

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Steil Victory Fund

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2026"/>		<input type="text" value="32047.88"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="32047.88"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="450226.86"/>	<input type="text" value="450226.86"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="482274.74"/>	<input type="text" value="482274.74"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="346825.45"/>	<input type="text" value="346825.45"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="135449.29"/>	<input type="text" value="135449.29"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Steil Victory Fund

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	432026.86	432026.86
(ii) Unitemized	1700.00	1700.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	433726.86	433726.86
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	16500.00	16500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	450226.86	450226.86
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	450226.86	450226.86
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	450226.86	450226.86

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	38296.96	38296.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	38296.96	38296.96
22. Transfers to Affiliated/Other Party Committees.....	308528.49	308528.49
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	346825.45	346825.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	346825.45	346825.45

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	450226.86	450226.86
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	450226.86	450226.86
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	38296.96	38296.96
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	38296.96	38296.96

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

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

FOR LINE NUMBER: PAGE 6 OF 45
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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)
Steil Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. HARRIS, R., JEFFREY, ,

Mailing Address 18235 W BURLEIGH ROAD

City BROOKFIELD State WI Zip Code 53045-2524

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

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 15 / 2026

Transaction ID : SA11A.66505

Amount of Each Receipt this Period
 2500.00

Memo Item
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. BABCOCK, DAVID, E., ,

Mailing Address 4906 E CHARDONNAY DRIVE

City MILTON State WI Zip Code 53563-8492

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

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 25 / 2026

Transaction ID : SA11A.66510

Amount of Each Receipt this Period
 1000.00

Memo Item
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. BIELIK, MARGARET, M., ,

Mailing Address 1144 BULEVAR DE PALMAS

City MARATHON State FL Zip Code 33050-2529

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

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 25 / 2026

Transaction ID : SA11A.66509

Amount of Each Receipt this Period
 1000.00

Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 4500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

A. JOHNSON, HELEN, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W3817 PALMER ROAD
 City LAKE GENEVA State WI Zip Code 53147-2620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 25 / 2026
Transaction ID : SA11A.66511
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

B. KLUMB, DENNIS, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 360 6TH AVENUE S
 City NAPLES State FL Zip Code 34102-6533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 25 / 2026
Transaction ID : SA11A.66512
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

C. OAKES, CHRISTINE, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4107 QUARRY SPRINGS DRIVE
 City RACINE State WI Zip Code 53405-1172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 01 / 25 / 2026
Transaction ID : SA11A.66508
 Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

A. WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
55026.86

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 26 / 2026

Transaction ID : SA11C.66627

Amount of Each Receipt this Period
11165.29

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

B. CULVER, CURTIS, S., ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4724 N PINECREST DR.

City NASHOTAH	State WI	Zip Code 53058-9709
------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 26 / 2026

Transaction ID : SA11A.66630

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

C. PEREZ, WILLIAM, D., ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 81 SEAGATE DR., SEASONS 1603 # 1603

City NAPLES	State FL	Zip Code 34103-2486
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 26 / 2026

Transaction ID : SA11A.66628

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 9 OF 45
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. WELLS, CECELIA, , ,

Mailing Address **3429 W PICARDY COURT**

City MEQUON	State WI	Zip Code 53092-5207
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5165.29

Date of Receipt
01 / 26 / 2026

Transaction ID : SA11A.66629

Amount of Each Receipt this Period
5165.29

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CULLEN, MARK, A., ,

Mailing Address **617 WOODWARD DRIVE**

City MADISON	State WI	Zip Code 53704-2233
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
02 / 01 / 2026

Transaction ID : SA11A.66617

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. KLEIN, TRACEY, L., ,

Mailing Address **4971 BONITA BAY BOULEVARD
UNIT 504**

City BONITA SPRINGS	State FL	Zip Code 34134-1770
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) POLSINELLI	Occupation (for Individual) LAWYER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
02 / 01 / 2026

Transaction ID : SA11A.66618

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	7165.29
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 10 OF 45
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. GRAFF, JUDITH, E., ,

Mailing Address 1302 GRAND ISLE COURT

City NAPLES	State FL	Zip Code 34108-3322
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6165.29

Date of Receipt
MM / DD / YYYY
02 / 08 / 2026

Transaction ID : SA11A.67020

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. O'KEEFFE, KELLY, J., ,

Mailing Address 11 N ELMHURST AVENUE

City MT. PROSPECT	State IL	Zip Code 60056-2400
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
02 / 08 / 2026

Transaction ID : SA11A.67022

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. PALMER, LAURA, T., ,

Mailing Address N1511 SHADOW LANE

City FONTANA	State WI	Zip Code 53125-1940
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
02 / 08 / 2026

Transaction ID : SA11A.67021

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 11 OF 45
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ANDERSON, JOHN, R., ,

Mailing Address **330 SPRING CREEK ROAD**

City **ROCKFORD** State **IL** Zip Code **61107-1035**

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

Name of Employer (for Individual) **ANDERSON ENTERPRISES, LLC** Occupation (for Individual) **OWNER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
02 / 15 / 2026

Transaction ID : SA11A.67547

Amount of Each Receipt this Period
3000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CULLEN, GEORGE, L., ,

Mailing Address **408 FARWELL DRIVE**

City **MADISON** State **WI** Zip Code **53704-6026**

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

Name of Employer (for Individual) **JP CULLEN** Occupation (for Individual) **MANAGEMENT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
02 / 15 / 2026

Transaction ID : SA11A.67549

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. PREGONT, JOSEPH, T., ,

Mailing Address **PO BOX 471**

City **JANESVILLE** State **WI** Zip Code **53547-0471**

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

Name of Employer (for Individual) **PRENT CORPORATION** Occupation (for Individual) **CHAIRMAN**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
02 / 15 / 2026

Transaction ID : SA11A.67548

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **15500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 45
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

A. PREGONT, TINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2225 KENNEDY ROAD
 City JANESVILLE State WI Zip Code 53545-0885
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **02 / 15 / 2026**
Transaction ID : SA11A.70429
 Amount of Each Receipt this Period 10000.00
 Memo Item
CONTRIBUTION

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 9891
 City ARLINGTON State VA Zip Code 22219-1891
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 55026.86

Date of Receipt **02 / 16 / 2026**
Transaction ID : SA11C.68162
 Amount of Each Receipt this Period 5016.53
 Memo Item
CONTRIBUTION
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

C. BLAUGRUND, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 826 LONG HILL ROAD W
 City BRIARCLIFF MANOR State NY Zip Code 10510-2123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **INTERCONTINENTAL EXCHANGE** Occupation (for Individual) **VP STRATEGIC INITIATIVES**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **02 / 16 / 2026**
Transaction ID : SA11A.68163
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	11000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

A. CAMERON, LENORE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1900 GULF SHORE BLVD N # 504
 City NAPLES State FL Zip Code 34102-4604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 16 / 2026
Transaction ID : SA11A.68165
 Amount of Each Receipt this Period 1000.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM WINRED

B. CUCCO, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1655 GORDON DR
 City NAPLES State FL Zip Code 34102-7417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 02 / 16 / 2026
Transaction ID : SA11A.68164
 Amount of Each Receipt this Period 2500.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM WINRED

C. LORENZI, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1611 EVERGREEN LANE
 City LAKE GENEVA State WI Zip Code 53147-9703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CELEBRATION CATERING Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 516.53

Date of Receipt 02 / 16 / 2026
Transaction ID : SA11A.68166
 Amount of Each Receipt this Period 516.53
 Memo Item
 CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	4016.53
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 14 OF 45
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

A. BOWEN, JAMES, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 264 10TH AVE SOUTH
 City NAPLES State FL Zip Code 34102-6821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST TRUST PORTFOLIO Occupation (for Individual) FINANCIAL SERVICES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 02 / 18 / 2026
Transaction ID : SA11A.68167
 Amount of Each Receipt this Period 50000.00
 Memo Item
CONTRIBUTION

B. BOWEN, MARISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 264 10TH AVENUE SOUTH
 City NAPLES State FL Zip Code 34102-6821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 02 / 18 / 2026
Transaction ID : SA11A.70428
 Amount of Each Receipt this Period 50000.00
 Memo Item
CONTRIBUTION

C. HANNY, GRACE, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 311 OAKWOOD LANE
 City LAKE GENEVA State WI Zip Code 53147-2354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 22 / 2026
Transaction ID : SA11A.68160
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 100250.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 15 OF 45
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TAYLOR, BRAD, , ,

Mailing Address **114 MOORINGS PARK DR
A404**

City **NAPLES** State **FL** Zip Code **34105-2137**

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

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
02 / 22 / 2026

Transaction ID : SA11A.68161

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ZORE, DIANE, , ,

Mailing Address **2505 W DEAN ROAD**

City **RIVER HILLS** State **WI** Zip Code **53217-2010**

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

Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
02 / 22 / 2026

Transaction ID : SA11A.68158

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. WINRED

Mailing Address **P.O. BOX 9891**

City **ARLINGTON** State **VA** Zip Code **22219-1891**

FEC ID number of contributing federal political committee. **C C00694323**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
55026.86

Date of Receipt
02 / 23 / 2026

Transaction ID : SA11C.69819

Amount of Each Receipt this Period
15165.29

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

SUBTOTAL of Receipts This Page (optional)..... **2000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 45
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

A. GRAFF, JUDITH, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1302 GRAND ISLE COURT
 City NAPLES State FL Zip Code 34108-3322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6165.29

Date of Receipt 02 / 23 / 2026
Transaction ID : SA11A.69820
 Amount of Each Receipt this Period 5165.29
 Memo Item
 CONTRIBUTION
 EARMARKED FROM WINRED

B. WINKLEVOSS, CAMERON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 WEST 24TH STREET 4TH FLOOR
 City NEW YORK State NY Zip Code 10010-3558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINKLEVOSS CAPITAL MANAGEMENT Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 23 / 2026
Transaction ID : SA11A.69822
 Amount of Each Receipt this Period 5000.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM WINRED

C. WINKLEVOSS, TYLER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 WEST 24TH STREET 4TH FLOOR
 City NEW YORK State NY Zip Code 10010-3558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINKLEVOSS CAPITAL MANAGEMENT Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 23 / 2026
Transaction ID : SA11A.69821
 Amount of Each Receipt this Period 5000.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶	15165.29
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 OF 45
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BAUER, KURT, , ,

Mailing Address **4521 ELLINGTON WAY**

City MIDDLETON	State WI	Zip Code 53562-4914
--------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) WMC	Occupation (for Individual) PRESIDENT/CEO
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
03 / 01 / 2026

Transaction ID : SA11A.69828

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. JENSEN, HOLLY, K., ,

Mailing Address **659 FARWELL DRIVE**

City MADISON	State WI	Zip Code 53704-6029
------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) BUSINESS OWNER	Occupation (for Individual) CQC
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
22000.00

Date of Receipt
03 / 01 / 2026

Transaction ID : SA11A.69831

Amount of Each Receipt this Period
22000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. JENSEN, JAY, S., ,

Mailing Address **659 FARWELL DR.**

City MADISON	State WI	Zip Code 53704-6029
------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) CLASEN QUALITY CHOCOLATE	Occupation (for Individual) CEO
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
22000.00

Date of Receipt
03 / 01 / 2026

Transaction ID : SA11A.70430

Amount of Each Receipt this Period
22000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	45500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

A. MILLIS, DON, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 408 S WALKER WAY
 City SUN PRAIRIE State WI Zip Code 53590-2658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REINHART BOERNER VAN DEUREN S.C. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 03 / 01 / 2026
Transaction ID : SA11A.69827
 Amount of Each Receipt this Period 1500.00
 Memo Item
CONTRIBUTION

B. MINAHAN, DANIEL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1536 E GOODRICH LANE
 City FOX POINT State WI Zip Code 53217-2951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONTINENTAL PROPERTIES CO. INC Occupation (for Individual) PRESIDENT AND COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 8000.00

Date of Receipt 03 / 01 / 2026
Transaction ID : SA11A.69824
 Amount of Each Receipt this Period 8000.00
 Memo Item
CONTRIBUTION

C. MINAHAN, SUSAN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1536 E GOODRICH LANE
 City FOX POINT State WI Zip Code 53217-2951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 12000.00

Date of Receipt 03 / 01 / 2026
Transaction ID : SA11A.70427
 Amount of Each Receipt this Period 12000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	21500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Steil Victory Fund

A. NOWAK, ELLEN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2959 WINNEBAGO DRIVE
 City SUMMIT State WI Zip Code 53066-5002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ATC Occupation (for Individual) GOVERNMENT RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 03 / 01 / 2026
Transaction ID : SA11A.69826
 Amount of Each Receipt this Period 1500.00
 Memo Item
CONTRIBUTION

B. ROZOLIS, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 962 MARIANNE TERRACE
 City LAKE GENEVA State WI Zip Code 53147-2206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABC SUPPLY Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 8000.00

Date of Receipt 03 / 01 / 2026
Transaction ID : SA11A.69830
 Amount of Each Receipt this Period 8000.00
 Memo Item
CONTRIBUTION

C. STANFORD, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2501 JEFFY TRL
 City MADISON State WI Zip Code 53719-5165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WISCONSIN HOSPITAL ASSOCIATION Occupation (for Individual) GENERAL COUNSEL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 01 / 2026
Transaction ID : SA11A.69823
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. WALL, TERRENCE, R., ,

Mailing Address P.O. BOX 620037

City MIDDLETON State WI Zip Code 53562-0037

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

Name of Employer (for Individual) T. WALL ENTERPRISES Occupation (for Individual) OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 01 / 2026

Transaction ID : SA11A.69825

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. WINRED

Mailing Address P.O. BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
55026.86

Date of Receipt
MM / DD / YYYY
03 / 02 / 2026

Transaction ID : SA11C.70431

Amount of Each Receipt this Period
8264.46

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. HEINZ, JIM, , ,

Mailing Address 316 NEPTUNE BRIGHT

City NAPLES State FL Zip Code 34103-

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

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
7231.40

Date of Receipt
MM / DD / YYYY
03 / 02 / 2026

Transaction ID : SA11A.70433

Amount of Each Receipt this Period
7231.40

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	8231.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

A. KRAUSE, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20565 CHADWICK LANE
 City BROOKFIELD State WI Zip Code 53045-3364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KRAUSE FUNERAL HOMES Occupation (for Individual) FUNERAL DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1033.06

Date of Receipt 03 / 02 / 2026
Transaction ID : SA11A.70432
 Amount of Each Receipt this Period 1033.06
 Memo Item
 CONTRIBUTION
 EARMARKED FROM WINRED

B. BELLOCK, MARGARET, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 71 14TH STREET S
 City NAPLES State FL Zip Code 34102-3517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 08 / 2026
Transaction ID : SA11A.70434
 Amount of Each Receipt this Period 5000.00
 Memo Item
 CONTRIBUTION

C. KUNES, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1234 E GENEVA ST
 City DELAVAN State WI Zip Code 53115-2002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 18500.00

Date of Receipt 03 / 08 / 2026
Transaction ID : SA11A.72636
 Amount of Each Receipt this Period 18500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	24533.06
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 22 OF 45
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. KUNES, GREGG, , ,

Mailing Address **2141 E GENEVA ST**

City **DELAN** State **WI** Zip Code **53115-2038**

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

Name of Employer (for Individual) **KUNES AUTO GROUP** Occupation (for Individual) **OWNER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
18500.00

Date of Receipt
03 / 08 / 2026

Transaction ID : SA11A.70435

Amount of Each Receipt this Period
18500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. NUNEMAKER, ANDY, N., ,

Mailing Address **3230 E KENWOOD BOULEVARD**

City **MILWAUKEE** State **WI** Zip Code **53211-3460**

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

Name of Employer (for Individual) **GROUPWARE TECHNOLOGIES** Occupation (for Individual) **CEO**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
03 / 08 / 2026

Transaction ID : SA11A.70436

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. O'BRIEN, KYLE, , ,

Mailing Address **368 OAKMONT ST**

City **OREGON** State **WI** Zip Code **53575-3841**

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

Name of Employer (for Individual) **WISCONSIN HOSPITAL ASSOCIATION** Occupation (for Individual) **PRESIDENT + CEO**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 08 / 2026

Transaction ID : SA11A.70437

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **21500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

A. WILSON, DONALD, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19160 STILL POINT TRAIL
 City BROOKFIELD State WI Zip Code 53045-4809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 08 / 2026
Transaction ID : SA11A.70438
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

B. READ, VERNE, R., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1249 N. FRANKLIN PLACE SUITE 300
 City MILWAUKEE State WI Zip Code 53202-3392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLEMENT FINANCE & LEASING, INC. Occupation (for Individual) PRESIDENT, FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 15 / 2026
Transaction ID : SA11A.70565
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

C. WALLEN, TIMOTHY, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16550 PRAIRIE COURT
 City BROOKFIELD State WI Zip Code 53005-5756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MLG SERVICES CORP Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 15 / 2026
Transaction ID : SA11A.70566
 Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	8500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)
Steil Victory Fund

A. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
55026.86

Date of Receipt
03 / 16 / 2026
Transaction ID : SA11C.71679

Amount of Each Receipt this Period
8915.29

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

B. HARTUNG, DANIEL, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 708 HEARTLAND TRAIL

City MADISON	State WI	Zip Code 53717-2172
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
HARTUNG BROTHERS INC PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
03 / 16 / 2026
Transaction ID : SA11A.71682

Amount of Each Receipt this Period
3500.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

C. JONES, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 311 E ERIE STREET

City MILWAUKEE	State WI	Zip Code 53202-6040
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
A O SMITH CORPORATION ATTORNEY

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3615.70

Date of Receipt
03 / 16 / 2026
Transaction ID : SA11A.71680

Amount of Each Receipt this Period
3615.70

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	7115.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 OF 45
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MARTIN, QUINN, , ,

Mailing Address 26241 SIENA DR

City BONITA SPRINGS	State FL	Zip Code 34134-1618
------------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		16		2026

Transaction ID : SA11A.71683

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. POWERS, NANCY, , ,

Mailing Address PO BOX 489

City LIBERTYVILLE	State IL	Zip Code 60048-0489
----------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) DESIGN
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1549.59

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		16		2026

Transaction ID : SA11A.71681

Amount of Each Receipt this Period
1549.59

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. BUSH, KATHLEEN, M., ,

Mailing Address N35W23687 AUBURN COURT

City PEWAUKEE	State WI	Zip Code 53072-2272
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
7000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2026

Transaction ID : SA11A.71685

Amount of Each Receipt this Period
7000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8799.59
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 OF 45
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

A. BUSH, MARK, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N35 W23687 AUBURN COURT
 City PEWAUKEE State WI Zip Code 53072-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2026
Transaction ID : SA11A.72635
 Amount of Each Receipt this Period
 7000.00
 Memo Item
CONTRIBUTION

B. NASGOVITZ, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4470 N LAKE DRIVE
 City MILWAUKEE State WI Zip Code 53211-1775
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HEARTLAND ADVISORS Occupation (for Individual) CHAIRMAN/PORTFOLIO MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2026
Transaction ID : SA11A.71684
 Amount of Each Receipt this Period
 4000.00
 Memo Item
CONTRIBUTION

C. BEIGHTOL, SCOTT, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W310S2525 CREGENNAN BAE
 City WALES State WI Zip Code 53183-9677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICHAEL BEST Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2026
Transaction ID : SA11A.72106
 Amount of Each Receipt this Period
 2500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	13500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. O'BRIEN, RITA, , ,

Mailing Address **1285 GULF SHORE BOULEVARD NORTH # 2A**

City NAPLES	State FL	Zip Code 34102-4903
-----------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
03 / 30 / 2026

Transaction ID : SA11A.72638

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. O'BRIEN, ROBERT, J., , JR.

Mailing Address **1285 GULF SHORE BOULEVARD N 2A**

City NAPLES	State FL	Zip Code 34102-4903
-----------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
03 / 30 / 2026

Transaction ID : SA11A.72105

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. WINRED

Mailing Address **P.O. BOX 9891**

City ARLINGTON	State VA	Zip Code 22219-1891
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FEC ID number of contributing federal political committee. **C C00694323**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
55026.86

Date of Receipt
03 / 30 / 2026

Transaction ID : SA11C.72107

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

A. MCCOSHEN, WILLIAM, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2980 CASSIDY COURT
 City MADISON State WI Zip Code 53711-5847
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICHAEL BEST STRATEGIES Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 03 / 30 / 2026
Transaction ID : SA11A.72108
 Amount of Each Receipt this Period 1500.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM WINRED

B. KUESTER, DENNIS, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 SEAGATE DR. APT 3S
 City NAPLES State FL Zip Code 34103-2467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 03 / 31 / 2026
Transaction ID : SA11A.72658
 Amount of Each Receipt this Period 3500.00
 Memo Item
 CONTRIBUTION

C. MANSOUR, TAREK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 VARICK STREET
 City NEW YORK State NY Zip Code 10013-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KALSHI Occupation (for Individual) FOUNDER/CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 22000.00

Date of Receipt 03 / 31 / 2026
Transaction ID : SA11A.72652
 Amount of Each Receipt this Period 22000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	27000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

A. WADE, JOHN, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7031 MAYFLOWER PARK DR
 City ZIONSVILLE State IN Zip Code 46077-7907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AES RESTAURANT GROUP LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 44000.00

Date of Receipt 03 / 31 / 2026
Transaction ID : SA11A.72651
 Amount of Each Receipt this Period 44000.00
 Memo Item
CONTRIBUTION

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 9891
 City ARLINGTON State VA Zip Code 22219-1891
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 55026.86

Date of Receipt 03 / 31 / 2026
Transaction ID : SA11C.72659
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

C. LOQUERCIO, ROBERT, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 WEST LAKE STREET
 City STREAMWOOD State IL Zip Code 60107-4104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOQUERCIO AUTO GROUP Occupation (for Individual) FOUNDER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2026
Transaction ID : SA11A.72660
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	49000.00
TOTAL This Period (last page this line number only).....	432026.86

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 30 OF 45
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

A. DIRECT SUPPLY, INC. PARTNERS PAC (DSI PARTNERS PAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6767 N INDUSTRIAL RD

City MILWAUKEE	State WI	Zip Code 53223-1211
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00409516

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	16	/	2026

Transaction ID : SA11C.66506

Amount of Each Receipt this Period
15000.00

Memo Item
CONTRIBUTION

B. TDS CORPORATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 525 JUNCTION ROAD

City MADISON	State WI	Zip Code 53717-2152
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FEC ID number of contributing federal political committee. **C** C00299750

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	01	/	2026

Transaction ID : SA11C.69829

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

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

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	16500.00
TOTAL This Period (last page this line number only).....	16500.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

Full Name (Last, First, Middle Initial) A. ASPECT CONSULTING LLC		Date of Disbursement MM / DD / YYYY 01 / 06 / 2026
Mailing Address 8383 GREENWAY BOULEVARD SUITE 600		FEC Identification Number C [] Transaction ID : SB21B.I9968
City MIDDLETON	State WI	Zip Code 53562
Purpose of Disbursement COMPLIANCE CONSULTING		Amount of Each Disbursement this Period [] 500.00
Candidate Name		Category/Type []
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:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. ISTREAM FINANCIAL SERVICES		Date of Disbursement MM / DD / YYYY 01 / 06 / 2026
Mailing Address 13555 BISHOPS COURT #102		FEC Identification Number C [] Transaction ID : SB21B.I9967
City BROOKFIELD	State WI	Zip Code 53005
Purpose of Disbursement CHECK PROCESSING FEE		Amount of Each Disbursement this Period [] 41.72
Candidate Name		Category/Type []
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:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. JOHNSON BANK		Date of Disbursement MM / DD / YYYY 01 / 06 / 2026
Mailing Address 1 S MAIN STREET		FEC Identification Number C [] Transaction ID : SB21B.I9969
City JANESVILLE	State WI	Zip Code 53545
Purpose of Disbursement BANKING FEE		Amount of Each Disbursement this Period [] 15.00
Candidate Name		Category/Type []
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:		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[] 556.72
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 16 / 2026

FEC Identification Number

C

Transaction ID : SB21B.I9970

Amount of Each Disbursement this Period

250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLC

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209-2515

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 26 / 2026

FEC Identification Number

C

Transaction ID : SB21B.I9971

Amount of Each Disbursement this Period

357.29

Memo Item

Full Name (Last, First, Middle Initial)

C. ISTREAM FINANCIAL SERVICES

Mailing Address 13555 BISHOPS COURT #102

City BROOKFIELD State WI Zip Code 53005

Purpose of Disbursement
CHECK PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 04 / 2026

FEC Identification Number

C

Transaction ID : SB21B.I9972

Amount of Each Disbursement this Period

42.00

Memo Item

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

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

649.29

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

A. ASPECT CONSULTING LLC

Full Name (Last, First, Middle Initial)

Mailing Address 8383 GREENWAY BOULEVARD
SUITE 600

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 06 / 2026

FEC Identification Number: C
Transaction ID : SB21B.I9974

Amount of Each Disbursement this Period: 500.00

Memo Item

B. COYLE CONSULTING SERVICES, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 3494 SABAKA TRAIL

City VERONA State WI Zip Code 53593-9580

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 06 / 2026

FEC Identification Number: C
Transaction ID : SB21B.I9973

Amount of Each Disbursement this Period: 16462.50

Memo Item

C. JOHNSON BANK

Full Name (Last, First, Middle Initial)

Mailing Address 1 S MAIN STREET

City JANESVILLE State WI Zip Code 53545

Purpose of Disbursement BANKING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 06 / 2026

FEC Identification Number: C
Transaction ID : SB21B.I9975

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 16977.50

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

Full Name (Last, First, Middle Initial)

A. JOHNSON BANK

Mailing Address 1 S MAIN STREET

City
JANESVILLE

State
WI

Zip Code
53545

Purpose of Disbursement

BANKING FEE

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
0	2		0	6		2	0	2	6

FEC Identification Number

C

Transaction ID : SB21B.I9976

Amount of Each Disbursement this Period

15.00

Memo Item

Full Name (Last, First, Middle Initial)

B. VILLAGE GRAPHICS PRINTING, LLC

Mailing Address 108 WEST CAPITOL DRIVE

City
HARTLAND

State
WI

Zip Code
53029-2042

Purpose of Disbursement

PRINTING

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
0	2		1	1		2	0	2	6

FEC Identification Number

C

Transaction ID : SB21B.I9977

Amount of Each Disbursement this Period

230.28

Memo Item

Full Name (Last, First, Middle Initial)

C. COYLE CONSULTING SERVICES, LLC

Mailing Address 3494 SABAKA TRAIL

City
VERONA

State
WI

Zip Code
53593-9580

Purpose of Disbursement

FUNDRAISING CONSULTING

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
0	2		1	2		2	0	2	6

FEC Identification Number

C

Transaction ID : SB21B.I9978

Amount of Each Disbursement this Period

350.00

Memo Item

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

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

595.28

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

Full Name (Last, First, Middle Initial)

A. JOHNSON BANK

Mailing Address 1 S MAIN STREET

City
JANESVILLE

State
WI

Zip Code
53545

Purpose of Disbursement

BANKING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	8			2	0	2	6		

FEC Identification Number

C

Transaction ID : SB21B.I9982

Amount of Each Disbursement this Period

15.00

Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLC

Mailing Address 1776 WILSON BLVD
SUITE 530

City
ARLINGTON

State
VA

Zip Code
22209-2515

Purpose of Disbursement

CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	3			2	0	2	6		

FEC Identification Number

C

Transaction ID : SB21B.I9983

Amount of Each Disbursement this Period

485.29

Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLC

Mailing Address 1776 WILSON BLVD
SUITE 530

City
ARLINGTON

State
VA

Zip Code
22209-2515

Purpose of Disbursement

CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	2			2	0	2	6		

FEC Identification Number

C

Transaction ID : SB21B.I9984

Amount of Each Disbursement this Period

264.46

Memo Item

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

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

764.75

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Steil Victory Fund

Full Name (Last, First, Middle Initial)

A. THE CHARLES GROUP LLC

Mailing Address 2907 BUTTERFIELD ROAD #150
SUITE 150

City
OAK BROOK

State
IL

Zip Code
60523-8002

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2026

FEC Identification Number

C []
Transaction ID : SB21B.I9987

Amount of Each Disbursement this Period

[] 10700.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ISTREAM FINANCIAL SERVICES

Mailing Address 13555 BISHOPS COURT #102

City
BROOKFIELD

State
WI

Zip Code
53005

Purpose of Disbursement
CHECK PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2026

FEC Identification Number

C []
Transaction ID : SB21B.I9989

Amount of Each Disbursement this Period

[] 43.88

Memo Item

Full Name (Last, First, Middle Initial)

C. JOHNSON BANK

Mailing Address 1 S MAIN STREET

City
JANESVILLE

State
WI

Zip Code
53545

Purpose of Disbursement
BANKING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2026

FEC Identification Number

C []
Transaction ID : SB21B.I9994

Amount of Each Disbursement this Period

[] 15.00

Memo Item

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

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

[] 10758.88

[]

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

A. JOHNSON BANK

Full Name (Last, First, Middle Initial)

Mailing Address 1 S MAIN STREET

City JANESVILLE State WI Zip Code 53545

Purpose of Disbursement BANKING FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 05 / 2026

FEC Identification Number: C

Transaction ID : SB21B.I9996

Amount of Each Disbursement this Period: 15.00

Memo Item

B. COYLE CONSULTING SERVICES, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 3494 SABAKA TRAIL

City VERONA State WI Zip Code 53593-9580

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2026

FEC Identification Number: C

Transaction ID : SB21B.I9997

Amount of Each Disbursement this Period: 5252.97

Memo Item

C. JOHNSON BANK

Full Name (Last, First, Middle Initial)

Mailing Address 1 S MAIN STREET

City JANESVILLE State WI Zip Code 53545

Purpose of Disbursement BANKING FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2026

FEC Identification Number: C

Transaction ID : SB21B.I9998

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5282.97

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

A. WINRED TECHNICAL SERVICES LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209-2515

Purpose of Disbursement CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 03 / 16 / 2026

FEC Identification Number C

Transaction ID : SB21B.I9999

Amount of Each Disbursement this Period 287.14

Memo Item

B. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 03 / 17 / 2026

FEC Identification Number C

Transaction ID : SB21B.I1000C

Amount of Each Disbursement this Period 250.00

Memo Item

C. BRIARWOOD STRATEGIES

Full Name (Last, First, Middle Initial)

Mailing Address 1527 31ST STREET NORTHWEST

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 03 / 19 / 2026

FEC Identification Number C

Transaction ID : SB21B.I1000

Amount of Each Disbursement this Period 1100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1637.14

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

Full Name (Last, First, Middle Initial)

A. JOHNSON BANK

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	9			2	0	2	6		

Mailing Address 1 S MAIN STREET

City JANESVILLE State WI Zip Code 53545

FEC Identification Number

C []
Transaction ID : SB21B.I10003
 Amount of Each Disbursement this Period
 [] 15.00

Purpose of Disbursement
BANKING FEE
Candidate Name

Category/
Type

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

Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	0			2	0	2	6		

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22209-2515

FEC Identification Number

C []
Transaction ID : SB21B.I10003
 Amount of Each Disbursement this Period
 [] 48.00

Purpose of Disbursement
CREDIT CARD PROCESSING FEE
Candidate Name

Category/
Type

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

Memo Item

Full Name (Last, First, Middle Initial)

C. JOHNSON BANK

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	2	6		

Mailing Address 1 S MAIN STREET

City JANESVILLE State WI Zip Code 53545

FEC Identification Number

C []
Transaction ID : SB21B.I1000
 Amount of Each Disbursement this Period
 [] 15.00

Purpose of Disbursement
BANKING FEE
Candidate Name

Category/
Type

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

Memo Item

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

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

[] 78.00
 []

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

Full Name (Last, First, Middle Initial) A. JOHNSON BANK		Date of Disbursement MM / DD / YYYY 03 / 31 / 2026	
Mailing Address 1 S MAIN STREET		FEC Identification Number C []	
City JANESVILLE	State WI	Zip Code 53545	Transaction ID : SB21B.I1000! Amount of Each Disbursement this Period [] 15.00
Purpose of Disbursement BANKING FEE		Category/Type []	
Candidate Name		Memo Item <input type="checkbox"/>	
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.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C []	
City	State	Zip Code	Amount of Each Disbursement this Period []
Purpose of Disbursement		Category/Type []	
Candidate Name		Memo Item <input type="checkbox"/>	
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	Amount of Each Disbursement this Period []
Purpose of Disbursement		Category/Type []	
Candidate Name		Memo Item <input type="checkbox"/>	
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).....▶	[] 15.00
TOTAL This Period (last page this line number only).....▶	[] 38296.96

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

A. STEIL FOR WISCONSIN, INC.

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 103

City OAK CREEK State WI Zip Code 53154

Purpose of Disbursement
TRANSFER OF NET PROCEEDS

Candidate Name
STEIL, BRYAN, , ,

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

State: WI District: 01

Date of Disbursement: 03 / 05 / 2026

FEC Identification Number: C H8WI01156
Transaction ID : SB22.I9990
Amount of Each Disbursement this Period: 40512.47

Memo Item

B. STEIL FOR WISCONSIN, INC.

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 103

City OAK CREEK State WI Zip Code 53154

Purpose of Disbursement
TRANSFER OF NET PROCEEDS

Candidate Name
STEIL, BRYAN, , ,

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

State: WI District: 01

Date of Disbursement: 03 / 05 / 2026

FEC Identification Number: C H8WI01156
Transaction ID : SB22.I9991
Amount of Each Disbursement this Period: 18748.05

Memo Item

C. ON WISCONSIN PAC, INC.

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 103

City OAK CREEK State WI Zip Code 53154

Purpose of Disbursement
TRANSFER OF NET PROCEEDS

Candidate Name

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

State: District:

Date of Disbursement: 03 / 05 / 2026

FEC Identification Number: C C00697326
Transaction ID : SB22.I9992
Amount of Each Disbursement this Period: 55026.32

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 114286.84

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Steil Victory Fund

Full Name (Last, First, Middle Initial)

A. STEIL FOR WISCONSIN, INC.

Mailing Address PO BOX 103

City OAK CREEK State WI Zip Code 53154

Purpose of Disbursement
TRANSFER OF NET PROCEEDS

Candidate Name
STEIL, BRYAN, . .

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

Disbursement For: 2026
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2026

FEC Identification Number

C H8WI01156
Transaction ID : SB22.I10008

Amount of Each Disbursement this Period
43232.01

Memo Item

Full Name (Last, First, Middle Initial)

B. ON WISCONSIN PAC, INC.

Mailing Address PO BOX 103

City OAK CREEK State WI Zip Code 53154

Purpose of Disbursement
TRANSFER OF NET PROCEEDS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2026

FEC Identification Number

C C00697326
Transaction ID : SB22.I10006

Amount of Each Disbursement this Period
2687.03

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

45919.04

308528.49