

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Working Families Party PAC

ADDRESS (number and street)

77 Sands Street

Check if different
than previously
reported. (ACC)

Brooklyn

NY

11201

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00606962

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☒ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Boland, Mike, , ,

Signature of Treasurer

Boland, Mike, , ,

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Working Families Party PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y 02 / 01 / 2026 To: M M / D D / Y Y Y Y Y 02 / 28 / 2026

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2026		4985394.14
(b) Cash on Hand at Beginning of Reporting Period.....	6783992.78	
(c) Total Receipts (from Line 19)	462261.05	2703369.34
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	7246253.83	7688763.48
7. Total Disbursements (from Line 31)	1499761.66	1942271.31
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5746492.17	5746492.17
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	9966.50	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	1707617.29	



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

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Working Families Party PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y
 02 / 01 / 2026

To:

 M M / D D / Y Y Y Y
 02 / 28 / 2026

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).....	16902.18	27793.18
(ii) Unitemized	80584.87	158809.80
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	97487.05	186602.98
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	97487.05	186602.98
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.).....	364774.00	2516766.36
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))	462261.05	2703369.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	462261.05	2703369.34

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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	1079772.32	1103342.41
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1079772.32	1103342.41
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	284012.63	388619.71
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).....	135976.71	450309.19
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)) ..	1499761.66	1942271.31
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1499761.66	1942271.31

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)	97487.05	186602.98
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	97487.05	186602.98
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1079772.32	1103342.41
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1079772.32	1103342.41

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 203

(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)

Working Families Party PAC

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

A. Brisbin, David, , ,

Mailing Address 2324 La Mesa Dr

City
Santa Monica

State
CA

Zip Code
90402-2331

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
David Brisbin

Occupation (for Individual)
performer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

MM / DD / YYYY
02 / 06 / 2026

Transaction ID : 2684552

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. Brisbin, David, , ,

Mailing Address 2324 La Mesa Dr

City
Santa Monica

State
CA

Zip Code
90402-2331

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
David Brisbin

Occupation (for Individual)
performer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

MM / DD / YYYY
02 / 13 / 2026

Transaction ID : 2684553

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Brisbin, David, , ,

Mailing Address 2324 La Mesa Dr

City
Santa Monica

State
CA

Zip Code
90402-2331

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
David Brisbin

Occupation (for Individual)
performer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

675.00

Date of Receipt

MM / DD / YYYY
02 / 16 / 2026

Transaction ID : 2684554

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

175.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 203

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Brotsky, Louise, , ,

Mailing Address 1713 Sanchez St

City
San FranciscoState
CAZip Code
94131-2740FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not EmployedOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 23 / 2026

Transaction ID : 2685227

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Brotsky, Louise, , ,

Mailing Address 1713 Sanchez St

City
San FranciscoState
CAZip Code
94131-2740FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not EmployedOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 24 / 2026

Transaction ID : 2685228

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Brotsky, Louise, , ,

Mailing Address 1713 Sanchez St

City
San FranciscoState
CAZip Code
94131-2740FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not EmployedOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 24 / 2026

Transaction ID : 2685229

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

250.00

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

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

FOR LINE NUMBER: PAGE 8 OF 203

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Caton, Lisa, , ,

Mailing Address 453 Federal City Rd

City
Pennington

State
NJ

Zip Code
08534-4210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 10 / 2026

Transaction ID : 2682471

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Curran, Daniel, , ,

Mailing Address 711 Cornelia Pl

City
Philadelphia

State
PA

Zip Code
19118-4108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 15 / 2026

Transaction ID : 2684126

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Daruvala, Jacob, , ,

Mailing Address 2300 Vista Ridge Cir

City
Norco

State
CA

Zip Code
92860-3734

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

238.00

Date of Receipt

MM / DD / YYYY
02 / 09 / 2026

Transaction ID : 2686433

Amount of Each Receipt this Period

238.00

☐ Memo Item

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

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

738.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 203

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Dinsmore, Francis, , ,

Mailing Address 2311 Macdonough Rd

City
WilmingtonState
DEZip Code
19805-2620FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not EmployedOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 15 / 2026

Transaction ID : 2686767

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. funk jr, herman, , ,

Mailing Address 4505 Hemlock Cone Way

City
Ellicott CityState
MDZip Code
21042-5937FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not EmployedOccupation (for Individual)
Not Employed

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
02 / 25 / 2026

Transaction ID : 2686935

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Garnett, Richard, , ,Mailing Address 1181 Edgcumbe Rd
Apt 1702City
Saint PaulState
MNZip Code
55105-2837FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not EmployedOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 25 / 2026

Transaction ID : 2686941

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)..... ►

1250.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 203

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Hardison, Robert L, , ,

Mailing Address 1940 Timber Canyon Rd

City
Santa PaulaState
CAZip Code
93060-9644FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not EmployedOccupation (for Individual)
Not Employed

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
02 / 17 / 2026

Transaction ID : 2686797

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Hewat, Tracy, H, ,

Mailing Address 53 Wingate Rd

City
ProvidenceState
RIZip Code
02906-4939FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
selfOccupation (for Individual)
Consultant

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
02 / 24 / 2026

Transaction ID : 2681883

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

C. Jo, Haz, , ,

Mailing Address 3471 Kroy Way

City
SacramentoState
CAZip Code
95820-2041FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
stateOccupation (for Individual)
researcher

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

60.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 24 / 2026

Transaction ID : 2686445

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

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

5310.00

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 203

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Jo, Haz, , ,

Mailing Address 3471 Kroy Way

City
SacramentoState
CAZip Code
95820-2041FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
stateOccupation (for Individual)
researcher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 27 / 2026

Transaction ID : 2686438

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

B. Kingston, Rayna, , ,

Mailing Address 4305 Kalamath St

City
DenverState
COZip Code
80211-2416FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self EmployedOccupation (for Individual)
Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1104.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 23 / 2026

Transaction ID : 2686887

Amount of Each Receipt this Period

1104.18

☐ Memo Item

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

C. Liman, Mac, , ,

Mailing Address 1316 Mariposa St

City
DenverState
COZip Code
80204-2506FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UnemployedOccupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 17 / 2026

Transaction ID : 2686226

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)..... ►

1804.18

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

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

FOR LINE NUMBER: PAGE 12 OF 203

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Maass, Steve, , ,

Mailing Address 9333 Fox Ln

City
Sebastopol

State
CA

Zip Code
95472-2123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not employed

Occupation (for Individual)
Not employed

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
02 / 14 / 2026

Transaction ID : 2686751

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. McKinley, Micky, , ,

Mailing Address 31 Moser St

City
Northampton

State
MA

Zip Code
01060-3645

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 16 / 2026

Transaction ID : 2681969

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. McKinley, Micky, , ,

Mailing Address 31 Moser St

City
Northampton

State
MA

Zip Code
01060-3645

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 27 / 2026

Transaction ID : 2681970

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

450.00

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

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

FOR LINE NUMBER: PAGE 13 OF 203

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. McPherson, Cindy, , ,

Mailing Address 7331 Waldo Ln

City
El Cerrito

State
CA

Zip Code
94530-2958

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CCC

Occupation (for Individual)
Business Systems Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

02 / 03 / 2026

Transaction ID : 2686509

Amount of Each Receipt this Period

3000.00

☐ Memo Item

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

B. Mills, Leila, , ,

Mailing Address 737 Olivieri Ln

City
Virginia Beach

State
VA

Zip Code
23455-5730

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TechArk Solutions

Occupation (for Individual)
Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1280.00

Date of Receipt

02 / 20 / 2026

Transaction ID : 2684886

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

C. Moody, Katie, , ,

Mailing Address 3960 W Gulf Dr

City
Sanibel

State
FL

Zip Code
33957-5208

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

02 / 25 / 2026

Transaction ID : 2686342

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

3090.00

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 203

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Paysen, Robert, , ,

Mailing Address PO Box 477

City
Bethany

State
WV

Zip Code
26032-0477

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 ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 17 / 2026

Transaction ID : 2681882

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Rabinowitz, Jesse, , ,

Mailing Address 1260 21st St NW

City
Washington

State
DC

Zip Code
20036-2300

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
National Homelessness Law Center

Occupation (for Individual)
Comms director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 09 / 2026

Transaction ID : 2682049

Amount of Each Receipt this Period

170.00

☐ Memo Item

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

C. Rainey, Caleb, , ,

Mailing Address 1703 Logan Ave

City
San Diego

State
CA

Zip Code
92113-1051

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Arts Org

Occupation (for Individual)
Fundraiser

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
02 / 17 / 2026

Transaction ID : 2683851

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

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

545.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 203

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Reinhard, Theresa, , ,Mailing Address 89 Turner St
Apt 3City
BostonState
MAZip Code
02135-2890FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AvaapOccupation (for Individual)
Consultant

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
02 / 18 / 2026

Transaction ID : 2686332

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. Schechter, Daniel, , ,

Mailing Address 88 Honuhula Pl

City
KiheiState
HIZip Code
96753-6092FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not EmployedOccupation (for Individual)
Not Employed

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
02 / 26 / 2026

Transaction ID : 2686977

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Schneewind, Sarah, , ,

Mailing Address 3635 7th Ave

City
San DiegoState
CAZip Code
92103-4330FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UC, San DiegoOccupation (for Individual)
Professor

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
02 / 06 / 2026

Transaction ID : 2682249

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

1750.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 16 OF 203
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Schneewind, Sarah, , ,

Mailing Address 3635 7th Ave

City
San DiegoState
CAZip Code
92103-4330FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

UC, San Diego

Occupation (for Individual)

Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 26 / 2026**Transaction ID : 2682250**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Sharma, Suriya, , ,

Mailing Address 5 Maxwellton Rd

City
PiedmontState
CAZip Code
94618-2641FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Filevine

Occupation (for Individual)

Strategy & Ops

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
02 / 27 / 2026**Transaction ID : 2687009**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Tilley, Ron, , ,

Mailing Address 2016 Green St

City
HarrisburgState
PAZip Code
17102-2127FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

UPMC

Occupation (for Individual)

Chaplain

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

241.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 18 / 2026**Transaction ID : 2687055**

Amount of Each Receipt this Period

40.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

540.00

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 203

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. voelbel, richard, , ,

Mailing Address 4446 Thomas Ave S

City
Minneapolis

State
MN

Zip Code
55410-1968

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not employed

Occupation (for Individual)
Not employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 06 / 2026

Transaction ID : 2686524

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

B.

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

C.

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

1000.00

16902.18

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 18 OF 203
(check only one)

☐ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☒ 17
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. 32BJ United ADFMailing Address 25 W 18th St
Fl 5City
New YorkState
NYZip Code
10011-4676FEC ID number of contributing
federal political committee.

C

C00355289

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 26 / 2026

Transaction ID : 2681868

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Contribution to non-contribution account

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

B. Freedom PA

Mailing Address 1414 Brighton Rd

City
PittsburghState
PAZip Code
15212-4478FEC 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 ▼

8000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 06 / 2026

Transaction ID : 2681869

Amount of Each Receipt this Period

8000.00

☐ Memo Item

Contribution to non-contribution account

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

C. Gores, Henrietta Drewry, , ,

Mailing Address 3125 Wold Ave

City
CincinnatiState
OHZip Code
45207-1911FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Kohnen & Patton LLPOccupation (for Individual)
Attorney

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
02 / 10 / 2026

Transaction ID : 2681833

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Contribution to non-contribution account

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

38000.00

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 19 OF 203

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Liebman, Becky, , ,

Mailing Address 440 N Barranca Ave

City
Covina

State
CA

Zip Code
91723-1722

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

02 / **25** / **2026**

Transaction ID : 2681834

Amount of Each Receipt this Period

50000.00

☐ Memo Item

Contribution to non-contribution account

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

B. MOVEMENT VOTER PAC

Mailing Address PO Box 1719

City
Northampton

State
MA

Zip Code
01061-1719

FEC ID number of contributing
federal political committee.

C C00728360

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

02 / **17** / **2026**

Transaction ID : 2681870

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Contribution to non-contribution account

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

C. MoveOn.Org Political Action

Mailing Address PO Box 9063

City
Berkeley

State
CA

Zip Code
94709-0063

FEC ID number of contributing
federal political committee.

C C00341396

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

02 / **25** / **2026**

Transaction ID : 2681871

Amount of Each Receipt this Period

15000.00

☐ Memo Item

Contribution to non-contribution account

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

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

90000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 20 OF 203
(check only one)

☐ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☒ 17			

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. National Korean American Service and Education Consortium Action Fund

Mailing Address 4300 N California Ave

City
ChicagoState
ILZip Code
60618-1514FEC 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 ▼

1125.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 03 / 2026**Transaction ID : 2692707**

Amount of Each Receipt this Period

1125.00

☐ Memo ItemIn-Kind Contribution FEC# 1944728 Expense on
Schedule E # 500001644

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

B. Popular Democracy In ActionMailing Address 449 Troutman St
Ste ACity
BrooklynState
NYZip Code
11237-2790FEC 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 ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 13 / 2026**Transaction ID : 2681872**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Contribution to non-contribution account

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

C. Reily, Elaine, , ,

Mailing Address 195 Chestnut Ave

City
Jamaica PlainState
MAZip Code
02130-4410FEC ID number of contributing
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)
support staff

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 10 / 2026**Transaction ID : 2681836**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Contribution to non-contribution account

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

31125.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 21 OF 203
(check only one)

☐ 11a	☐ 11b	☐ 11c	☐ 12	☒ 17
☐ 13	☐ 14	☐ 15	☐ 16	

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. RU AAUP PAC

Mailing Address 11 Stone St

City
New BrunswickState
NJZip Code
08901-1280FEC 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 ▼

5500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 10 / 2026**Transaction ID : 2681873**

Amount of Each Receipt this Period

5500.00

☐ Memo Item

Contribution to non-contribution account

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

B. Tanner, Darryl, , ,Mailing Address 973 Summit St
BlankCity
ColumbusState
OHZip Code
43201-6507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
King Memory IncOccupation (for Individual)
CEO

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
02 / 02 / 2026**Transaction ID : 2681837**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Contribution to non-contribution account

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

C. Tanner, Darryl, , ,Mailing Address 973 Summit St
BlankCity
ColumbusState
OHZip Code
43201-6507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
King Memory IncOccupation (for Individual)
CEO

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
02 / 10 / 2026**Transaction ID : 2681838**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Contribution to non-contribution account

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

20500.00

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 203

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Tanner, Darryl, , ,

Mailing Address 973 Summit St
Blank

City
Columbus

State
OH

Zip Code
43201-6507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
King Memory Inc

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

02 / **24** / **2026**

Transaction ID : 2681839

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Contribution to non-contribution account

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

B. Thomas, Elizabeth Allison, , ,

Mailing Address 3510 Multiview Dr

City
Los Angeles

State
CA

Zip Code
90068-1222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
Producer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75000.00

Date of Receipt

02 / **23** / **2026**

Transaction ID : 2681832

Amount of Each Receipt this Period

75000.00

☐ Memo Item

Contribution to non-contribution account

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

C. Willow Action LLC

Mailing Address 440 N Barranca Ave
3947

City
Covina

State
CA

Zip Code
91723-1722

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 ▼

104000.00

Date of Receipt

02 / **19** / **2026**

Transaction ID : 2681874

Amount of Each Receipt this Period

104000.00

☐ Memo Item

Contribution to non-contribution account

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

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

184000.00

363625.00

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Ackerman, Sara, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001722

Amount of Each Disbursement this Period

4240.62

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Ackerman, Sara, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001771

Amount of Each Disbursement this Period

4725.26

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Ackerman, Sara, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001772

Amount of Each Disbursement this Period

3634.82

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Ackerman, Sara, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002003**

Amount of Each Disbursement this Period

6220.53

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. ActBlue

Mailing Address 366 Summer St

City
SomervilleState
MAZip Code
02144-3132

Purpose of Disbursement

Online contribution processor fee

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	4			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001694**

Amount of Each Disbursement this Period

2.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue

Mailing Address 366 Summer St

City
SomervilleState
MAZip Code
02144-3132

Purpose of Disbursement

Online contribution processor fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : 500001701**

Amount of Each Disbursement this Period

3529.90

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3532.15

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. ActBlue

Mailing Address 366 Summer St

City
Somerville

State
MA

Zip Code
02144-3132

Purpose of Disbursement

Online contribution processor fees

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 28 / 2026

FEC Identification Number

C

Transaction ID : 500001702

Amount of Each Disbursement this Period

28.19

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue

Mailing Address 366 Summer St

City
Somerville

State
MA

Zip Code
02144-3132

Purpose of Disbursement

Online contribution processor fees

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 28 / 2026

FEC Identification Number

C

Transaction ID : 500001703

Amount of Each Disbursement this Period

3.58

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Aidoo, Michael, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001773

Amount of Each Disbursement this Period

3532.80

☒ Memo Item

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

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

31.77

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Aidoo, Michael, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001774**

Amount of Each Disbursement this Period

5299.20

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Aidoo, Michael, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C**Transaction ID : 500002059**

Amount of Each Disbursement this Period

5494.20

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Alter, Isabel, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001762**

Amount of Each Disbursement this Period

527.31

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Alter, Isabel, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C

Transaction ID : 500001775

Amount of Each Disbursement this Period

1054.63

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Alter, Isabel, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C

Transaction ID : 500001776

Amount of Each Disbursement this Period

1054.63

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Alter, Isabel, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C

Transaction ID : 500001993

Amount of Each Disbursement this Period

2174.25

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Amalgamated Bank

Mailing Address 275 7th Ave

City
New YorkState
NYZip Code
10001-6708

Purpose of Disbursement

Bank Fees

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001692**

Amount of Each Disbursement this Period

14.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amalgamated Bank

Mailing Address 275 7th Ave

City
New YorkState
NYZip Code
10001-6708

Purpose of Disbursement

Bank Fees

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001693**

Amount of Each Disbursement this Period

94.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Amalgamated Bank

Mailing Address 275 7th Ave

City
New YorkState
NYZip Code
10001-6708

Purpose of Disbursement

Bank Fees

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001695**

Amount of Each Disbursement this Period

269.83

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

378.58

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Amalgamated Bank

Mailing Address 275 7th Ave

City
New YorkState
NYZip Code
10001-6708

Purpose of Disbursement

Bank Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	7			2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001696**

Amount of Each Disbursement this Period

57.81

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amalgamated Bank

Mailing Address 275 7th Ave

City
New YorkState
NYZip Code
10001-6708

Purpose of Disbursement

Bank Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	7			2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001697**

Amount of Each Disbursement this Period

14.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Amalgamated Bank

Mailing Address 275 7th Ave

City
New YorkState
NYZip Code
10001-6708

Purpose of Disbursement

Bank Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	7			2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001698**

Amount of Each Disbursement this Period

161.22

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

233.03

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

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Anderson, Sydney, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001777

Amount of Each Disbursement this Period

397.58

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Anderson, Sydney, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002082

Amount of Each Disbursement this Period

790.34

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Asili, Amtyh, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001778

Amount of Each Disbursement this Period

1936.40

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Asili, Amtyh, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001779**

Amount of Each Disbursement this Period

1936.40

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Asili, Amtyh, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002083**

Amount of Each Disbursement this Period

1985.15

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Bartholomew, Elias, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001780**

Amount of Each Disbursement this Period

1719.85

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 203

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Bartholomew, Elias, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001781**

Amount of Each Disbursement this Period

1289.89

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Bartholomew, Elias, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C**Transaction ID : 500002084**

Amount of Each Disbursement this Period

1338.64

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Bennett, Brittany, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001738**

Amount of Each Disbursement this Period

366.47

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0	0	0										

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Bennett, Brittany, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500001755

Amount of Each Disbursement this Period

105.73

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Bennett, Brittany, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500001763

Amount of Each Disbursement this Period

201.93

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Bennett, Brittany, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500001782

Amount of Each Disbursement this Period

2396.35

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Bennett, Brittany, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001783**

Amount of Each Disbursement this Period

2396.35

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Bennett, Brittany, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001784**

Amount of Each Disbursement this Period

2453.68

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Bennett, Brittany, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001994**

Amount of Each Disbursement this Period

206.77

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

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)

PAGE 35 OF 203

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☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Bennett, Brittany, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002046

Amount of Each Disbursement this Period

375.24

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Bennett, Brittany, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002104

Amount of Each Disbursement this Period

108.26

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Bernard, Cara, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001739

Amount of Each Disbursement this Period

579.80

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 203

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Bernard, Cara, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001785**

Amount of Each Disbursement this Period

4638.40

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Bernard, Cara, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001786**

Amount of Each Disbursement this Period

4638.40

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Bernard, Cara, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002047**

Amount of Each Disbursement this Period

2384.20

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 203

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Blaettler, Charles, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001767**

Amount of Each Disbursement this Period

2037.75

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Blaettler, Charles, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001787**

Amount of Each Disbursement this Period

1358.50

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Blaettler, Charles, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001788**

Amount of Each Disbursement this Period

1358.50

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 38 OF 203

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Blaettler, Charles, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel

Candidate Name

Category/
Type

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	7			2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001998**

Amount of Each Disbursement this Period

3477.50

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Boland, Mike, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

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	7			2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001789**

Amount of Each Disbursement this Period

9103.32

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Boland, Mike, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

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	7			2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001790**

Amount of Each Disbursement this Period

2730.99

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

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)

PAGE 39 OF 203

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Boland, Mike, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002085

Amount of Each Disbursement this Period

2779.74

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Brisita, Robert, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Administrative consultant

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 12 / 2026

FEC Identification Number

C

Transaction ID : 500001691

Amount of Each Disbursement this Period

2160.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Cage, Aspen, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001747

Amount of Each Disbursement this Period

379.92

☒ Memo Item *

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

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

2160.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Cage, Aspen, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001758**

Amount of Each Disbursement this Period

109.60

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Cage, Aspen, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001768**

Amount of Each Disbursement this Period

209.34

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Cage, Aspen, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001791**

Amount of Each Disbursement this Period

2484.26

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Cage, Aspen, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001792**

Amount of Each Disbursement this Period

2484.26

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Cage, Aspen, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001793**

Amount of Each Disbursement this Period

2541.59

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Cage, Aspen, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001999**

Amount of Each Disbursement this Period

214.17

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Cage, Aspen, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002074**

Amount of Each Disbursement this Period

388.68

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Cage, Aspen, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002107**

Amount of Each Disbursement this Period

112.13

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Campbell, Zack, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001794**

Amount of Each Disbursement this Period

1274.89

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Campbell, Zack, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001795**

Amount of Each Disbursement this Period

1274.89

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Campbell, Zack, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002004**

Amount of Each Disbursement this Period

1307.39

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Castenell, Aimee, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001796**

Amount of Each Disbursement this Period

4692.92

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Castenell, Aimee, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001797

Amount of Each Disbursement this Period

4692.92

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Castenell, Aimee, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002005

Amount of Each Disbursement this Period

1205.73

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Chaloner Associates, Inc.

Mailing Address 1750 Tysons Blvd
Ste 1500

City
McLean

State
VA

Zip Code
22102-4200

Purpose of Disbursement

Staff Recruitment services

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 20 / 2026

FEC Identification Number

C

Transaction ID : 500001705

Amount of Each Disbursement this Period

22500.00

☐ Memo Item

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

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

22500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Chan, Benjamin, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001798**

Amount of Each Disbursement this Period

3250.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Chan, Benjamin, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001799**

Amount of Each Disbursement this Period

3339.38

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Chan, Benjamin, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002086**

Amount of Each Disbursement this Period

3371.88

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Chavez, Connie, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C

Transaction ID : 500001800

Amount of Each Disbursement this Period

2087.59

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Chavez, Connie, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C

Transaction ID : 500001801

Amount of Each Disbursement this Period

2087.59

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Chavez, Connie, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C

Transaction ID : 500002087

Amount of Each Disbursement this Period

2152.59

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Chiacchiere, Julia, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500001802

Amount of Each Disbursement this Period

2186.60

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Chiacchiere, Julia, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500001803

Amount of Each Disbursement this Period

1639.95

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Chiacchiere, Julia, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500002048

Amount of Each Disbursement this Period

1688.70

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Clifford, Vanessa, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001723**

Amount of Each Disbursement this Period

2254.98

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Clifford, Vanessa, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001804**

Amount of Each Disbursement this Period

2254.98

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Clifford, Vanessa, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001805**

Amount of Each Disbursement this Period

2254.98

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Clifford, Vanessa, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002006**

Amount of Each Disbursement this Period

4607.46

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Coburn, Alexandria, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001806**

Amount of Each Disbursement this Period

1470.89

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Coburn, Alexandria, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001807**

Amount of Each Disbursement this Period

1470.89

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Coburn, Alexandria, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C**Transaction ID : 500002069**

Amount of Each Disbursement this Period

1519.64

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Coleman, James, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001808**

Amount of Each Disbursement this Period

2683.20

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Coleman, James, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001809**

Amount of Each Disbursement this Period

2683.20

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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)

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☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Coleman, James, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002068

Amount of Each Disbursement this Period

2780.70

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Comans, Ashley, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001810

Amount of Each Disbursement this Period

2247.91

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Comans, Ashley, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001811

Amount of Each Disbursement this Period

1798.33

☒ Memo Item *

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

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

0.00

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)

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☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Comans, Ashley, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002007

Amount of Each Disbursement this Period

1863.33

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Community Labor Administrative Services

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002110

Amount of Each Disbursement this Period

3054.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Community Labor Administrative Services

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002111

Amount of Each Disbursement this Period

648257.27

☐ Memo Item

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

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

651311.50

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Community Labor Administrative Services

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500002112

Amount of Each Disbursement this Period

14232.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Community Labor Administrative Services

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500002113

Amount of Each Disbursement this Period

343596.73

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Contreras, Jorge, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500001812

Amount of Each Disbursement this Period

4493.19

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

357829.03

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Contreras, Jorge, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001813**

Amount of Each Disbursement this Period

4493.19

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Contreras, Jorge, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002049**

Amount of Each Disbursement this Period

10342.41

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Cordeiro, Matthew, S., ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001742**

Amount of Each Disbursement this Period

1132.53

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Cordeiro, Matthew, S., ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001814**

Amount of Each Disbursement this Period

2831.32

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Cordeiro, Matthew, S., ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001815**

Amount of Each Disbursement this Period

2831.32

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Cordeiro, Matthew, S., ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C**Transaction ID : 500002055**

Amount of Each Disbursement this Period

4077.59

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Cortes Luna, Adriana, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001816**

Amount of Each Disbursement this Period

2915.25

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Cortes Luna, Adriana, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001817**

Amount of Each Disbursement this Period

2915.25

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Cortes Luna, Adriana, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002065**

Amount of Each Disbursement this Period

3031.86

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Crader, Elisha, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001818**

Amount of Each Disbursement this Period

3114.15

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Crader, Elisha, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001819**

Amount of Each Disbursement this Period

3114.15

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Crader, Elisha, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002050**

Amount of Each Disbursement this Period

3284.58

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Crump, Ryan, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C**Transaction ID : 500001820**

Amount of Each Disbursement this Period

3532.62

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Crump, Ryan, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C**Transaction ID : 500001821**

Amount of Each Disbursement this Period

5046.60

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Crump, Ryan, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C**Transaction ID : 500002008**

Amount of Each Disbursement this Period

5209.10

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Daley, Kiersten, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500001822

Amount of Each Disbursement this Period

1151.48

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Daley, Kiersten, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500002078

Amount of Each Disbursement this Period

1200.23

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Davis, Samira, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500001823

Amount of Each Disbursement this Period

1175.85

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Davis, Samira, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002009**

Amount of Each Disbursement this Period

1224.60

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Delloro, Kalani, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001824**

Amount of Each Disbursement this Period

3233.44

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Delloro, Kalani, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001825**

Amount of Each Disbursement this Period

3233.44

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Delloro, Kalani, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002088**

Amount of Each Disbursement this Period

2390.85

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Dinkin, Joseph, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001724**

Amount of Each Disbursement this Period

1765.83

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Dinkin, Joseph, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001826**

Amount of Each Disbursement this Period

2648.75

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Dinkin, Joseph, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001827**

Amount of Each Disbursement this Period

2648.75

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Dinkin, Joseph, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002010**

Amount of Each Disbursement this Period

6294.17

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Dragon, Claire, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001828**

Amount of Each Disbursement this Period

2600.00

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Dragon, Claire, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001829**

Amount of Each Disbursement this Period

1560.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Dragon, Claire, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002070**

Amount of Each Disbursement this Period

1608.75

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Duffey, Robert, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001830**

Amount of Each Disbursement this Period

7150.52

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Duffey, Robert, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001831**

Amount of Each Disbursement this Period

7007.51

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Duffey, Robert, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002081**

Amount of Each Disbursement this Period

7313.02

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Dunlea, Quinn, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001832**

Amount of Each Disbursement this Period

8493.34

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 65 OF 203

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Dunlea, Quinn, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C**Transaction ID : 500001833**

Amount of Each Disbursement this Period

7280.01

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Dunlea, Quinn, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C**Transaction ID : 500002089**

Amount of Each Disbursement this Period

8720.84

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Ealy, Nicole, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C**Transaction ID : 500001834**

Amount of Each Disbursement this Period

804.38

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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)

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☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Ealy, Nicole, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001835

Amount of Each Disbursement this Period

536.25

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Ealy, Nicole, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002011

Amount of Each Disbursement this Period

321.82

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Easterday, Dylan, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001836

Amount of Each Disbursement this Period

2628.60

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Easterday, Dylan, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001837**

Amount of Each Disbursement this Period

3285.75

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Easterday, Dylan, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002012**

Amount of Each Disbursement this Period

3367.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Farrell, Lindsay, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001725**

Amount of Each Disbursement this Period

872.08

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Farrell, Lindsay, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001838**

Amount of Each Disbursement this Period

3488.33

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Farrell, Lindsay, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001839**

Amount of Each Disbursement this Period

1744.17

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Farrell, Lindsay, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002013**

Amount of Each Disbursement this Period

2665.00

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Fernando, Chelsea Anne, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001840**

Amount of Each Disbursement this Period

4046.73

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Fernando, Chelsea Anne, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001841**

Amount of Each Disbursement this Period

2023.37

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Fernando, Chelsea Anne, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002090**

Amount of Each Disbursement this Period

2104.62

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Financial Innovations

Mailing Address 1 Weingeroff Blvd

City
CranstonState
RIZip Code
02910-4009

Purpose of Disbursement

Swag & merchandise for online store

Candidate Name

Category/
Type

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	7					2	0	2

FEC Identification Number

C

Transaction ID : 500001699

Amount of Each Disbursement this Period

19815.12

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Financial Innovations

Mailing Address 1 Weingeroff Blvd

City
CranstonState
RIZip Code
02910-4009

Purpose of Disbursement

Swag & merchandise for online store

Candidate Name

Category/
Type

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	7					2	0	2

FEC Identification Number

C

Transaction ID : 500001700

Amount of Each Disbursement this Period

21848.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ford, Nyla, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

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	7					2	0	2

FEC Identification Number

C

Transaction ID : 500001842

Amount of Each Disbursement this Period

1574.77

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

41663.16

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Gavio, Nicholas, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C

Transaction ID : 500001843

Amount of Each Disbursement this Period

1789.13

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Gavio, Nicholas, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C

Transaction ID : 500001844

Amount of Each Disbursement this Period

1789.13

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Gavio, Nicholas, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C

Transaction ID : 500002014

Amount of Each Disbursement this Period

1837.88

☒ Memo Item *

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

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Gold, Adam, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001726**

Amount of Each Disbursement this Period

754.80

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Gold, Adam, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001845**

Amount of Each Disbursement this Period

2264.41

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Gold, Adam, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001846**

Amount of Each Disbursement this Period

2264.41

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Gold, Adam, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C**Transaction ID : 500002015**

Amount of Each Disbursement this Period

1542.11

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Gomez Leguizamon, Daniel, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C**Transaction ID : 500001847**

Amount of Each Disbursement this Period

334.89

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Gomez Leguizamon, Daniel, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C**Transaction ID : 500001848**

Amount of Each Disbursement this Period

334.89

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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)

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☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Gomez Leguizamon, Daniel, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002091

Amount of Each Disbursement this Period

351.14

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Gregoire, Rachel, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001849

Amount of Each Disbursement this Period

3445.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Gutierrez, Siara L, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001850

Amount of Each Disbursement this Period

1192.43

☒ Memo Item *

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

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

0.00

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)

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☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Gutierrez, Siara L, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002016

Amount of Each Disbursement this Period

1241.18

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Habbo, Sara, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001753

Amount of Each Disbursement this Period

520.13

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Hayes, Amelia, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001851

Amount of Each Disbursement this Period

845.00

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Hayes, Amelia, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001852**

Amount of Each Disbursement this Period

845.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Hayes, Amelia, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002092**

Amount of Each Disbursement this Period

877.50

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Henderson, Colette, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001727**

Amount of Each Disbursement this Period

624.00

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Henderson, Colette, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001853**

Amount of Each Disbursement this Period

1248.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Henderson, Colette, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001854**

Amount of Each Disbursement this Period

1248.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Henderson, Colette, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002017**

Amount of Each Disbursement this Period

6292.00

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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PAGE 78 OF 203

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Hines, Vidal, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001754**

Amount of Each Disbursement this Period

681.13

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Hines, Vidal, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001855**

Amount of Each Disbursement this Period

2724.53

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Hines, Vidal, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001856**

Amount of Each Disbursement this Period

2724.53

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Hines, Vidal, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500002018

Amount of Each Disbursement this Period

2752.26

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Hogan, Dennis, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500001721

Amount of Each Disbursement this Period

1508.99

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Hogan, Dennis, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500001857

Amount of Each Disbursement this Period

1264.99

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Hogan, Dennis, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001858**

Amount of Each Disbursement this Period

1495.99

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Hollister Isman, Georgia, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001859**

Amount of Each Disbursement this Period

9316.67

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Hollister Isman, Georgia, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001860**

Amount of Each Disbursement this Period

8012.34

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Hollister Isman, Georgia, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002019**

Amount of Each Disbursement this Period

5687.50

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Howell, Wynn, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001861**

Amount of Each Disbursement this Period

1225.90

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Howell, Wynn, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001862**

Amount of Each Disbursement this Period

1225.90

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 82 OF 203

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Howell, Wynn, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002093**

Amount of Each Disbursement this Period

629.20

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Israel, Shoshanna, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001728**

Amount of Each Disbursement this Period

568.75

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Israel, Shoshanna, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001863**

Amount of Each Disbursement this Period

1137.50

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

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)

PAGE 83 OF 203

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Israel, Shoshanna, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001864

Amount of Each Disbursement this Period

2843.75

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Israel, Shoshanna, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002020

Amount of Each Disbursement this Period

2925.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Jadavji, Simran, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001865

Amount of Each Disbursement this Period

1626.66

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Jadavji, Simran, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002094**

Amount of Each Disbursement this Period

2795.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Jaynes, Josefine, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001866**

Amount of Each Disbursement this Period

386.03

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Jaynes, Josefine, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002095**

Amount of Each Disbursement this Period

758.33

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Johnson, Amanda, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001867**

Amount of Each Disbursement this Period

3340.36

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Johnson, Amanda, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001868**

Amount of Each Disbursement this Period

6680.71

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Johnson, Amanda, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002021**

Amount of Each Disbursement this Period

6843.21

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Johnson, Sarah, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500001869

Amount of Each Disbursement this Period

2405.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Johnson, Sarah, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500001870

Amount of Each Disbursement this Period

2405.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Johnson, Sarah, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500002096

Amount of Each Disbursement this Period

2453.75

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Kamen, Ari, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001871**

Amount of Each Disbursement this Period

1473.33

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Kamen, Ari, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001872**

Amount of Each Disbursement this Period

2946.67

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Kamen, Ari, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002022**

Amount of Each Disbursement this Period

3011.67

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Kern, Jennifer, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001873**

Amount of Each Disbursement this Period

2405.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Kern, Jennifer, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001874**

Amount of Each Disbursement this Period

2405.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Kern, Jennifer, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002066**

Amount of Each Disbursement this Period

2453.75

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 89 OF 203

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Khodabandeh, Mehran, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001875**

Amount of Each Disbursement this Period

5900.75

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Khodabandeh, Mehran, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001876**

Amount of Each Disbursement this Period

5900.75

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Khodabandeh, Mehran, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002023**

Amount of Each Disbursement this Period

6030.75

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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)

PAGE 90 OF 203

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Kim, Jane, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001877

Amount of Each Disbursement this Period

5282.16

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Kim, Jane, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001878

Amount of Each Disbursement this Period

5282.16

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Kim, Jane, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002067

Amount of Each Disbursement this Period

5379.66

☒ Memo Item *

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 91 OF 203

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Knox, Jennifer, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

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	7			2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001879**

Amount of Each Disbursement this Period

3851.06

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Knox, Jennifer, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

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	7			2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001880**

Amount of Each Disbursement this Period

3851.06

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Knox, Jennifer, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

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	7			2	0	2	6		

FEC Identification Number

C**Transaction ID : 500002024**

Amount of Each Disbursement this Period

3932.31

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Kumodzi, Karl, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001750**

Amount of Each Disbursement this Period

396.66

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Kumodzi, Karl, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001881**

Amount of Each Disbursement this Period

4439.94

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Kumodzi, Karl, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001882**

Amount of Each Disbursement this Period

3173.27

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Lentz, Braeden, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001883**

Amount of Each Disbursement this Period

7978.84

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Lentz, Braeden, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001884**

Amount of Each Disbursement this Period

7978.84

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Lentz, Braeden, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002025**

Amount of Each Disbursement this Period

8108.84

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Lira, Pedro, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C**Transaction ID : 500001885**

Amount of Each Disbursement this Period

539.51

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Lira, Pedro, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C**Transaction ID : 500001886**

Amount of Each Disbursement this Period

539.51

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Lira, Pedro, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C**Transaction ID : 500002051**

Amount of Each Disbursement this Period

555.76

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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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)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Love, Maxwell, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001887**

Amount of Each Disbursement this Period

1037.05

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Love, Maxwell, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001888**

Amount of Each Disbursement this Period

1034.09

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Love, Maxwell, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002062**

Amount of Each Disbursement this Period

1066.59

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Maldonado, Samantha, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001889**

Amount of Each Disbursement this Period

6476.34

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Maldonado, Samantha, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001890**

Amount of Each Disbursement this Period

4693.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Maldonado, Samantha, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002002**

Amount of Each Disbursement this Period

4855.50

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Mangla, Ravi, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001891**

Amount of Each Disbursement this Period

2760.88

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Mangla, Ravi, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001892**

Amount of Each Disbursement this Period

2760.88

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Mangla, Ravi, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002061**

Amount of Each Disbursement this Period

1714.25

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Marquez, Matthew, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001893**

Amount of Each Disbursement this Period

911.64

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Marquez, Matthew, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001894**

Amount of Each Disbursement this Period

911.64

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Marquez, Matthew, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C**Transaction ID : 500002026**

Amount of Each Disbursement this Period

944.14

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Mayoralgo, Scarlett, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001729**

Amount of Each Disbursement this Period

583.92

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Mayoralgo, Scarlett, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001895**

Amount of Each Disbursement this Period

1668.33

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Mayoralgo, Scarlett, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001896**

Amount of Each Disbursement this Period

3336.66

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Mayoralgo, Scarlett, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500002027

Amount of Each Disbursement this Period

3466.66

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. McClure, Fallon, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500001752

Amount of Each Disbursement this Period

1950.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. McClure, Fallon, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500001897

Amount of Each Disbursement this Period

2600.00

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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)

PAGE 101 OF 203

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. McClure, Fallon, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001898

Amount of Each Disbursement this Period

1950.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. McClure, Fallon, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002080

Amount of Each Disbursement this Period

3997.50

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Mezera, Michael, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001899

Amount of Each Disbursement this Period

358.10

☒ Memo Item *

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

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

0.00

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)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Michael, D., , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001730

Amount of Each Disbursement this Period

845.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Michael, D., , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001900

Amount of Each Disbursement this Period

1690.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Michael, D., , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001901

Amount of Each Disbursement this Period

3380.00

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Miller, Shyanne, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001902**

Amount of Each Disbursement this Period

1088.80

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Miller, Shyanne, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001903**

Amount of Each Disbursement this Period

1360.99

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Miller, Shyanne, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C**Transaction ID : 500002028**

Amount of Each Disbursement this Period

1409.74

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Mink, Joyce, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001746**

Amount of Each Disbursement this Period

266.50

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Mink, Joyce, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001904**

Amount of Each Disbursement this Period

3331.25

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Mink, Joyce, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001905**

Amount of Each Disbursement this Period

3331.25

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

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)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Mink, Joyce, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002072

Amount of Each Disbursement this Period

2047.50

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Mitchell, Maurice, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001741

Amount of Each Disbursement this Period

1652.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Mitchell, Maurice, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001906

Amount of Each Disbursement this Period

13216.00

☒ Memo Item *

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

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

0.00

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)

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☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Mitchell, Maurice, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001907

Amount of Each Disbursement this Period

13216.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Mitchell, Maurice, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002054

Amount of Each Disbursement this Period

6673.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Monaco, Charles, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001908

Amount of Each Disbursement this Period

7379.46

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Monaco, Charles, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001909**

Amount of Each Disbursement this Period

7379.46

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Monaco, Charles, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002029**

Amount of Each Disbursement this Period

7541.96

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Moore, Syeeda, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001745**

Amount of Each Disbursement this Period

422.50

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Moore, Syeeda, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001910**

Amount of Each Disbursement this Period

3380.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Moore, Syeeda, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002071**

Amount of Each Disbursement this Period

2632.50

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Mortensen, Sara, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001911**

Amount of Each Disbursement this Period

953.33

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

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)

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☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Mortensen, Sara, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001912

Amount of Each Disbursement this Period

953.33

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Mortensen, Sara, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002056

Amount of Each Disbursement this Period

1000.52

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Motiwalla, Naqiya, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001740

Amount of Each Disbursement this Period

255.71

☒ Memo Item *

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

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

0.00

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)

PAGE 110 OF 203

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Motiwalla, Naqiya, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001756

Amount of Each Disbursement this Period

73.77

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Motiwalla, Naqiya, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001764

Amount of Each Disbursement this Period

140.90

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Motiwalla, Naqiya, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001913

Amount of Each Disbursement this Period

1672.09

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Motiwalla, Naqiya, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001914**

Amount of Each Disbursement this Period

1672.09

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Motiwalla, Naqiya, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001915**

Amount of Each Disbursement this Period

1729.42

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Motiwalla, Naqiya, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001995**

Amount of Each Disbursement this Period

145.73

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

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)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Motiwalla, Naqiya, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002052

Amount of Each Disbursement this Period

264.48

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Motiwalla, Naqiya, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002105

Amount of Each Disbursement this Period

76.30

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Muhammad, Salaah, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001916

Amount of Each Disbursement this Period

5024.50

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Muhammad, Salaah, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001917**

Amount of Each Disbursement this Period

4522.05

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Muhammad, Salaah, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C**Transaction ID : 500002030**

Amount of Each Disbursement this Period

5187.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Nguyen, Laura, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7		2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001918**

Amount of Each Disbursement this Period

2392.22

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Nguyen, Laura, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001919**

Amount of Each Disbursement this Period

2392.22

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Nguyen, Laura, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002064**

Amount of Each Disbursement this Period

2489.72

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. O'Donovan-Zavada, Christine, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001920**

Amount of Each Disbursement this Period

2648.75

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. O'Donovan-Zavada, Christine, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001921**

Amount of Each Disbursement this Period

1589.25

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. O'Donovan-Zavada, Christine, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002077**

Amount of Each Disbursement this Period

1638.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Orejuela, Yael, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001731**

Amount of Each Disbursement this Period

2220.84

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Orejuela, Yael, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001922**

Amount of Each Disbursement this Period

2665.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Orejuela, Yael, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001923**

Amount of Each Disbursement this Period

2665.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Orejuela, Yael, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002031**

Amount of Each Disbursement this Period

3683.34

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 117 OF 203

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Paradis, Renee, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C

Transaction ID : 500001743

Amount of Each Disbursement this Period

3602.09

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Paradis, Renee, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C

Transaction ID : 500001924

Amount of Each Disbursement this Period

11526.67

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Paradis, Renee, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C

Transaction ID : 500001925

Amount of Each Disbursement this Period

9365.42

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 118 OF 203

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Paradis, Renee, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002058**

Amount of Each Disbursement this Period

13260.01

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Pauldin, Joshua, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001719**

Amount of Each Disbursement this Period

967.50

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Pauldin, Joshua, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001926**

Amount of Each Disbursement this Period

725.00

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0	0	0										
---	---	---	--	--	--	--	--	--	--	--	--	--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 119 OF 203

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Pauldin, Joshua, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001927**

Amount of Each Disbursement this Period

870.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Pelner, Laura, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001928**

Amount of Each Disbursement this Period

5799.18

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Pelner, Laura, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001929**

Amount of Each Disbursement this Period

3624.48

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 120 OF 203

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☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Pelner, Laura, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

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	7			2	0	2	6		

FEC Identification Number

C**Transaction ID : 500002097**

Amount of Each Disbursement this Period

1482.29

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Persson, Ericka, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

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	7			2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001732**

Amount of Each Disbursement this Period

562.12

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Persson, Ericka, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

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	7			2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001930**

Amount of Each Disbursement this Period

1124.24

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

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)

PAGE 121 OF 203

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Persson, Ericka, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001931

Amount of Each Disbursement this Period

2248.48

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Pitt, Elizabeth, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001733

Amount of Each Disbursement this Period

688.02

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Pitt, Elizabeth, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001932

Amount of Each Disbursement this Period

5504.16

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 122 OF 203

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Pitt, Elizabeth, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

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	7			2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001933**

Amount of Each Disbursement this Period

5504.16

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Pitt, Elizabeth, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

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	7			2	0	2	6		

FEC Identification Number

C**Transaction ID : 500002032**

Amount of Each Disbursement this Period

2817.08

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Porritt, Brooke, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

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	7			2	0	2	6		

FEC Identification Number

C**Transaction ID : 500001934**

Amount of Each Disbursement this Period

5655.30

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 123 OF 203

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Porritt, Brooke, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001935**

Amount of Each Disbursement this Period

4847.40

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Porritt, Brooke, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002098**

Amount of Each Disbursement this Period

5882.80

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Rabb, Alexander, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001936**

Amount of Each Disbursement this Period

5207.20

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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)

PAGE 124 OF 203

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☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Rabb, Alexander, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001937

Amount of Each Disbursement this Period

3790.93

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Rabb, Alexander, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002073

Amount of Each Disbursement this Period

1895.47

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Richardson, Elliot, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001744

Amount of Each Disbursement this Period

368.23

☒ Memo Item *

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

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

0.00

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)

PAGE 125 OF 203

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Richardson, Elliot, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001757

Amount of Each Disbursement this Period

106.23

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Richardson, Elliot, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001765

Amount of Each Disbursement this Period

202.90

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Richardson, Elliot, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001938

Amount of Each Disbursement this Period

2407.82

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Richardson, Elliot, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001939**

Amount of Each Disbursement this Period

2407.82

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Richardson, Elliot, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001940**

Amount of Each Disbursement this Period

2465.15

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Richardson, Elliot, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001996**

Amount of Each Disbursement this Period

207.73

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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)

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☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Richardson, Elliot, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002060

Amount of Each Disbursement this Period

376.99

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Richardson, Elliot, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002106

Amount of Each Disbursement this Period

108.76

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Rose, Rebecca, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001941

Amount of Each Disbursement this Period

1943.50

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Rose, Rebecca, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001942**

Amount of Each Disbursement this Period

1943.50

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Rose, Rebecca, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002099**

Amount of Each Disbursement this Period

2008.50

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Rosen, Corinne, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001943**

Amount of Each Disbursement this Period

1289.17

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Rosen, Corinne, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001944**

Amount of Each Disbursement this Period

1289.17

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Rosen, Corinne, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002033**

Amount of Each Disbursement this Period

1321.67

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Sannappa, Neel, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001945**

Amount of Each Disbursement this Period

2804.88

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Sannappa, Neel, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500001946

Amount of Each Disbursement this Period

2804.88

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Sannappa, Neel, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500002100

Amount of Each Disbursement this Period

2902.38

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Schieferstein, Sarah, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500001749

Amount of Each Disbursement this Period

388.68

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Schieferstein, Sarah, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C**Transaction ID : 500001760**

Amount of Each Disbursement this Period

112.13

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Schieferstein, Sarah, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C**Transaction ID : 500001770**

Amount of Each Disbursement this Period

214.17

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Schieferstein, Sarah, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C**Transaction ID : 500001947**

Amount of Each Disbursement this Period

2541.59

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

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)

PAGE 132 OF 203

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☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Schieferstein, Sarah, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001948

Amount of Each Disbursement this Period

2541.59

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Schieferstein, Sarah, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001949

Amount of Each Disbursement this Period

2598.92

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Schieferstein, Sarah, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002001

Amount of Each Disbursement this Period

219.00

☒ Memo Item *

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

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

0.00

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)

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☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Schieferstein, Sarah, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002076

Amount of Each Disbursement this Period

397.45

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Schieferstein, Sarah, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002109

Amount of Each Disbursement this Period

114.66

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Sequeira, Amirah, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001766

Amount of Each Disbursement this Period

899.17

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

PAGE 134 OF 203

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Sequeira, Amirah, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001950**

Amount of Each Disbursement this Period

1798.33

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Sequeira, Amirah, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001951**

Amount of Each Disbursement this Period

1798.33

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Sequeira, Amirah, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001997**

Amount of Each Disbursement this Period

2746.25

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. ShopifyMailing Address 33 New Montgomery St
Ste 750City
San FranciscoState
CAZip Code
94105-4537

Purpose of Disbursement

Online contribution processor fees

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : 500001704**

Amount of Each Disbursement this Period

133.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Snyder, Branden, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001761**

Amount of Each Disbursement this Period

612.08

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Sobrinho-Wheeler, Jivan, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001952**

Amount of Each Disbursement this Period

374.80

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.10

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Sobrinho-Wheeler, Jivan, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001953**

Amount of Each Disbursement this Period

674.63

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Sobrinho-Wheeler, Jivan, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002101**

Amount of Each Disbursement this Period

782.09

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Springer Jr, Anthony, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001954**

Amount of Each Disbursement this Period

6316.47

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Springer Jr, Anthony, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001955**

Amount of Each Disbursement this Period

6316.47

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Springer Jr, Anthony, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002034**

Amount of Each Disbursement this Period

6478.97

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Stamp, Nelini, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001956**

Amount of Each Disbursement this Period

2007.17

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Stamp, Nelini, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001957**

Amount of Each Disbursement this Period

2007.17

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Stamp, Nelini, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002053**

Amount of Each Disbursement this Period

2055.92

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Starks, Aleena, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001958**

Amount of Each Disbursement this Period

1440.83

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Starks, Aleena, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001959**

Amount of Each Disbursement this Period

1543.75

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Starks, Aleena, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002063**

Amount of Each Disbursement this Period

2123.33

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Stocker, Madeline, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001960**

Amount of Each Disbursement this Period

4593.34

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

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)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Stocker, Madeline, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001961

Amount of Each Disbursement this Period

2296.67

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Stocker, Madeline, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002035

Amount of Each Disbursement this Period

2961.84

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Stomberg, Karl, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001962

Amount of Each Disbursement this Period

1316.23

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Stomberg, Karl, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001963**

Amount of Each Disbursement this Period

1316.23

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Stomberg, Karl, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002057**

Amount of Each Disbursement this Period

1364.98

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Thomas, Elizabeth, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001734**

Amount of Each Disbursement this Period

603.25

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Thomas, Elizabeth, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001964**

Amount of Each Disbursement this Period

1723.58

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Thomas, Elizabeth, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001965**

Amount of Each Disbursement this Period

3447.15

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Thomas, Elizabeth, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002036**

Amount of Each Disbursement this Period

2682.86

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Toscano, Kylie, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C**Transaction ID : 500001735**

Amount of Each Disbursement this Period

595.83

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Toscano, Kylie, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C**Transaction ID : 500001966**

Amount of Each Disbursement this Period

3575.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Toscano, Kylie, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C**Transaction ID : 500001967**

Amount of Each Disbursement this Period

3575.00

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Toscano, Kylie, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C**Transaction ID : 500002037**

Amount of Each Disbursement this Period

3060.41

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Traylor, Katrice, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C**Transaction ID : 500001968**

Amount of Each Disbursement this Period

438.98

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Traylor, Katrice, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C**Transaction ID : 500001969**

Amount of Each Disbursement this Period

438.98

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. T aylor, Katrice, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002038**

Amount of Each Disbursement this Period

455.23

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Valverde, Carlos, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001736**

Amount of Each Disbursement this Period

1679.17

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Valverde, Carlos, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001970**

Amount of Each Disbursement this Period

839.58

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

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)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Valverde, Carlos, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001971

Amount of Each Disbursement this Period

839.58

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Valverde, Carlos, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002039

Amount of Each Disbursement this Period

855.83

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Vapsva, Christine, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001972

Amount of Each Disbursement this Period

5145.83

☒ Memo Item *

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

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

0.00

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)

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Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Vapsva, Christine, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001973

Amount of Each Disbursement this Period

5145.83

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Vapsva, Christine, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002040

Amount of Each Disbursement this Period

4246.66

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Wallace, Parris, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001974

Amount of Each Disbursement this Period

844.01

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Wallace, Parris, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001975**

Amount of Each Disbursement this Period

422.01

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Wallace, Parris, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002041**

Amount of Each Disbursement this Period

438.26

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Ware, Christopher, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001751**

Amount of Each Disbursement this Period

1153.75

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Ware, Christopher, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001976

Amount of Each Disbursement this Period

1153.75

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Ware, Christopher, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002079

Amount of Each Disbursement this Period

2405.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Watson, Isabel, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001977

Amount of Each Disbursement this Period

374.04

☒ Memo Item *

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

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

0.00

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)

PAGE 150 OF 203

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Watson, Isabel, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001978

Amount of Each Disbursement this Period

374.04

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Watson, Isabel, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002042

Amount of Each Disbursement this Period

390.29

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Weahkee, Austin, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001979

Amount of Each Disbursement this Period

838.55

☒ Memo Item *

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

0.00

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)

PAGE 151 OF 203

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Weahkee, Austin, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001980

Amount of Each Disbursement this Period

493.95

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Weahkee, Austin, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002043

Amount of Each Disbursement this Period

435.52

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Weisberg, Rachel, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001981

Amount of Each Disbursement this Period

1427.79

☒ Memo Item *

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

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

0.00

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)

PAGE 152 OF 203

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Weisberg, Rachel, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002044

Amount of Each Disbursement this Period

1523.15

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Weisgrau, Austin, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001748

Amount of Each Disbursement this Period

365.30

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Weisgrau, Austin, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001759

Amount of Each Disbursement this Period

105.39

☒ Memo Item *

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Weisgrau, Austin, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001769**

Amount of Each Disbursement this Period

201.29

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Weisgrau, Austin, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001982**

Amount of Each Disbursement this Period

2388.71

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Weisgrau, Austin, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001983**

Amount of Each Disbursement this Period

2388.71

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Weisgrau, Austin, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001984**

Amount of Each Disbursement this Period

2446.04

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Weisgrau, Austin, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002000**

Amount of Each Disbursement this Period

206.12

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Weisgrau, Austin, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002075**

Amount of Each Disbursement this Period

374.07

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Weisgrau, Austin, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002108**

Amount of Each Disbursement this Period

107.92

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Whaley, Britney, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001737**

Amount of Each Disbursement this Period

2778.18

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Whaley, Britney, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001985**

Amount of Each Disbursement this Period

2778.18

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Whaley, Britney, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001986**

Amount of Each Disbursement this Period

4167.27

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Whaley, Britney, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002045**

Amount of Each Disbursement this Period

4264.77

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Winston, Daniel, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001720**

Amount of Each Disbursement this Period

1432.70

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Winston, Daniel, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C**Transaction ID : 500001987**

Amount of Each Disbursement this Period

733.32

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Winston, Daniel, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C**Transaction ID : 500001988**

Amount of Each Disbursement this Period

595.80

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Wolfsun, Joshua, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7							2026

FEC Identification Number

C**Transaction ID : 500001989**

Amount of Each Disbursement this Period

3359.37

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Wolfsun, Joshua, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001990**

Amount of Each Disbursement this Period

6196.12

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Wolfsun, Joshua, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500002102**

Amount of Each Disbursement this Period

11786.67

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Wyatt, Jasmin, , ,

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001991**

Amount of Each Disbursement this Period

1612.00

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Wyatt, Jasmin, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500001992

Amount of Each Disbursement this Period

1209.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Wyatt, Jasmin, , ,

Mailing Address 77 Sands St

City
Brooklyn

State
NY

Zip Code
11201-1431

Purpose of Disbursement

Personnel from non-contribution account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 17 / 2026

FEC Identification Number

C

Transaction ID : 500002103

Amount of Each Disbursement this Period

1257.75

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y 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)..... ►

0.00

1079772.32

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Artisan Strategies

Mailing Address 1300 Pennsylvania Ave NW

City
WashingtonState
DCZip Code
20229-0002

Purpose of Disbursement

Direct mail & phone banking for non-federal elections

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : 500001708**

Amount of Each Disbursement this Period

34118.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Artisan Strategies

Mailing Address 1300 Pennsylvania Ave NW

City
WashingtonState
DCZip Code
20229-0002

Purpose of Disbursement

Direct mail & phone banking for non-federal elections

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500001711**

Amount of Each Disbursement this Period

60561.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Community Labor Administrative Services

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Purpose of Disbursement

Texting for non-federal elections

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : 500001713**

Amount of Each Disbursement this Period

23295.21

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

117974.73

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
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(check only one)

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☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Data For Progress DBA Data For The Social Good

Mailing Address 815 Black Lives Matter Plz

City
WashingtonState
DCZip Code
20006

Purpose of Disbursement

Polling

Candidate Name

Category/
Type

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	7			2	0	2	6		

FEC Identification Number

C

Transaction ID : 500001712

Amount of Each Disbursement this Period

7000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Facebook

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456

Purpose of Disbursement

Digital ads for non-federal election

Candidate Name

Category/
Type

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	6			2	0	2	6		

FEC Identification Number

C

Transaction ID : 500001707

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Turn it Blue

Mailing Address 780 Utica Ave

City
BoulderState
COZip Code
80304-0755

Purpose of Disbursement

Digital ads for non-federal election

Candidate Name

Category/
Type

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	5			2	0	2	6		

FEC Identification Number

C

Transaction ID : 500001709

Amount of Each Disbursement this Period

990.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9990.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Turn it Blue

Mailing Address 780 Utica Ave

City
BoulderState
COZip Code
80304-0755

Purpose of Disbursement

Digital ads for non-federal election

Candidate Name

Category/
Type

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	5			2	0	2	6		

FEC Identification Number

C

Transaction ID : 500001710

Amount of Each Disbursement this Period

7920.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

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

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)..... ►

7920.00

135884.73

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 163 OF 203

FOR LINE NUMBER:
(check only one)☒ 9
☐ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

AARON REGUNBERG FOR CONGRESS

Nature of Debt (Purpose):

Personnel - Fee for Service

Mailing Address 50 Duncan Ave

City
ProvidenceState
RIZip Code
02906-1815

Outstanding Balance Beginning This Period

8466.50

Transaction ID : 1250000040

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8466.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

People for Joann Bryn Smith

Nature of Debt (Purpose):

Refund of Contribution

Mailing Address PO Box 4156

City
WyomingState
PAZip Code
18644-0156

Outstanding Balance Beginning This Period

1500.00

Transaction ID : 1250000055

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

9966.50

2) **TOTALS** This Period (last page this line number only)..... ►

9966.50

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

9966.50

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Base Builder

Nature of Debt (Purpose):

Canvassing for Mandela Barnes

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

92181.11

Transaction ID : 1250000045

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

92181.11

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Base Builder

Nature of Debt (Purpose):

Canvassing for Mandela Barnes

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

207560.00

Transaction ID : 1250000163

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

207560.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Base Builder

Nature of Debt (Purpose):

Phone Bank

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

1658.83

Transaction ID : 1250000164

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1658.83

1) SUBTOTALS This Period This Page (optional)..... ►

301399.94

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Base Builder

Nature of Debt (Purpose):

Phone Bank for John Fetterman

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

66280.00

Transaction ID : 1250000165

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

66280.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Base Builder

Nature of Debt (Purpose):

Canvassing for John Fetterman

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

4000.00

Transaction ID : 1250000049

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Base Builder

Nature of Debt (Purpose):

Canvassing for John Fetterman

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

2000.00

Transaction ID : 1250000166

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

72280.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Base Builder

Nature of Debt (Purpose):

Canvassing for John Fetterman

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

124350.00

Transaction ID : 1250000167

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

124350.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Base Builder

Nature of Debt (Purpose):

Phone Bank

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

11000.00

Transaction ID : 1250000042

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Base Builder

Nature of Debt (Purpose):

In person canvassing

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

36000.00

Transaction ID : 1250000043

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

36000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

171350.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

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☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Base Builder

Nature of Debt (Purpose):

In person canvassing

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

11000.00

Transaction ID : 1250000044

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Base Builder

Nature of Debt (Purpose):

In person canvassing for Cori Bush

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

20000.00

Transaction ID : 1250000169

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Base Builder

Nature of Debt (Purpose):

Phone calls for Mondaire Jones 24 hour report
1790196

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

4000.00

Transaction ID : 1250000168

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

35000.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
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☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Berlin Rosen

Nature of Debt (Purpose):

Ads

Mailing Address 15 Maiden Ln
Ste 1600City
New YorkState
NYZip Code
10038-5111

Outstanding Balance Beginning This Period

7500.00

Transaction ID : 1250000056

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Break Something

Nature of Debt (Purpose):

Digital Ads for Harris #1820447

Mailing Address 1802 Vernon St NW

City
WashingtonState
DCZip Code
20009-1217

Outstanding Balance Beginning This Period

81249.51

Transaction ID : 1250000057

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

81249.51

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Break Something

Nature of Debt (Purpose):

Graphic Design for Harris 1832340

Mailing Address 1802 Vernon St NW

City
WashingtonState
DCZip Code
20009-1217

Outstanding Balance Beginning This Period

1000.00

Transaction ID : 1250000058

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

89749.51

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

CCM&Co

Nature of Debt (Purpose):

Printed Literature for Mandela Barnes

Mailing Address 1022 Boulevard
329City
West HartfordState
CTZip Code
06119-1801

Outstanding Balance Beginning This Period

6040.00

Transaction ID : 1250000059

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6040.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Chojnacki, Sonja, , ,

Nature of Debt (Purpose):

Consulting for postcard program Harris
1841890

Mailing Address 3112 N Weil St

City
MilwaukeeState
WIZip Code
53212-2231

Outstanding Balance Beginning This Period

9000.00

Transaction ID : 1250000162

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Colonial Quality Printing

Nature of Debt (Purpose):

Printed Literature for Harris #1818742

Mailing Address 2997 S Howell Ave

City
MilwaukeeState
WIZip Code
53207-2083

Outstanding Balance Beginning This Period

3439.32

Transaction ID : 1250000060

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3439.32

1) **SUBTOTALS** This Period This Page (optional)..... ►

18479.32

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

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(check only one)
☐ 9
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

410.12

Transaction ID : 1250000061

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

410.12

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

31015.82

Transaction ID : 1250000062

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

31015.82

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

14924.00

Transaction ID : 1250000063

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

14924.00

1) SUBTOTALS This Period This Page (optional)..... ►

46349.94

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.20

Transaction ID : 1250000064

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.20

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

48174.91

Transaction ID : 1250000065

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

48174.91

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

20000.00

Transaction ID : 1250000066

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20000.00

1) SUBTOTALS This Period This Page (optional)..... ►

68175.11

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
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☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

20000.00

Transaction ID : 1250000067

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Personnel from Schedule B Line 21(b)

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

3268.65

Transaction ID : 1250000068

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3268.65

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Personnel from Schedule B Line 21(b)

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

8466.50

Transaction ID : 1250000069

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8466.50

1) SUBTOTALS This Period This Page (optional)..... ►

31735.15

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Bowman reported on 4/11/24

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

3995.00

Transaction ID : 1250000070

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3995.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Jayapal reported on 5/14/24 -
WFT20244161220-1

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

974.51

Transaction ID : 1250000074

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

974.51

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Morales reported on 5/14/24 -
WFT20244161238-1

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

974.51

Transaction ID : 1250000075

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

974.51

1) **SUBTOTALS** This Period This Page (optional)..... ►

5944.02

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for John Mannion 24 hour report
1791925

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

1129.67

Transaction ID : 1250000079

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1129.67

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

phone calls for Cori Bush ID 1808103

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

2000.00

Transaction ID : 1250000089

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Phone bank for Altman #1820447

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

4712.10

Transaction ID : 1250000094

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4712.10

1) **SUBTOTALS** This Period This Page (optional)..... ►

7841.77

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Facebook Ads for Harris #1821473

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

4800.00

Transaction ID : 1250000095

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4800.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting filed as Scale to Win for Rudy Salas
1833684

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

1000.00

Transaction ID : 1250000097

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Harris 183797

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

44000.00

Transaction ID : 1250000098

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

44000.00

1) SUBTOTALS This Period This Page (optional)..... ►

49800.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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for each
numbered line)

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FOR LINE NUMBER:
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☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Colin Allred 1845400

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

500.00

Transaction ID : 1250000100

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Harris 187927, 1847530, 1845966,
1846647, 1845966, 1845510, 1843702,
1843367

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

171389.40

Transaction ID : 1250000101

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

171389.40

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Gabe Vasquez 1844015

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

20000.00

Transaction ID : 1250000103

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

191889.40

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 177 OF 203

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Colin Allred 1845400

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

2000.00

Transaction ID : 1250000105

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Adam Gray 1846647

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

1000.00

Transaction ID : 1250000106

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Colin Allred 1846647

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

2000.00

Transaction ID : 1250000107

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

1) SUBTOTALS This Period This Page (optional)..... ►

5000.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Rudy Salas 1846647

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

2600.00

Transaction ID : 1250000108

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2600.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Colin Allred 184730

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

2000.00

Transaction ID : 1250000109

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Adam Gray 184730

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

1000.00

Transaction ID : 1250000110

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

5600.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Sherrod Brown 1847927

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

10000.00

Transaction ID : 1250000111

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Colin Allred 1847927

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

9000.00

Transaction ID : 1250000113

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Travel, Lodging, Meals, Supplies

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

100746.26

Transaction ID : 1250000114

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

100746.26

1) SUBTOTALS This Period This Page (optional)..... ►

119746.26

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SD10

Transaction ID : 1250000114

estimated as \$133k but reduced to 100746.26

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 181 OF 203

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting (estimate) for Adelita Grijalva
(File#1897368)

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

5000.00

Transaction ID : 1250000173

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Event insurance (in-kind contribution to
Villegas for Congress)

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

176.00

Transaction ID : 1250000188

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

176.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting (Estimate) Nida Allam - FEC-1949279

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000204

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

1) SUBTOTALS This Period This Page (optional)..... ►

7676.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 182 OF 203

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Consolidated Press

Nature of Debt (Purpose):

Direct Mail for Harris #1818742

Mailing Address 3900 Greensboro St

City
CharlotteState
NCZip Code
28206-2036

Outstanding Balance Beginning This Period

816.67

Transaction ID : 1250000115

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

816.67

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Facebook

Nature of Debt (Purpose):

Digital Ads for Jessica Cisneros

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456

Outstanding Balance Beginning This Period

10000.00

Transaction ID : 1250000116

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Facebook

Nature of Debt (Purpose):

Digital Ads for Andy Levin

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456

Outstanding Balance Beginning This Period

7000.00

Transaction ID : 1250000117

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7000.00

1) SUBTOTALS This Period This Page (optional)..... ►

17816.67

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Facebook

Nature of Debt (Purpose):

Digital Ads for Rashida Tlaib

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456

Outstanding Balance Beginning This Period

3000.00

Transaction ID : 1250000118

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Facebook

Nature of Debt (Purpose):

Digital Ads for Melanie Stansbury

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456

Outstanding Balance Beginning This Period

1700.00

Transaction ID : 1250000119

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1700.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Facebook

Nature of Debt (Purpose):

Digital Ads for Gabriel Vasquez

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456

Outstanding Balance Beginning This Period

1700.00

Transaction ID : 1250000120

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1700.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

6400.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Facebook

Nature of Debt (Purpose):

Digital Ads for Teresa Leger Fernandez

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456

Outstanding Balance Beginning This Period

900.00

Transaction ID : 1250000121

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

900.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Fedex Office Print and Ship Center

Nature of Debt (Purpose):

Printing for Kamala Harris ID 1814317

Mailing Address 5658 Washington Ave

City
Mount PleasantState
WIZip Code
53406-4096

Outstanding Balance Beginning This Period

74.76

Transaction ID : 1250000124

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

74.76

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Fedex Office Print and Ship Center

Nature of Debt (Purpose):

Printing for Kamala Harris ID 1819155

Mailing Address 5658 Washington Ave

City
Mount PleasantState
WIZip Code
53406-4096

Outstanding Balance Beginning This Period

179.55

Transaction ID : 1250000125

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

179.55

1) SUBTOTALS This Period This Page (optional)..... ►

1154.31

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 185 OF 203

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

FedEx

Nature of Debt (Purpose):

Printing for Harris 1843367

Mailing Address 942 Shady Grove Rd S

City
MemphisState
TNZip Code
38120-4117

Outstanding Balance Beginning This Period

136.55

Transaction ID : 1250000122

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

136.55

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

FedEx

Nature of Debt (Purpose):

Printing for Harris 1845400

Mailing Address 942 Shady Grove Rd S

City
MemphisState
TNZip Code
38120-4117

Outstanding Balance Beginning This Period

448.56

Transaction ID : 1250000123

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

448.56

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

First Impression, Inc

Nature of Debt (Purpose):

Printed Literature for Harris #1818572

Mailing Address 3401 Girard Blvd NE

City
AlbuquerqueState
NMZip Code
87107-1928

Outstanding Balance Beginning This Period

418.50

Transaction ID : 1250000126

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

418.50

1) **SUBTOTALS** This Period This Page (optional)..... ►

1003.61

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 186 OF 203

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

First Impression, Inc

Nature of Debt (Purpose):

Shirts and bags for Kamala Harris #1818792

Mailing Address 3401 Girard Blvd NE

City

Albuquerque

State

NM

Zip Code

87107-1928

Outstanding Balance Beginning This Period

1252.50

Transaction ID : 1250000127

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1252.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Great Impressions LLC

Nature of Debt (Purpose):

Posters for Harris #1819527

Mailing Address 5330 W Burleigh St

City

Milwaukee

State

WI

Zip Code

53210-1622

Outstanding Balance Beginning This Period

1551.06

Transaction ID : 1250000128

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1551.06

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Pelican Print

Nature of Debt (Purpose):

mail

Mailing Address 3930 Flagstone Ct

City

Florissant

State

MO

Zip Code

63033-4026

Outstanding Balance Beginning This Period

584.43

Transaction ID : 1250000129

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

584.43

1) **SUBTOTALS** This Period This Page (optional)..... ►

3387.99

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 187 OF 203

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Pelican Print

Nature of Debt (Purpose):

mail

Mailing Address 3930 Flagstone Ct

City
FlorissantState
MOZip Code
63033-4026

Outstanding Balance Beginning This Period

584.43

Transaction ID : 1250000130

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

584.43

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Person2Person Solutions

Nature of Debt (Purpose):

Printed literature for Harris #1814317 reported
as Red HorseMailing Address 55 Washington St
Ste 702City
BrooklynState
NYZip Code
11201-1063

Outstanding Balance Beginning This Period

2153.12

Transaction ID : 1250000131

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2153.12

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Person2Person Solutions

Nature of Debt (Purpose):

Mail for Analilia Mejia FEC-1946015

Mailing Address 55 Washington St
Ste 702City
BrooklynState
NYZip Code
11201-1063

Outstanding Balance Beginning This Period

79238.25

Transaction ID : 1250000202

Amount Incurred This Period

0.00

Payment This Period

79238.25

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

2737.55

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 188 OF 203

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Person2Person Solutions

Nature of Debt (Purpose):

Previously filed on FEC-1940543 under Red Horse for \$10,000 Videography for ads filed FEC-1935031

Mailing Address 55 Washington St
Ste 702City
BrooklynState
NYZip Code
11201-1063

Outstanding Balance Beginning This Period

4500.00

Transaction ID : 1250000201

Amount Incurred This Period

0.00

Payment This Period

4500.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Person2Person Solutions

Nature of Debt (Purpose):

Printed literature for Analilia Mejia FEC-1946013

Mailing Address 55 Washington St
Ste 702City
BrooklynState
NYZip Code
11201-1063

Outstanding Balance Beginning This Period

5149.38

Transaction ID : 1250000203

Amount Incurred This Period

0.00

Payment This Period

5149.38

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Reach Technologies

Nature of Debt (Purpose):

Direct Mail #1820107

Mailing Address 8810 35th Ave

City
Jackson HeightsState
NYZip Code
11372-5759

Outstanding Balance Beginning This Period

15000.00

Transaction ID : 1250000132

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

15000.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Richstock Productions

Nature of Debt (Purpose):

Digital Ads for Harris #1823264

Mailing Address 1220 11th Ave

City
NeptuneState
NJZip Code
07753-5116

Outstanding Balance Beginning This Period

60.00

Transaction ID : 1250000133

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

60.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Robocall.org

Nature of Debt (Purpose):

Robocall for Jessica Cisneros

Mailing Address 4601 Fairfax Dr

City
ArlingtonState
VAZip Code
22203-1527

Outstanding Balance Beginning This Period

41.27

Transaction ID : 1250000134

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

41.27

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Scale to Win

Nature of Debt (Purpose):

Texting

Mailing Address 13742 Harper St

City
Santa AnaState
CAZip Code
92703-1419

Outstanding Balance Beginning This Period

1200.00

Transaction ID : 1250000135

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1200.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

1301.27

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Scale to Win

Nature of Debt (Purpose):

Phone calls for Harris #1821473

Mailing Address 13742 Harper St

City

Santa Ana

State

CA

Zip Code

92703-1419

Outstanding Balance Beginning This Period

38224.86

Transaction ID : 1250000136

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

38224.86

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Scale to Win

Nature of Debt (Purpose):

Texting for Harris #1821473

Mailing Address 13742 Harper St

City

Santa Ana

State

CA

Zip Code

92703-1419

Outstanding Balance Beginning This Period

1500.00

Transaction ID : 1250000137

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Scale to Win

Nature of Debt (Purpose):

Texting for Harris #1823642

Mailing Address 13742 Harper St

City

Santa Ana

State

CA

Zip Code

92703-1419

Outstanding Balance Beginning This Period

4400.00

Transaction ID : 1250000138

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4400.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

44124.86

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Scale to Win

Nature of Debt (Purpose):

Texting for Salas 1823978

Mailing Address 13742 Harper St

City

Santa Ana

State

CA

Zip Code

92703-1419

Outstanding Balance Beginning This Period

500.00

Transaction ID : 1250000139

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Scale to Win

Nature of Debt (Purpose):

Texting for Harris #1823978

Mailing Address 13742 Harper St

City

Santa Ana

State

CA

Zip Code

92703-1419

Outstanding Balance Beginning This Period

1000.00

Transaction ID : 1250000140

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Scale to Win

Nature of Debt (Purpose):

Texting for Harris #1829064

Mailing Address 13742 Harper St

City

Santa Ana

State

CA

Zip Code

92703-1419

Outstanding Balance Beginning This Period

5000.00

Transaction ID : 1250000141

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

6500.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 192 OF 203

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Scale to Win

Nature of Debt (Purpose):

Texting for Harris #1830948

Mailing Address 13742 Harper St

City
Santa AnaState
CAZip Code
92703-1419

Outstanding Balance Beginning This Period

2000.00

Transaction ID : 1250000142

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Scale to Win

Nature of Debt (Purpose):

Phone Bank for Harris #1830268

Mailing Address 13742 Harper St

City
Santa AnaState
CAZip Code
92703-1419

Outstanding Balance Beginning This Period

201.59

Transaction ID : 1250000143

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

201.59

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Scale to Win

Nature of Debt (Purpose):

Texting for Harris 1832340, 1833684, 183656,
1834846, 1836056, 1834846

Mailing Address 13742 Harper St

City
Santa AnaState
CAZip Code
92703-1419

Outstanding Balance Beginning This Period

30157.70

Transaction ID : 1250000144

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

30157.70

1) **SUBTOTALS** This Period This Page (optional)..... ►

32359.29

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Seed the Vote

Nature of Debt (Purpose):

Warnock

Mailing Address 1212 Broadway

City
OaklandState
CAZip Code
94612-1805

Outstanding Balance Beginning This Period

3000.00

Transaction ID : 1250000145

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Shirts.co

Nature of Debt (Purpose):

Shirts and totebags for Harris 1818792

Mailing Address 4524 S Saint Peters Pkwy

City
Saint PetersState
MOZip Code
63304-7342

Outstanding Balance Beginning This Period

1583.40

Transaction ID : 1250000146

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1583.40

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Skyridge Strategies

Nature of Debt (Purpose):

Digital Ads for Harris #1822108

Mailing Address 2791 Oak Aly

City
EugeneState
ORZip Code
97405-3692

Outstanding Balance Beginning This Period

5500.00

Transaction ID : 1250000147

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5500.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

10083.40

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Skyridge Strategies

Nature of Debt (Purpose):

Digital ads for Harris 1847927

Mailing Address 2791 Oak Aly

City
EugeneState
ORZip Code
97405-3692

Outstanding Balance Beginning This Period

10000.00

Transaction ID : 1250000148

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Baseline Agency

Nature of Debt (Purpose):

Mail for Jessica Cisneros

Mailing Address 1835 7th St NW

City
WashingtonState
DCZip Code
20001-3107

Outstanding Balance Beginning This Period

39963.76

Transaction ID : 1250000149

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

39963.76

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Original Print Shop

Nature of Debt (Purpose):

Direct Mail for Harris 1832340

Mailing Address 270 S Telegraph Rd

City
PontiacState
MIZip Code
48341-1979

Outstanding Balance Beginning This Period

40520.00

Transaction ID : 1250000150

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

40520.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

90483.76

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Turn it Blue

Nature of Debt (Purpose):

digital ads

Mailing Address 780 Utica Ave

City
BoulderState
COZip Code
80304-0755

Outstanding Balance Beginning This Period

10000.00

Transaction ID : 1250000151

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Turn it Blue

Nature of Debt (Purpose):

Digital Ads opposing Maxine Dexter ID
WFT20244201520-1

Mailing Address 780 Utica Ave

City
BoulderState
COZip Code
80304-0755

Outstanding Balance Beginning This Period

1500.00

Transaction ID : 1250000152

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Union Print Shop

Nature of Debt (Purpose):

Printed Literature for Harris 1819527

Mailing Address 49 S Sycamore

City
MesaState
AZZip Code
85202-1151

Outstanding Balance Beginning This Period

1200.00

Transaction ID : 1250000153

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1200.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

12700.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Union Print Shop

Nature of Debt (Purpose):

Printed Literature for Harris 1845400

Mailing Address 49 S Sycamore

City
MesaState
AZZip Code
85202-1151

Outstanding Balance Beginning This Period

17500.00

Transaction ID : 1250000154

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

17500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Weber Printing

Nature of Debt (Purpose):

printing

Mailing Address 3048 N 34th St

City
MilwaukeeState
WIZip Code
53210-1919

Outstanding Balance Beginning This Period

240.00

Transaction ID : 1250000155

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

240.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Wells Print & Digital Services

Nature of Debt (Purpose):

Printed Literature for Harris 1841890

Mailing Address PO Box 1744

City
MadisonState
WIZip Code
53701-1744

Outstanding Balance Beginning This Period

760.93

Transaction ID : 1250000156

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

760.93

1) **SUBTOTALS** This Period This Page (optional)..... ►

18500.93

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

With The Ranks

Nature of Debt (Purpose):

Texting for Harris 1814959

Mailing Address 206 N Ferguson Ave

City
CookevilleState
TNZip Code
38501-2865

Outstanding Balance Beginning This Period

44797.61

Transaction ID : 1250000157

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

44797.61

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

With The Ranks

Nature of Debt (Purpose):

Texting for Harris 1814959

Mailing Address 206 N Ferguson Ave

City
CookevilleState
TNZip Code
38501-2865

Outstanding Balance Beginning This Period

2963.41

Transaction ID : 1250000158

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2963.41

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

With The Ranks

Nature of Debt (Purpose):

Texting for Harris 1815420

Mailing Address 206 N Ferguson Ave

City
CookevilleState
TNZip Code
38501-2865

Outstanding Balance Beginning This Period

20228.07

Transaction ID : 1250000159

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20228.07

1) **SUBTOTALS** This Period This Page (optional)..... ►

67989.09

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

With The Ranks

Nature of Debt (Purpose):

Texting for Harris 1815420

Mailing Address 206 N Ferguson Ave

City
CookevilleState
TNZip Code
38501-2865

Outstanding Balance Beginning This Period

22058.14

Transaction ID : 1250000160

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

22058.14

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

With The Ranks

Nature of Debt (Purpose):

Texting for Harris 1834846

Mailing Address 206 N Ferguson Ave

City
CookevilleState
TNZip Code
38501-2865

Outstanding Balance Beginning This Period

126000.00

Transaction ID : 1250000161

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

126000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

148058.14

2) **TOTALS** This Period (last page this line number only)..... ►

1707617.29

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

1707617.29

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 199 OF 203
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report			New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Community Labor Administrative Services *		☒ Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 19 / 2026
Mailing Address 77 Sands St		Amount 2500.00		Transaction ID : 500001678 Date of Disbursement or Obligation MM / DD / YYYY 02 / 19 / 2026
City Brooklyn	State NY			
Purpose of Expenditure Texting (Estimate)		Category/ Type		
Name of Federal Candidate: Allam, Nida, , ,		☒ Support ☐ Oppose		Office Sought: ☒ House District: 04 ☐ President ☐ Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		117500.00		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶
Full Name of Payee LC Media LLC		☐ Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 25 / 2026
Mailing Address 1604 Fawn Ln		Amount 100000.00		Transaction ID : 500001679 Date of Disbursement or Obligation MM / DD / YYYY 02 / 25 / 2026
City Huntingdon Valley	State PA			
Purpose of Expenditure TV Ads		Category/ Type 004		
Name of Federal Candidate: Allam, Nida, , ,		☒ Support ☐ Oppose		Office Sought: ☒ House District: 04 ☐ President ☐ Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		117500.00		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures 100000.00 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Boland, Mike, , ,</u>			Date MM / DD / YYYY 03 / 20 / 2026	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 200 OF 203
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee LC Media LLC ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 02 / 2026	
Mailing Address 1604 Fawn Ln			Amount 15000.00	
City Huntingdon Valley	State PA	Zip Code 19006-7918	Transaction ID : 500001714 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 27 / 2026	
Purpose of Expenditure Digital Ads		Category/ Type	Name of Federal Candidate: Allam, Nida, , , ☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 04 State: NC	
Calendar Year-To-Date Per Election for Office Sought 117500.00			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee National Korean American Service and Education Consortium Action Fund ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 03 / 2026	
Mailing Address 4300 N California Ave			Amount 1125.00	
City Chicago	State IL	Zip Code 60618-1514	Transaction ID : 500001644 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 03 / 2026	
Purpose of Expenditure Printing and Copying - In-Kind contribution FEC# 1944728 Contribution on sch A line 17 #2692707		Category/ Type 006	Name of Federal Candidate: Mejia, Analilia, , , ☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 11 State: NJ	
Calendar Year-To-Date Per Election for Office Sought 5732.08			Disbursement For: ☐ Primary ☐ General ☒ Other (specify) ▶ Special	
(a) SUBTOTAL of Itemized Independent Expenditures			16125.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Boland, Mike, , ,</u>			Date M M / D D / Y Y Y Y Y Y 03 / 20 / 2026	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 201 OF 203
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee Person2Person Solutions ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 03 / 2026	
Mailing Address 55 Washington St Ste 702			Amount 25000.00	
City Brooklyn	State NY	Zip Code 11201-1063	Transaction ID : 500001645 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 03 / 2026	
Purpose of Expenditure Meta Ads		Category/ Type 004	Name of Federal Candidate: Mejia, Analilia, , , ☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: <u>11</u> State: <u>NJ</u>	
Calendar Year-To-Date Per Election for Office Sought 179000.00			Disbursement For: ☐ Primary ☐ General ☒ Other (specify) ▶ Special Primary	
Full Name of Payee Person2Person Solutions ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 01 / 24 / 2026	
Mailing Address 55 Washington St Ste 702			Amount 4500.00	
City Brooklyn	State NY	Zip Code 11201-1063	Transaction ID : 500001646 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 03 / 2026	
Purpose of Expenditure Previously filed on FEC-1940543 under Red Horse for \$10,000 Videography for ads filed FEC-1935031		Category/ Type	Name of Federal Candidate: Mejia, Analilia, , , ☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: <u>11</u> State: <u>NJ</u>	
Calendar Year-To-Date Per Election for Office Sought 179000.00			Disbursement For: ☐ Primary ☐ General ☒ Other (specify) ▶ Special Primary	
(a) SUBTOTAL of Itemized Independent Expenditures			29500.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Boland, Mike, , ,</u>			Date M M / D D / Y Y Y Y Y Y 03 / 20 / 2026	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 202 OF 203
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee Person2Person Solutions ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 03 / 2026	
Mailing Address 55 Washington St Ste 702			Amount 54000.00	
City Brooklyn	State NY	Zip Code 11201-1063	Transaction ID : 500001647 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 03 / 2026	
Purpose of Expenditure Additional cable and digital ads			Category/ Type	
Name of Federal Candidate: Mejia, Analilia, , ,			☒ Support ☐ Oppose Office Sought: ☒ House ☐ Senate District: <u>11</u> ☐ President ☐ State: <u>NJ</u>	
Calendar Year-To-Date Per Election for Office Sought			179000.00 Disbursement For: ☐ Primary ☐ General 2026 ☒ Other (specify) ▶ <u>Special Primary</u>	
Full Name of Payee Person2Person Solutions ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 01 / 21 / 2026	
Mailing Address 55 Washington St Ste 702			Amount 79238.25	
City Brooklyn	State NY	Zip Code 11201-1063	Transaction ID : 500001668 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 03 / 2026	
Purpose of Expenditure Mail - originally filed as Red Horse for \$80,000			Category/ Type 006	
Name of Federal Candidate: Mejia, Analilia, , ,			☒ Support ☐ Oppose Office Sought: ☒ House ☐ Senate District: <u>11</u> ☐ President ☐ State: <u>NJ</u>	
Calendar Year-To-Date Per Election for Office Sought			5732.08 Disbursement For: ☐ Primary ☐ General 2026 ☒ Other (specify) ▶ <u>Special</u>	
(a) SUBTOTAL of Itemized Independent Expenditures 133238.25 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Boland, Mike, , ,</u>			Date M M / D D / Y Y Y Y Y Y 03 / 20 / 2026	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Working Families Party PAC	FEC IDENTIFICATION NUMBER ▼ C C00606962
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y	

Full Name of Payee ☐ Memo Item Person2Person Solutions			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y	
Mailing Address 55 Washington St Ste 702			Amount 5149.38	
City Brooklyn	State NY	Zip Code 11201-1063	Transaction ID : 500001669 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y	
Purpose of Expenditure Printed literature - originally estimated as \$6,000 from Red Horse		Category/Type	M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate: Mejia, Analilia, , ,			☒ Support ☐ Oppose Office Sought: ☒ House District: <u>11</u> ☐ President ☐ Senate State: <u>NJ</u>	
Calendar Year-To-Date Per Election for Office Sought			5732.08	
Disbursement For: ☐ Primary ☐ General ☒ Other (specify) ▶			2026 Special	

Full Name of Payee ☐ Memo Item Mailing Address			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y	
City			Amount 	
State	Zip Code		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y	
Purpose of Expenditure		Category/Type	M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate: ☐ Support ☐ Oppose Office Sought: ☐ House District: _____ ☐ President ☐ Senate State: _____			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought				

(a) SUBTOTAL of Itemized Independent Expenditures	▶	5149.38
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	284012.63

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Boland, Mike, , ,
 Signature

Date

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