

48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL Darializa for Congress						
ADDRESS (number and street) PO BOX 129						
CITY New York		STATE NY		ZIP CODE 10027		
2. NAME OF CANDIDATE Avila Chevalier, Darializa, , ,			3. OFFICE SOUGHT (State and District) House NY 13		4. FEC IDENTIFICATION NUMBER C00927541	
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____						
A. FULL NAME Hussein, Faisel, , ,			Name of Employer PIP LLC		Date (month, day, year) 06/11/2026	
MAILING ADDRESS PO Box 1099			Transaction ID : 9631970		Amount 1000.00	
CITY Alpine	STATE NJ	ZIP CODE 07620-1099	Occupation Finance			
B. FULL NAME Hussein, Maen, , ,			Name of Employer FCS		Date (month, day, year) 06/11/2026	
MAILING ADDRESS 5239 Dragonfly Dr			Transaction ID : 9631889		Amount 3500.00	
CITY Wildwood	STATE FL	ZIP CODE 34785-7745	Occupation Physician			
C. FULL NAME Jallad, Tala, , ,			Name of Employer Self Employed		Date (month, day, year) 06/11/2026	
MAILING ADDRESS 106 Central Park S			Transaction ID : 9631886		Amount 1750.00	
CITY New York	STATE NY	ZIP CODE 10019-1563	Occupation Attorney			
D. FULL NAME Khan, Sohail, , ,			Name of Employer Sohail Khan		Date (month, day, year) 06/11/2026	
MAILING ADDRESS 9 Country Club Dr			Transaction ID : 9631887		Amount 3500.00	
CITY Chatham	STATE NJ	ZIP CODE 07928-1601	Occupation Businessman			
E. FULL NAME Laymoun, Samir, , ,			Name of Employer Not Employed		Date (month, day, year) 06/11/2026	
MAILING ADDRESS 655 Princeton Dr			Transaction ID : 9631860		Amount 1500.00	
CITY Sunnyvale	STATE CA	ZIP CODE 94087-1852	Occupation Not Employed			
SIGNATURE (optional) Stanger, Howie, , ,				DATE 06/13/2026	For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov	

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Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

FEC FORM 6
(Revised 03/2016)

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ADDRESS (number and street) PO BOX 129				
CITY, STATE, and ZIP CODE New York NY 10027				
2. NAME OF CANDIDATE Avila Chevalier, Darializa, , ,		3. OFFICE SOUGHT (State and District) House NY 13		4. FEC IDENTIFICATION NUMBER C00927541
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____				
A. FULL NAME, MAILING ADDRESS AND ZIP CODE Lindenbaum, Matthew, , , 132 E 92nd St New York NY 10128-1604		Name of Employer Basswood Capital Llc. Transaction ID : 9632019 Occupation Financial Analyst		Date (month, day, year) 06/11/2026 Amount 1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Perkins, Hilary, , , 193 Oak Dr San Rafael CA 94901-2547		Name of Employer Not Employed Transaction ID : 9632503 Occupation Not Employed		Date (month, day, year) 06/11/2026 Amount 1000.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE Sauer, Chris, , , 60 W 15th St Apt 4 New York NY 10011-6858		Name of Employer Not Employed Transaction ID : 9632122 Occupation Not Employed		Date (month, day, year) 06/11/2026 Amount 3500.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE Shahrour, Mohamad, Naem, , 10527 Bermuda Isle Dr Tampa FL 33647-2721		Name of Employer South Transaction ID : 9631893 Occupation Physician		Date (month, day, year) 06/11/2026 Amount 1000.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE Zill, Zach, , , 6912 32nd St NW Washington DC 20015-1404		Name of Employer NYSERDA Transaction ID : 9631901 Occupation Project Manager		Date (month, day, year) 06/11/2026 Amount 500.00

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(Revised 07/2011)

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continuation page			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE Zill, Zach, , , 6912 32nd St NW Washington DC 20015-1404		Name of Employer NYSERDA Transaction ID : 9631902 Occupation Project Manager	
		Date (month, day, year) 06/11/2026	
		Amount 500.00	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	