

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Committee to Elect Zack Huffman

ADDRESS (number and street) P.O. Box 164216 Little Rock AR 72216 Check if different than previously reported. (ACC) CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER C C00912345 3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE DISTRICT AR 02

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) Termination Report (TER)

(b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on 03 / 03 / 2026 in the State of AR (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on / / in the State of

5. Covering Period 01 / 01 / 2026 through 02 / 11 / 2026

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 Boerner, Lindsey, , , Signature of Treasurer Boerner, Lindsey, , , Date 02 / 16 / 2026

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

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Committee to Elect Zack Huffman

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2026 To: M M / D D / Y Y Y Y 02 / 11 / 2026

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	238.12	9678.07
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	238.12	9678.07
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	553.21	9928.08
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	553.21	9928.08
8. Cash on Hand at Close of Reporting Period (from Line 27)	949.99	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	1200.00	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Committee to Elect Zack Huffman

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	42.00	2412.52
(ii) Unitemized.....	156.13	3187.62
(iii) TOTAL of contributions from individuals ▶	198.13	5600.14
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1250.00
(d) The Candidate.....	39.99	2827.93
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	238.12	9678.07
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	1200.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	1200.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	238.12	10878.07

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	553.21	9928.08
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	553.21	9928.08

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1265.08
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	238.12
25. SUBTOTAL (add Line 23 and Line 24).....	1503.20
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	553.21
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	949.99

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 9
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Committee to Elect Zack Huffman

A. Full Name (Last, First, Middle Initial)
Matrick, Andrew, , ,

Mailing Address 233 E 13th Street
Apt 2509

City Chicago State IL Zip Code 60605

FEC ID number of contributing federal political committee. C

Name of Employer Aven Harbor, PLLC Occupation Psychiatrist

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
603.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 07 / 2026

Transaction ID : SA11AI.4270

Amount of Each Receipt this Period
21.00

Memo Item

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

Mailing Address 233 E 13th Street
Apt 2509

City Chicago State IL Zip Code 60605

FEC ID number of contributing federal political committee. C

Name of Employer Aven Harbor, PLLC Occupation Psychiatrist

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
624.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 07 / 2026

Transaction ID : SA11AI.4357

Amount of Each Receipt this Period
21.00

Memo Item

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	42.00
TOTAL This Period (last page this line number only)..... ▶	42.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 9	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Committee to Elect Zack Huffman

A. Full Name (Last, First, Middle Initial)
HUFFMAN, ZACKARY BLAKE, , ,

Mailing Address P.O. BOX 164216

City LITTLE ROCK	State AR	Zip Code 72216
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FEC ID number of contributing federal political committee. **C** H6AR02294

Name of Employer Teach for America	Occupation Development
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Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4027.93

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 02 / 2026

Transaction ID : SA11D.4303

Amount of Each Receipt this Period
39.99

Memo Item
In-kind - GoDaddy Website

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

Mailing Address

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

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

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	39.99
TOTAL This Period (last page this line number only)..... ▶	39.99

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 9	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Committee to Elect Zack Huffman

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Facebook		M M / D D / Y Y Y Y 01 / 20 / 2026
Mailing Address 1 Hacker Way		FEC Identification Number
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement Advertising	004	
Candidate Name Committee to Elect Zack Huffman	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AR District: 02	Amount of Each Disbursement this Period 465.23	
		Transaction ID : SB17.4359
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. HUFFMAN, ZACKARY BLAKE, , ,		M M / D D / Y Y Y Y 01 / 02 / 2026
Mailing Address P.O. BOX 164216		FEC Identification Number
City LITTLE ROCK	State AR	Zip Code 72216
Purpose of Disbursement In-kind - GoDaddy Website		
Candidate Name Committee to Elect Zack Huffman	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AR District: 02	Amount of Each Disbursement this Period 39.99	
		Transaction ID : SB17.4309
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
C.		M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number
City	State	Zip Code
Purpose of Disbursement		
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Amount of Each Disbursement this Period	
		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	505.22
TOTAL This Period (last page this line number only).....▶	505.22

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.4189
 Committee to Elect Zack Huffman

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item HUFFMAN, ZACKARY BLAKE, , ,		Election: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address P.O. BOX 164216		<input checked="" type="checkbox"/> Personal Funds of the Candidate
City LITTLE ROCK	State AR	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50.00	0.00	50.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 07 / 14 / 2025	M M / D D / Y Y Y Y 03/31/2026	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....▶	50.00
TOTALS This Period (last page in this line only).....▶	<input type="text"/>

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

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4190**
 Committee to Elect Zack Huffman

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2026
HUFFMAN, ZACKARY BLAKE, , ,		<input checked="" type="checkbox"/> Primary
Mailing Address P.O. BOX 164216		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City LITTLE ROCK	State AR	ZIP Code 72216
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1150.00	0.00	1150.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	07 / 23 / 2025	03/31/2026	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....▶	1150.00
TOTALS This Period (last page in this line only).....▶	1200.00

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