

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

FRIENDS OF ZELDA

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2025 To: M M / D D / Y Y Y Y 09 / 30 / 2025

	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))	11652.00	11652.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	11652.00	11652.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	913.29	913.29
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	913.29	913.29
8. Cash on Hand at Close of Reporting Period (from Line 27)		
	23981.86	
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)		
	1500.00	

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

FRIENDS OF ZELDA

Report Covering the Period: From: M M / D D / Y Y Y Y
07 / 01 / 2025 To: M M / D D / Y Y Y Y
09 / 30 / 2025

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).....	9492.00	9492.00
(ii) Unitemized.....	1460.00	1460.00
(iii) TOTAL of contributions from individuals ▶	10952.00	10952.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	700.00	700.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	11652.00	11652.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	1500.00	1500.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	1500.00	1500.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	13152.00	13152.00

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.....	913.29	913.29
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	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	913.29	913.29

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	11743.15
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	13152.00
25. SUBTOTAL (add Line 23 and Line 24).....	24895.15
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	913.29
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	23981.86

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 5 OF 16	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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)
FRIENDS OF ZELDA

A. Full Name (Last, First, Middle Initial)
Ahrens, David, , ,

Mailing Address 100 Vista Lake Dr Apt 4

City Candler	State NC	Zip Code 28715
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FEC ID number of contributing federal political committee.

Name of Employer Engineer	Occupation Pitney Bowes
------------------------------	----------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4118

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 21 Robinhood Road

City Asheville	State NC	Zip Code 28804
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FEC ID number of contributing federal political committee.

Name of Employer Not Employed	Occupation Not Employed
----------------------------------	----------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4180

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 45 Windiridge Dr

City Canton	State NC	Zip Code 28716-3993
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FEC ID number of contributing federal political committee.

Name of Employer Assistance Maintenance Supervisor	Occupation Pegasus Residential
---	-----------------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4178

Amount of Each Receipt this Period

Memo Item

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF ZELDA

A. Full Name (Last, First, Middle Initial)
Canary, Shady, , ,

Mailing Address 45 Windiridge Dr

City Canton State NC Zip Code 28716-3993

FEC ID number of contributing federal political committee. C

Name of Employer Assistance Maintenance Supervisor Occupation Pegasus Residential

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 18 / 2025

Transaction ID : SA11AI.4155

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 7517 Tripper Ln

City Charlotte State NC Zip Code 28226

FEC ID number of contributing federal political committee. C

Name of Employer Leader Occupation QDS

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 22 / 2025

Transaction ID : SA11AI.4120

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Healy, Virginia Anne, , ,

Mailing Address 169 Windsor Road

City Asheville State NC Zip Code 28804

FEC ID number of contributing federal political committee. C

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 22 / 2025

Transaction ID : SA11AI.4157

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1600.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 16
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF ZELDA

A. Full Name (Last, First, Middle Initial)
Hintz, Anne, , ,

Mailing Address 49 Nethermead Dr

City Asheville State NC Zip Code 28803

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation self

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 03 / 2025

Transaction ID : SA11AI.4144

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 3709 Packsaddle

City Horseshoe Bay State TX Zip Code 78657

FEC ID number of contributing federal political committee. C

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 02 / 2025

Transaction ID : SA11AI.4142

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 83 Junaluska Rd

City Brevard State NC Zip Code 28712

FEC ID number of contributing federal political committee. C

Name of Employer Not Employed Occupation Not employed

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 17 / 2025

Transaction ID : SA11AI.4154

Amount of Each Receipt this Period
400.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 OF 16
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF ZELDA

A. Full Name (Last, First, Middle Initial)
Milito, Stephen, , ,

Mailing Address 1412 Proctor Rd

City Lake Lure State NC Zip Code 28746

FEC ID number of contributing federal political committee. C

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 12 / 2025

Transaction ID : SA11AI.4150

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 119 Glenwood Rd

City Hendersonville State NC Zip Code 28791

FEC ID number of contributing federal political committee. C

Name of Employer Teller Occupation Secu

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11AI.4170

Amount of Each Receipt this Period
140.00

Memo Item

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

Mailing Address 3160 Sycamore Blf

City Cumming State GA Zip Code 30041

FEC ID number of contributing federal political committee. C

Name of Employer Podiatrist Occupation AFCOG

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
251.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 17 / 2025

Transaction ID : SA11AI.4114

Amount of Each Receipt this Period
251.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 641.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 16
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF ZELDA

A. Full Name (Last, First, Middle Initial)
Thaker, Tejaswi, , ,

Mailing Address 612 Cavendish Ln

City Waxhaw State NC Zip Code 28173

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

Name of Employer It Professional Occupation AIG

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
501.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 14 / 2025

Transaction ID : SA11AI.4108

Amount of Each Receipt this Period
501.00

Memo Item

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

Mailing Address 612 Cavendish Ln

City Waxhaw State NC Zip Code 28173

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

Name of Employer It Professional Occupation AIG

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
601.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 25 / 2025

Transaction ID : SA11AI.4158

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 95 Horizon Hill Road

City Asheville State NC Zip Code 28804

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

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 07 / 2025

Transaction ID : SA11AI.4128

Amount of Each Receipt this Period
500.00

Memo Item

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

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

1101.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 OF 16
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF ZELDA

A. Full Name (Last, First, Middle Initial)
Wilcox, Crystal, , ,

Mailing Address 190 Joyner Ave

City Asheville State NC Zip Code 28806

FEC ID number of contributing federal political committee. C

Name of Employer Analyst Occupation Various

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 09 / 2025

Transaction ID : SA11AI.4148

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	9492.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF ZELDA

A. Full Name (Last, First, Middle Initial)
BRIARWOOD, ZELDA, , ,

Mailing Address 45 WINDIRIDGE DR

City CANTON	State NC	Zip Code 28716
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FEC ID number of contributing federal political committee. **C** H6NC11214

Name of Employer QDS Quality Data Systems	Occupation Service Technician
--	----------------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 02 / 2025

Transaction ID : SA11D.4176

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 45 WINDIRIDGE DR

City CANTON	State NC	Zip Code 28716
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FEC ID number of contributing federal political committee. **C** H6NC11214

Name of Employer QDS Quality Data Systems	Occupation Service Technician
--	----------------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 07 / 2025

Transaction ID : SA11D.4177

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address

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

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

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	700.00
TOTAL This Period (last page this line number only)..... ▶	700.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 12 OF 16	
<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF ZELDA

A. Full Name (Last, First, Middle Initial)
BRIARWOOD, ZELDA, , ,

Mailing Address 45 WINDIRIDGE DR

City CANTON	State NC	Zip Code 28716
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FEC ID number of contributing federal political committee. **C** H6NC11214

Name of Employer QDS Quality Data Systems	Occupation Service Technician
--	----------------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 01 / 2025

Transaction ID : SA13A.4218

Amount of Each Receipt this Period
1500.00

Memo Item

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	1500.00

**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 13 OF 16			
	<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)
FRIENDS OF ZELDA

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. ActBlue		M M / D D / Y Y Y Y 08 / 11 / 2025
Mailing Address PO Box 962017		FEC Identification Number
City Boston	State MA	Zip Code 02196-2017
Purpose of Disbursement Registration Fee		007
Candidate Name FRIENDS OF ZELDA		Category/ Type
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) ▼	Amount of Each Disbursement this Period 150.00
State: NC District: 11		Transaction ID : SB17.4199
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. ActBlue		M M / D D / Y Y Y Y 08 / 13 / 2025
Mailing Address PO Box 962017		FEC Identification Number
City Boston	State MA	Zip Code 02196-2017
Purpose of Disbursement Service Fee		003
Candidate Name FRIENDS OF ZELDA		Category/ Type
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) ▼	Amount of Each Disbursement this Period 19.75
State: NC District: 11		Transaction ID : SB17.4198
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. ActBlue		M M / D D / Y Y Y Y 08 / 27 / 2025
Mailing Address PO Box 962017		FEC Identification Number
City Boston	State MA	Zip Code 02196-2017
Purpose of Disbursement Service Fee		003
Candidate Name FRIENDS OF ZELDA		Category/ Type
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) ▼	Amount of Each Disbursement this Period 4.35
State: NC District: 11		Transaction ID : SB17.4195
		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	174.10
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 16	
	<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)
FRIENDS OF ZELDA

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. ActBlue		M M / D D / Y Y Y Y 09 / 04 / 2025
Mailing Address PO Box 962017		FEC Identification Number
City Boston	State MA	Zip Code 02196-2017
Purpose of Disbursement Service Fee	003	
Candidate Name FRIENDS OF ZELDA	Category/ Type	
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: NC District: 11	Amount of Each Disbursement this Period 7.32	
		Transaction ID : SB17.4191
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. ActBlue		M M / D D / Y Y Y Y 09 / 10 / 2025
Mailing Address PO Box 962017		FEC Identification Number
City Boston	State MA	Zip Code 02196-2017
Purpose of Disbursement Service Fee	003	
Candidate Name FRIENDS OF ZELDA	Category/ Type	
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: NC District: 11	Amount of Each Disbursement this Period 24.12	
		Transaction ID : SB17.4190
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. ActBlue		M M / D D / Y Y Y Y 09 / 17 / 2025
Mailing Address PO Box 962017		FEC Identification Number
City Boston	State MA	Zip Code 02196-2017
Purpose of Disbursement Service Fee	003	
Candidate Name FRIENDS OF ZELDA	Category/ Type	
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: NC District: 11	Amount of Each Disbursement this Period 49.38	
		Transaction ID : SB17.4187
		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	80.82
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 16	
	<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)
FRIENDS OF ZELDA

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. ActBlue		M M / D D / Y Y Y Y 09 / 24 / 2025	
Mailing Address PO Box 962017		FEC Identification Number	
City Boston	State MA	Zip Code 02196-2017	C C00905679
Purpose of Disbursement Service Fee		Category/ Type	Amount of Each Disbursement this Period
		003	19.95
Candidate Name FRIENDS OF ZELDA		Transaction ID : SB17.4184	
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: NC District: 11			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. VistaPrint		M M / D D / Y Y Y Y 09 / 22 / 2025	
Mailing Address 95 Hayden Avenue		FEC Identification Number	
City Lexington	State MA	Zip Code 02421-7942	C C00905679
Purpose of Disbursement Printing		Category/ Type	Amount of Each Disbursement this Period
		006	278.92
Candidate Name FRIENDS OF ZELDA		Transaction ID : SB17.4186	
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: NC District: 11			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C.		M M / D D / Y Y Y Y	
Mailing Address		FEC Identification Number	
City	State	Zip Code	C
Purpose of Disbursement		Category/ Type	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).....▶	298.87
TOTAL This Period (last page this line number only).....▶	553.79

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4218**
FRIENDS OF ZELDA

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2026
BRIARWOOD, ZELDA, , ,		<input checked="" type="checkbox"/> Primary
Mailing Address 45 WINDIRIDGE DR		<input type="checkbox"/> General
City CANTON		<input type="checkbox"/> Other (specify) ▼
State NC	ZIP Code 28716	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 1500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1500.00
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TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 07 / 01 / 2025	M M / D D / Y Y Y Y NA	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....▶	1500.00
TOTALS This Period (last page in this line only).....▶	1500.00

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