursement MM / DD / YYYY 02 / 27 / 2026
Mailing Address 5566 N. Northwest Highway		FEC Identification Number C
City Chicago	State IL	Zip Code 60630
Purpose of Disbursement Printing		Amount of Each Disbursement this Period 770.00
Candidate Name		Transaction ID : SB17.26251
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Q Street Compliance		Date of Disbursement MM / DD / YYYY 02 / 05 / 2026
Mailing Address PO Box 40293		FEC Identification Number C
City Washington	State DC	Zip Code 20016
Purpose of Disbursement Financial Compliance Consulting		Amount of Each Disbursement this Period 474.50
Candidate Name		Transaction ID : SB17.26216
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. RCN		Date of Disbursement MM / DD / YYYY 03 / 12 / 2026
Mailing Address 650 College Road East Suite 3100		FEC Identification Number C
City Princeton	State NJ	Zip Code 08540
Purpose of Disbursement Internet & Cable		Amount of Each Disbursement this Period 147.77
Candidate Name		Transaction ID : SB17.26295
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1392.27
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 29			
	<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)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Travelers Insurance		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2026
Mailing Address PO BOX 660307		FEC Identification Number C
City Dallas	State TX	Zip Code 75266
Purpose of Disbursement Insurance		Amount of Each Disbursement this Period 495.00
Candidate Name		Transaction ID : SB17.26189
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Tuite, Jacque		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2026
Mailing Address 2212 W. Palmer		FEC Identification Number C
City Chicago	State IL	Zip Code 60647
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 4821.42
Candidate Name		Transaction ID : SB17.26187
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> Memo Item
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	5316.42
TOTAL This Period (last page this line number only).....▶	92283.13

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 29	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Moog, Lucy, , ,		Date of Disbursement MM / DD / YYYY 03 / 02 / 2026
Mailing Address 1908 North Orchard		FEC Identification Number C C00327023
City Chicago	State IL	Zip Code 60614
Purpose of Disbursement Contribution Refund		Amount of Each Disbursement this Period 2000.00
Candidate Name SCHAKOWSKY FOR CONGRESS		Transaction ID : SB20A.26290
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) ▼	<input type="checkbox"/> Memo Item
State: IL	District: 09	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> Memo Item
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:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> Memo Item
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:	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 29	
	<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)
SCHAKOWSKY FOR CONGRESS

A. AGER FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 64

City FAIRVIEW State NC Zip Code 28730

Purpose of Disbursement Contribution

Candidate Name AGER, JAMIE, , ,

Office Sought: House Senate President
State: NC District: 11

Disbursement For: 2026
 Primary General
 Other (specify) ▼

Date of Disbursement: 02 / 26 / 2026

FEC Identification Number: C C00914119

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB21.26283

Memo Item

B. BISS FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX #549

City EVANSTON State IL Zip Code 60204

Purpose of Disbursement Contribution

Candidate Name BISS, DANIEL, , ,

Office Sought: House Senate President
State: IL District: 09

Disbursement For: 2026
 Primary General
 Other (specify) ▼

Date of Disbursement: 01 / 29 / 2026

FEC Identification Number: C C00905307

Amount of Each Disbursement this Period: 2000.00

Transaction ID : SB21.26196

Memo Item

C. CHRISTINA BOHANNAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 722

City IOWA CITY State IA Zip Code 52244

Purpose of Disbursement Contribution

Candidate Name BOHANNAN, CHRISTINA, , ,

Office Sought: House Senate President
State: IA District: 01

Disbursement For: 2026
 Primary General
 Other (specify) ▼

Date of Disbursement: 02 / 26 / 2026

FEC Identification Number: C C00787820

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB21.26279

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 4000.00

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 25 OF 29	
	<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)
SCHAKOWSKY FOR CONGRESS

A. COOKE FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 1846

City EAU CLAIRE State WI Zip Code 54702

Purpose of Disbursement Contribution

Candidate Name COOKE, REBECCA, , ,

Office Sought: House Senate President
State: WI District: 03

Disbursement For: 2026
 Primary General
 Other (specify) ▼

Date of Disbursement: 02 / 26 / 2026

FEC Identification Number: C C00844993

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB21.26289

Memo Item

B. ELAINE LURIA FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 66191

City VIRGINIA BEACH State VA Zip Code 23466

Purpose of Disbursement Contribution

Candidate Name LURIA, ELAINE, , ,

Office Sought: House Senate President
State: VA District: 02

Disbursement For: 2026
 Primary General
 Other (specify) ▼

Date of Disbursement: 02 / 26 / 2026

FEC Identification Number: C C00926303

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB21.26288

Memo Item

C. FRIENDS OF JANELLE STELSON

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 41

City LEMOYNE State PA Zip Code 17043

Purpose of Disbursement Contribution

Candidate Name STELSON, JANELLE, , ,

Office Sought: House Senate President
State: PA District: 10

Disbursement For: 2026
 Primary General
 Other (specify) ▼

Date of Disbursement: 02 / 26 / 2026

FEC Identification Number: C C00852368

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB21.26285

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 3000.00

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 26 OF 29	
	<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)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Friends of Josina Morita		Date of Disbursement MM / DD / YYYY 02 / 02 / 2026
Mailing Address 5340 Main Street		FEC Identification Number C
City Skokie	State IL	Zip Code 60077
Purpose of Disbursement Non-Federal Contribution		Amount of Each Disbursement this Period 500.00
Candidate Name		Transaction ID : SB21.26276
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Illinois State Society		Date of Disbursement MM / DD / YYYY 03 / 12 / 2026
Mailing Address P.O. Box 320776		FEC Identification Number C
City Alexandria	State VA	Zip Code 22301
Purpose of Disbursement Donation		Amount of Each Disbursement this Period 300.00
Candidate Name		Transaction ID : SB21.26294
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Jewish United Fund		Date of Disbursement MM / DD / YYYY 01 / 15 / 2026
Mailing Address 30 S. Wells Street		FEC Identification Number C
City Chicago	State IL	Zip Code 60606
Purpose of Disbursement Donation		Amount of Each Disbursement this Period 1000.00
Candidate Name		Transaction ID : SB21.26183
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1800.00
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 27 OF 29	
	<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)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. JONATHAN NEZ FOR CONGRESS

Mailing Address PO BOX 1854

City FLAGSTAFF State AZ Zip Code 86002

Purpose of Disbursement Contribution

Candidate Name NEZ, JONATHAN MICHAEL, , ,

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: AZ District: 02

Date of Disbursement: 02 / 26 / 2026

FEC Identification Number: C C00853473

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB21.26277

Memo Item

Full Name (Last, First, Middle Initial)
B. MENDOZA FOR CONGRESS

Mailing Address PO BOX 385

City MARANA State AZ Zip Code 85653

Purpose of Disbursement Contribution

Candidate Name MENDOZA, JOANNA, , ,

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: AZ District: 06

Date of Disbursement: 02 / 26 / 2026

FEC Identification Number: C C00897090

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB21.26278

Memo Item

Full Name (Last, First, Middle Initial)
C. MOLDER FOR CONGRESS

Mailing Address PO BOX 1468

City COLUMBIA State TN Zip Code 38402

Purpose of Disbursement Contribution

Candidate Name MOLDER, CHAZ, , ,

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: TN District: 05

Date of Disbursement: 02 / 26 / 2026

FEC Identification Number: C C00918581

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB21.26286

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 3000.00

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 28 OF 29	
	<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)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAIGE FOR PA			Date of Disbursement MM / DD / YYYY 02 / 26 / 2026	
Mailing Address PO BOX 20074			FEC Identification Number C C00918151	
City SCRANTON	State PA	Zip Code 18502	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution		Category/ Type	Transaction ID : SB21.26284	
Candidate Name COGNETTI, PAIGE, , ,		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: PA District: 08				

Full Name (Last, First, Middle Initial) B. SARAH FOR IOWA			Date of Disbursement MM / DD / YYYY 02 / 26 / 2026	
Mailing Address 2813 VIRGINIA PL			FEC Identification Number C C00904086	
City DES MOINES	State IA	Zip Code 50321	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution		Category/ Type	Transaction ID : SB21.26281	
Candidate Name TRONE GARRIOTT, SARAH, , ,		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: IA District: 03				

Full Name (Last, First, Middle Initial) C. SEAN MCCANN FOR CONGRESS			Date of Disbursement MM / DD / YYYY 02 / 26 / 2026	
Mailing Address PO BOX 50002			FEC Identification Number C C00911784	
City KALAMAZOO	State MI	Zip Code 49005	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution		Category/ Type	Transaction ID : SB21.26282	
Candidate Name MCCANN, SEAN, , ,		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: MI District: 04				

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
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 29 OF 29	
	<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)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SHANNON TAYLOR FOR VA		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2026
Mailing Address PO BOX 1171		FEC Identification Number C C00918029
City MIDLOTHIAN	State VA	Zip Code 23113
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name TAYLOR, SHANNON LEIGH, , ,		Transaction ID : SB21.26287
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) ▼	<input type="checkbox"/> Memo Item
State: VA	District: 01	

Full Name (Last, First, Middle Initial) 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		Amount of Each Disbursement this Period
Candidate Name		Memo Item
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:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Memo Item
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:	

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	15800.00