10/08/2025 16 : 46

PAGE 1 / 27

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An Aut	thorized Com	mittee		Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT	•	ample: If typing, typer er the lines.	e 12FE4M5	
Vasquez For Congre	9 SS		<u> </u>	1 1 1 1 1 1 1	
ADDRESS (number and street)	PO Box 3495				
▼ Check if different					
than previously reported. (ACC)	Palm Beach				33480
. FEC IDENTIFICATION	NUMBER ▼	CITY ▲		STATE ▲	ZIP CODE ▲
C C00911511		3. IS THIS REPORT	NEW (N) OR	AMENI (A)	STATE ▼ DISTRICT VA 03 1
. TYPE OF REPORT (Choose One)	(b) 12-Day PRE	-Election Report for	the:	
(a) Quarterly Reports:		П	Primary (12P)	General (12G) Runoff (12R)
April 15 Quarterl	y Report (Q1)	H			
July 15 Quarterly	y Report (Q2)	Ш	Convention (12C)	Special (1	2S)
October 15 Qual	rterly Report (Q3)	Election on	M M / D	D / Y Y Y Y	in the State of
January 31 Year-	-End Report (YE) ((c) 30-Day POS	T -Election Report fo	r the:	
			General (30G)	Runoff (30	OR) Special (30S)
X Termination Repo	ort (TER)	Election on	M M / D	D / Y Y Y Y	in the State of
i. Covering Period	07 D D D /	Y Y Y Y Y 2025	through	M M / D D / 08 / 28	Y Y Y Y Z025
certify that I have examined Type or Print Name of Treasu	Kigar Bahart	=	owledge and belief	it is true, correct and	d complete.
Signature of Treasurer	Kiger, Robert, , ,			Date 10	/ D D / Y Y Y Y Y Y Y 2025
NOTE: Submission of false, erro	oneous, or incomplete	information may	subject the person siç	gning this Report to the	he penalties of 52 U.S.C. §30109
Office Use Only					FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

٧	'asquez	For	Congress

^M08 2025 2025 28 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 0.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 0.00 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 8244.11 22744.11 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 8244.11 22744.11 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 0.00 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D).....

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

07 2025 80 28 01 2025 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 0.00 0.00 (i) Itemized (use Schedule A)...... 0.00 0.00 (ii) Unitemized (iii) TOTAL of contributions 0.00 0.00 from individuals 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs)..... 0.00 0.00 The Candidate..... (d) TOTAL CONTRIBUTIONS (other than loans) 0.00 (add Lines 11(a)(iii), (b), (c), and (d)).. 0.00 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES 13. LOANS: (a) Made or Guaranteed by the 9424.56 23924.56 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 9424.56 23924.56 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 0.00 (Refunds, Rebates, etc.) 15. OTHER RECEIPTS 0.00 0.00 (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) 9424.56 23924.56 (Carry Total to Line 24, page 4).....

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 05/2016)

of Disbursements

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	8244.11	22744.11
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate	1180.45	1180.45
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	1180.45	1180.45
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)	9424.56	23924.56
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	rting period	0.00
4	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	9424.56
5.	SUBTOTAL (add Line 23 and Line 24)		9424.56
26.	TOTAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	9424.56
	CASH ON HAND AT CLOSE OF REPORTING	G PERIOD	0.00

			FOR LINE NUMBER: PAGE 5 OF 27 (check only one) 11a 11b 11c 11d 11d 12 X 13a 13b 14 15 person for the purpose of soliciting contributions
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Vasquez For Congress	e name and ac	ddress of any political committe	e to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) FEC Infusion LLC Mailing Address PO Box 3495			Date of Receipt
City Palm Beach	State FL	Zip Code 33480	07 11 2025 Transaction ID : SA13A.4115
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer Receipt For: 2026 Primary General Other (specify) ▼	Occupation Election Cyc	cle-to-Date ▼ 500.00	Memo Item Loan to Campaign To Open Bank Account
Full Name (Last, First, Middle Initial) Vasquez, Dawn, , , Mailing Address 1518 Eagle Ave City	State	Zip Code	Date of Receipt M
Norfolk FEC ID number of contributing federal political committee. Name of Employer	Occupation	23518 A03097	Amount of Each Receipt this Period 2064.26
Self Receipt For: 2026 ✓ Primary General Other (specify) ▼		cle-to-Date ▼ 16564.26	Memo Item Loan to Campaign/Campaign Event/Food & Bevera
Full Name (Last, First, Middle Initial) Vasquez, Dawn, , , Mailing Address 1518 Eagle Ave			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Norfolk	State VA	Zip Code 23518	Transaction ID : SA13A.4133
FEC ID number of contributing federal political committee.	C H6V	A03097	Amount of Each Receipt this Period
Name of Employer Self Receipt For: 2026 ✓ Primary General Other (specify) ▼	Occupation Candidate Election Cyc	cle-to-Date ▼ 17027.16	Memo Item Loan to Campaign/Campaign Event/Audio & Music
SUBTOTAL of Receipts This Page (optional)			3027.16

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

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ H98 'HC' 5 'F9 DCFH Z G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: SA13A Transaction ID: SA13A.4130

(Current loan amount of 2064.26 from a balance of 2064.26 has been forgiven)

Form/Schedule: SA13A Transaction ID: SA13A.4133

(Current loan amount of 462.90 from a balance of 462.90 has been forgiven)

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 OF 27 (check only one) 11a 11b 11c 11d 11d 12 X 13a 13b 14 15
			person for the purpose of soliciting contributions tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Vasquez For Congress		· · · · · · · · · · · · · · · · · · ·	
Full Name (Last, First, Middle Initial) Vasquez, Dawn, , , Mailing Address 1518 Eagle Ave City Norfolk FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2026 Primary General Other (specify)	Occupation Candidate	Zip Code 23518 	Date of Receipt 07 08 2025 Transaction ID: SA13A.4127 Amount of Each Receipt this Period 1397.40 Memo Item Loan to Campaign/Travel Lodging/Residence In
Full Name (Last, First, Middle Initial) Vasquez, Dawn, , , Mailing Address 1518 Eagle Ave City	State	Zip Code	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Norfolk FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2026 Primary General Other (specify) ▼	Occupation Candidate Election C	23518 /A03097 pycle-to-Date 23424.56	Amount of Each Receipt this Period 5000.00 Memo Item Loan to Campaign
Full Name (Last, First, Middle Initial) Mailing Address City	State	Zip Code	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer	C		Amount of Each Receipt this Period
Receipt For: Primary General Other (specify) ▼	Election C	ycle-to-Date ▼	Memo Item
SUBTOTAL of Receipts This Page (optional)			6397.40
TOTAL This Period (last page this line numb	er only)		9424.56

: 97 'A = G7 9 @ G B9 CI G'H9 LH F 9 @ 5 H9 8 'HC '5 'F 9 DC F HZ G7 < 98 I @ 'C F '+ H9 A = N5 H= C B

Form/Schedule: SA13A Transaction ID: SA13A.4127

(Current loan amount of 1397.40 from a balance of 1397.40 has been forgiven)

Form/Schedule: SA13A Transaction ID: SA13A.4119

(Current loan amount of 5000.00 from a balance of 5000.00 has been forgiven)

ITEMIZED DISBURSEMENTS

PAGE 9 27 FOR LINE NUMBER: SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the X 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Vasquez For Congress Full Name (Last, First, Middle Initial) Date of Disbursement A. FEC Infusion LLC 2025 Mailing Address PO Box 3495 City State Zip Code **FEC Identification Number** FL Palm Beach 33480 Purpose of Disbursement C00911511 Reporting And Compliance/Setup Fee 001 Candidate Name Amount of Each Disbursement this Period Category/ Vasquez For Congress Type 500.00 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: SB17.4128 Other (specify) President Memo Item VA District: Full Name (Last, First, Middle Initial) B. FEC Infusion LLC Date of Disbursement Mailing Address PO Box 3495 2025 08 City State Zip Code **FEC Identification Number** Palm Beach FL 33480 Purpose of Disbursement C00911511 Reporting And Compliance/Setup Fee 001 Candidate Name Amount of Each Disbursement this Period Category/ Vasquez For Congress Type 1101.05 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: SB17.4138 Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) Date of Disbursement C. FEC Infusion LLC Mailing Address PO Box 3495 80 28 2025 City State Zip Code **FEC Identification Number** 33480 Palm Beach Purpose of Disbursement C00911511 Reporting And Compliance/ 001 Candidate Name Amount of Each Disbursement this Period Category/ Vasquez For Congress Type Disbursement For: 2026 693.50 Office Sought: House Senate Primary General Transaction ID: SB17.4145 President Other (specify) Memo Item VA State: District: SUBTOTAL of Disbursements This Page (optional)..... 2294.55

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

27 **PAGE** 10 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Vasquez For Congress Full Name (Last, First, Middle Initial) Date of Disbursement A. Hampton Roads Jump LLC 2025 06 Mailing Address 18 Barbour Dr City State Zip Code **FEC Identification Number** VA **Newport News** 23606 Purpose of Disbursement C00911511 Campaign Event/Audio & Music 007 Candidate Name Amount of Each Disbursement this Period Category/ Vasquez For Congress Type Disbursement For: 2026 462.90 Office Sought: House Senate Primary General Transaction ID: SB17.4136 Other (specify) President Memo Item VA District: Full Name (Last, First, Middle Initial) B. Mission BBQ Date of Disbursement Mailing Address 1511 Premium Outlet Boulevard 06 2025 City State Zip Code **FEC Identification Number** Norfolk 23518 Purpose of Disbursement C00911511 Campaign Event/Food & Beverage 007 Candidate Name Amount of Each Disbursement this Period Category/ Vasquez For Congress Type 2064.26 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: SB17.4137 Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Numentica LLC Mailing Address 3868 West Carson Street 80 28 2025 Suite #300 City State Zip Code **FEC Identification Number** 90503 **Torrance** CA Purpose of Disbursement C00911511 Website Services 001 Candidate Name Amount of Each Disbursement this Period Category/ Vasquez For Congress Type Disbursement For: 2026 2000.00 Office Sought: House General Senate Primary Transaction ID: SB17.4142 President Other (specify) Memo Item VA State: District: SUBTOTAL of Disbursements This Page (optional)..... 4527.16

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

SCHEDULE B (FEC Form 3)

27 PAGE 11 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 19b 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) Vasquez For Congress Full Name (Last, First, Middle Initial) Date of Disbursement Residence Inn 2025 Mailing Address 1518 Eagle Ave State City Zip Code **FEC Identification Number** VA Norfolk 23518 Purpose of Disbursement C00911511 Lodging/ Hotel 002 Candidate Name Amount of Each Disbursement this Period Category/ Vasquez For Congress Type 1397.40 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: SB17.4126 Other (specify) President Memo Item V٨ State: District: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: Office Sought: House Senate Primary General Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 1397.40 TOTAL This Period (last page this line number only)..... 8219.11

ITEMIZED DISBURSEMENTS

PAGE 12 27 FOR LINE NUMBER: SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the X 19a 17 18 19b Detailed Summary Page 20a 20b 20c 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Vasquez For Congress Full Name (Last, First, Middle Initial) Date of Disbursement A. FEC Infusion LLC 2025 Mailing Address PO Box 3495 City State Zip Code **FEC Identification Number** FL Palm Beach 33480 Purpose of Disbursement C00911511 Repayment of Loan to Open Wells Account 009 Candidate Name Amount of Each Disbursement this Period Category/ Vasquez For Congress Type Disbursement For: 2026 500.00 Office Sought: House Senate Primary General Transaction ID: SB19A.4123 Other (specify) President Memo Item VA State: District: Full Name (Last, First, Middle Initial) B. Vasquez, Dawn, , , Date of Disbursement Mailing Address 1518 Eagle Ave 28 2025 08 City State Zip Code **FEC Identification Number** Norfolk 23518 Purpose of Disbursement C00911511 Loan Repayment To Close Wells Account/ 009 Candidate Name Amount of Each Disbursement this Period Category/ Vasquez For Congress Type 680.45 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: SB19A.4146 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 1180.45

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

1180.45

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

FOR LINE NUMBER: (check only one)

PAGE 13

13a

			Detailed Summary	y Fage		13b
NAME OF COMMITTEE (In Full)			Tra	ansaction ID : SC/10.4115		
Vasquez For Congress						
LOAN SOURCE Full Name (Last, First, Mic	ldle Initial)		Memo			
FEC Infusion LLC				Primary General		
Mailing Address PO Box 3495				Other (specify)		
City	State	ZIP Code				
Palm Beach	FL	33480		Personal Funds of t	he Can	ndidate
Original Amount of Loan	Cumulative Pay	ment To D		Balance Outstanding at Close	-	
500.00			500.00		0.00)
TERMS Date Incurred	D	ate Due	, ,	t Rate Sec enter 0)	ured:	
07 ^M / 11 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	M M / D D		None	0.00 % (apr)	Yes	No
List All Endorsers or Guarantors (if any) to	o Loan Source					
1. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
	ı		Amount		$\overline{}$	
City	ZIP Code	I .	Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
			Amount Guaranteed			
City State	ZIP Code		Outstanding:			
3. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
	·		Amount Guaranteed			
City	ZIP Code		Outstanding:	, , , , , , , , , , , , , , , , , , ,		
4. Full Name (Last, First, Middle Initial)	!·		Name of Employer			
Mailing Address			Occupation			
			Amount		-	
City State	ZIP Code		Guaranteed Outstanding:	9 9		
SUBTOTALS This Period This Page (optional)					0.00	
(optional)				<u> </u>	0.00	-
TOTALS This Period (last page in this line only	·) ·······		······			
Carry outstanding balance only to LINE 3, Sch	nedule D, for this	s line. If no	Schedule D, carry	forward to appropriate line of	f Sumr	mary.

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

FOR LINE NUMBER: (check only one)

PAGE 14

13a

			Detailed Summar	y Page			13b
NAME OF COMMITTEE (In Full)			Tra	nsaction	ID : SC/10.4104		•
Vasquez For Congress							
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)		☐ Memo	item	ection: 2026		
Vasquez, Dawn, , ,				X	Primary General		
Mailing Address 1518 Eagle Ave					Other (specify) ▼		
City	State	ZIP Code)		7		
Norfolk	VA	23518			Personal Funds of	the Ca	ndidate
Original Amount of Loan 5000.00	Cumulative Pay	yment To D	ate 680.45	Balance	Outstanding at Close	of This	
TERMS Date Incurred	,	ota Dua	Intercet	Data	Society		
		ate Due		enter 0)	Sec	cured:	
06 / D1D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	M - M / D - D		lone	0.00	% (apr)	Yes	X No
List All Endorsers or Guarantors (if any) t	o Loan Source	Ţ					
1. Full Name (Last, First, Middle Initial)		1	Name of Employer				
Mailing Address		(Occupation				
City State	ZIP Code		Amount Guaranteed Outstanding:	7			
2. Full Name (Last, First, Middle Initial)	l	1	Name of Employer				
Mailing Address		(Occupation				
			Amount Guaranteed				1
City	ZIP Code		Outstanding:	7			ı
3. Full Name (Last, First, Middle Initial)	•	1	Name of Employer				
Mailing Address		(Occupation				
Chat	ZID Code		Amount Guaranteed				1
City	ZIP Code		Outstanding:	,	7		1
4. Full Name (Last, First, Middle Initial)		1	Name of Employer				
Mailing Address		(Occupation				
	710.0		Amount Guaranteed			-	1
City	ZIP Code		Outstanding:	7	9	_	1
		·					
SUBTOTALS This Period This Page (optional)			······		, , ,	0.0	0
TOTALS This Period (last page in this line only	/)				7 7		
Carry outstanding balance only to LINE 3, Sci	nedule D, for this	s line. If no	Schedule D, carry	forward	to appropriate line of	of Sum	ımary.

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: SC/10 Transaction ID: SC/10.4104

(Current loan amount of 4319.55 from a balance of 4319.55 has been forgiven)

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

FOR LINE NUMBER: (check only one)

PAGE 16 OF

×	13a
	13b

			Detailed S	bummary Pa	ige			13b
AME OF COMMITTEE (In Full)				Transa	ction ID	: SC/10.4103		•
Vasquez For Congress								
LOAN SOURCE Full Name (Last, First, Mice Vasquez, Dawn, , , Mailing Address	ddle Initial)			Memo Item		ion: 2026 Primary General Other (specify) ¬		
1518 Eagle Ave						otrier (specify)		
City	State	ZIP Code				Personal Funds	of the Can	didate
Norfolk	VA	23518				T Groomar T ariao		
Original Amount of Loan 9000.00	Cumulative Pay	yment To Dat	e 0.00		ance O	utstanding at Clo	ose of This	
TERMS Date Incurred	D	ate Due		Interest Rat (If none, enter			Secured:	
M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	M M / D D	/ Y Y	re Y	(0.00	% (apr)	Yes >	≺ _{No}
List All Endorsers or Guarantors (if any) to	o Loan Source	N.	ma of Fm					
1. Full Name (Last, First, Middle Initial)		INC	me of Emp	bioyei				
Mailing Address			cupation					
City	ZIP Code	Gı	nount laranteed itstanding:		9	9		
2. Full Name (Last, First, Middle Initial)		Na	me of Emp	oloyer				
Mailing Address		Oc	cupation					
			nount					
City	ZIP Code	I	aranteed Itstanding:		7			
3. Full Name (Last, First, Middle Initial)		Na	me of Em	oloyer				
Mailing Address		Oc	cupation					
City State	ZIP Code	Gu	nount laranteed ltstanding:		,	- ,		
4. Full Name (Last, First, Middle Initial)		Na	me of Em	oloyer				
Mailing Address		Oc	cupation					
		An	nount	_				
City	ZIP Code		aranteed Itstanding:	L	7	9	- N	
SUBTOTALS This Period This Page (optional)				▶		7 7	0.00	
FOTALS This Period (last page in this line only	/)			▶		, ,		
Carry outstanding balance only to LINE 3, Sch	nedule D, for this	s line. If no	Schedule I	D, carry for	ward to	appropriate lin	ne of Sumn	nary.

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: SC/10 Transaction ID: SC/10.4103

(Current loan amount of 9000.00 from a balance of 9000.00 has been forgiven)

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

FOR LINE NUMBER: (check only one)

PAGE 18 OF

X	13a
	13h

			Detailed 5	ummary Pa	age			13b
AME OF COMMITTEE (In Full)				Transa	ction ID	: SC/10.4105		
Vasquez For Congress								
LOAN SOURCE Full Name (Last, First, Mic	ldle Initial)			Memo Iten		ion: 2026		
Vasquez, Dawn, , ,						Primary General		
Mailing Address						Other (specify)	▼	
1518 Eagle Ave								
City	State	ZIP Code				Personal Funds	s of the Car	ndidate
Norfolk	VA	23518				- Croonar r ana		
Original Amount of Loan	Cumulative Pay	ment To D	ate	Ва	lance O	utstanding at C	lose of This	Period
500.00			0.00				0.00)
TERMS Date Incurred	D	ate Due		Interest Ra	te		Secured:	
M M / D D / Y Y Y Y	M M / D D	/ Y Y	YY	(If none, ent	-	1		
06 25 2025			one		0.00	% (apr)	Yes	X No
List All Endorsers or Guarantors (if any) to	o Loan Source							
1. Full Name (Last, First, Middle Initial)		1	Name of Emp	oloyer				
Mailing Address		(Occupation					
			Amount					
City	ZIP Code		Guaranteed Outstanding:		7	,		
2. Full Name (Last, First, Middle Initial)		1	Name of Emp	oloyer				
Mailing Address		(Occupation					
City	ZID Code		Amount Guaranteed	-				
City	ZIP Code		Outstanding:		7	7	-	
3. Full Name (Last, First, Middle Initial)		1	Name of Emp	oloyer				
Mailing Address		(Occupation					
			Amount		-			
City	ZIP Code		Guaranteed Outstanding:		7	7	-	
4. Full Name (Last, First, Middle Initial)		1	Name of Emp	oloyer				
Mailing Address		(Occupation					
		1	Amount	_	-			
City State	ZIP Code		Guaranteed Outstanding:		7	9	_ n	
CIPTOTALS This Deviced This Deep (artisant)								$\overline{}$
SUBTOTALS This Period This Page (optional)						7 7	0.00)
FOTALS This Period (last page in this line only	y)			▶		, ,		
Carry outstanding balance only to LINE 3, Sch	nedule D, for this	line. If no	Schedule D), carry fo	ward to	appropriate li	ne of Sumr	mary.

: 97 'A = G7 9 @ G B9 CI G'H9 LH F 9 @ 5 H9 8 'HC '5 'F 9 DC F HZ G7 < 98 I @ 'C F '+ H9 A = N5 H= C B

Form/Schedule: SC/10 Transaction ID: SC/10.4105

(Current loan amount of 500.00 from a balance of 500.00 has been forgiven)

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

FOR LINE NUMBER: (check only one)

PAGE 20 OF

×	13a
	13h

			Detailed Garrina	y i age		13b
NAME OF COMMITTEE (In Full)			Tra	ansaction ID) : SC/10.4130	
Vasquez For Congress						
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)		☐ Memo	item	tion: 2026	
Vasquez, Dawn, , ,		Primary Conoral				
Mailing Address			General Other (specify) ▼			
1518 Eagle Ave						
City	State	ZIP Code)			
Norfolk	VA	23518			Personal Funds of the	Candidate
Original Amount of Loan	Cumulative Pay	yment To D	ate	Balance O	utstanding at Close of	This Period
2064.26			0.00			0.00
2 2	,	, 5			1	
TERMS Date Incurred		ate Due		t Rate , enter 0)	Secure	d:
07	M M / D D		lone	0.00	% (apr)	s X No
List All Endorsers or Guarantors (if any) t	o Loan Source					
1. Full Name (Last, First, Middle Initial)		1	Name of Employer			
Mailing Address			Occupation			
		I	Amount			
City State	ZIP Code		Guaranteed Outstanding:	7	7	
2. Full Name (Last, First, Middle Initial)		1	Name of Employer			
Mailing Address		(Occupation			
			Amount			
City	ZIP Code		Guaranteed Outstanding:	7	7	
3. Full Name (Last, First, Middle Initial)		ı	Name of Employer			
Mailing Address		(Occupation			
			Amount			
City	ZIP Code		Guaranteed Outstanding:	7		
4. Full Name (Last, First, Middle Initial)		1	Name of Employer			
Mailing Address			Occupation			
		,	Amount			_
City	ZIP Code		Guaranteed Outstanding:	7	7	
SUBTOTALS This Period This Page (optional)		'				0.00
CODIOTALO TIIS FEROU TIIS Fage (optional).				-	7	0.00
TOTALS This Period (last page in this line only	y)		·····•		7	
Carry outstanding balance only to LINE 3, Sci	hedule D, for this	s line. If no	Schedule D, carry	y forward to	o appropriate line of S	ummary.

: 97 'A - G7 9 @ 5 B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC F H Z G7 < 98 I @ 'C F' + H9 A - N5 H-C B

Form/Schedule: SC/10 Transaction ID: SC/10.4130

(Current loan amount of 2064.26 from a balance of 2064.26 has been forgiven)

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

FOR LINE NUMBER: (check only one)

PAGE 22

13a

			Detailed Summar	y Page			13b
NAME OF COMMITTEE (In Full)			Tra	ansaction	ID : SC/10.4133		
Vasquez For Congress							
LOAN SOURCE Full Name (Last, First, Mic	ddle Initial)		☐ Memo	ILEIII	ection: 2026		
Vasquez, Dawn, , ,				X	Primary General		
Mailing Address					Other (specify) ▼		
1518 Eagle Ave							
City	State	ZIP Code	e		Personal Funds of the	Can	ndidate
Norfolk	VA	23518				——	
Original Amount of Loan	Cumulative Pay	yment To D	ate	Balance	Outstanding at Close of	This	Period
462.90			0.00			0.00)
TERMS Date Incurred		ate Due	Interest	Rate	Secure	ed:	
M M / D D / Y Y Y	M M / D D	/ × ×	(If none,	enter 0)	_		
06 2025	/ 5 5		None	0.00	% (apr) Ye	es >	\times No
List All Endorsers or Guarantors (if any) t	o Loan Source						
1. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address		- 1	Occupation				
			Amount			_	
City	ZIP Code		Guaranteed Outstanding:	7			
2. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address			Occupation				
	T		Amount Guaranteed			П	
City	ZIP Code		Outstanding:	7	7	_	
3. Full Name (Last, First, Middle Initial)	<u> </u>		Name of Employer				
Mailing Address			Occupation				
	T		Amount Guaranteed			П	
City	ZIP Code		Outstanding:	7	7	_	
4. Full Name (Last, First, Middle Initial)	<u>'</u>		Name of Employer				
Mailing Address			Occupation				
			Amount				
City State	ZIP Code		Guaranteed Outstanding:	7	9		
SUBTOTALS This Period This Page (optional).			_			0.00	
			<u>, </u>	 	7 7	3.00	#
TOTALS This Period (last page in this line only	/)		······•	<u></u>	7	_	
Carry outstanding balance only to LINE 3, Sch	nedule D, for this	s line. If no	Schedule D, carry	forward	to appropriate line of \$	Տumn	nary.

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: SC/10 Transaction ID: SC/10.4133

(Current loan amount of 462.90 from a balance of 462.90 has been forgiven)

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

FOR LINE NUMBER: (check only one)

PAGE 24

13a

			Detailed Summar	y Page			13b
NAME OF COMMITTEE (In Full)	Tra	nsaction	ID : SC/10.4127				
Vasquez For Congress							
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)		Memo	item	ction: 2026		
Vasquez, Dawn, , ,		X	Primary General				
Mailing Address 1518 Eagle Ave					Other (specify) ▼		
City	State	ZIP Code)		7		
Norfolk	VA	23518			Personal Funds of t	he Ca	ndidate
Original Amount of Loan Cumulative Payment To			ate 0.00	Balance	Outstanding at Close	of This	
9 9 9 9 9		7	-		7	_	
TERMS Date Incurred	D	ate Due	Interest (If none,	Rate enter 0)	Sec.	ured:	
M 07	M M / D D		lone	0.00	% (apr)	Yes	X No
List All Endorsers or Guarantors (if any) t	o Loan Source		Name of Francisco				
Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address		(Occupation				
City	ZIP Code		Amount Guaranteed Outstanding:	7	,		
2. Full Name (Last, First, Middle Initial)	1	1	Name of Employer				
Mailing Address		(Occupation				
	T	I	Amount Guaranteed			-	
City	ZIP Code		Outstanding:	7	7		
3. Full Name (Last, First, Middle Initial)	1	Name of Employer					
Mailing Address		(Occupation				
011	710.0.1		Amount Guaranteed				
City	ZIP Code		Outstanding:	7	у		
4. Full Name (Last, First, Middle Initial)	1	Name of Employer					
Mailing Address		(Occupation				
			Amount			-	
City	ZIP Code		Guaranteed Outstanding:	7	7		
SUBTOTALS This Period This Page (optional).						0.0	0
				-	, , ,	0.0	,
TOTALS This Period (last page in this line only	/)		······•	<u></u>	7 7		
Carry outstanding balance only to LINE 3, Scl	nedule D, for this	s line. If no	Schedule D, carry	forward	to appropriate line o	f Sum	mary.

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: SC/10 Transaction ID: SC/10.4127

(Current loan amount of 1397.40 from a balance of 1397.40 has been forgiven)

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

FOR LINE NUMBER: (check only one)

PAGE 26

13a

.OAI10					Detailed S	ummary Pag	e (,	,	13b
NAME OF COM	1MITTEE (In Full)					Transac	tion ID : S	C/10.4119		
Vasquez Fo										
	RCE Full Name (Last,	First, Mic	ddle Initial)			Memo Item	Election			
Vasquez	z, Dawn, , ,						X Prin Ger	nary eral		
Mailing Add							Oth	er (specify)	▼	
City			State	ZIP Code)					
Norfolk			VA	23518			X Pe	rsonal Fund	ds of the	Candidate
Original Ar	mount of Loan		Cumulative Pag	yment To D	ate	Bala	nce Outst	anding at (Close of T	his Period
	500	0.00			0.00					0.00
TERMS	Date Incurred		С	Date Due		Interest Rate (If none, enter			Secured	d:
07 /	11 Y Y Y Y 2025	Υ	M M / D D		lone	0.0	00	∕₀ (apr)	Yes	X No
List All End	dorsers or Guarantors	(if any) t	o Loan Source							
1. Full Nan	ne (Last, First, Middle	Initial)		1	Name of Emp	loyer				
Mailing	Address			(Occupation					
City		State	ZIP Code		Amount Guaranteed Outstanding:		,	,		
2. Full Nam	e (Last, First, Middle I	l nitial)			Name of Emp	loyer				
Mailing A	Address			(Occupation					
				1	Amount					_
City		State	ZIP Code		Guaranteed Outstanding:		7	7		
3. Full Nam	e (Last, First, Middle II	nitial)	'	1	Name of Emp	loyer				
Mailing A	Address			(Occupation					
City		State	ZIP Code	(Amount Guaranteed Outstanding:		,	,		
4. Full Nam	e (Last, First, Middle I	nitial)			Name of Emp	oloyer				
Mailing A	Address				Occupation					
				<u> </u>	Amount					_
City		State	ZIP Code		Guaranteed Outstanding:		7	7		
SUBTOTALS T	This Period This Page	(optional)				·· >			(0.00
FOTALS This I	Period (last page in thi	s line only	y)			··•	,	,	(0.00
Carry outstand	ding balance only to I	INF 3 Sci	nedule D for this	s line. If no	Schedule D), carry forw	ard to a	nropriate	line of Si	ımmarv

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: SC/10 Transaction ID: SC/10.4119

(Current loan amount of 5000.00 from a balance of 5000.00 has been forgiven)