



## SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**Bonnie Watson Coleman for Congress**

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 03 / 31 / 2026

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	0.00	306733.38
(b) Total Contribution Refunds (from Line 20(d)) .....	500.00	22000.50
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	- 500.00	284732.88
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	21747.65	334333.08
(b) Total Offsets to Operating Expenditures (from Line 14) .....	513.24	548.57
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	21234.41	333784.51
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>	19644.22	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	0.00	

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov).**

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**Bonnie Watson Coleman for Congress**

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	126162.50
(ii) Unitemized.....	0.00	55987.88
(iii) TOTAL of contributions from individuals ▶	0.00	182150.38
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	124583.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	306733.38
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	513.24	548.57
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	513.24	307281.95

**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.....	21747.65	334333.08
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	19000.50
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	500.00	3000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	500.00	22000.50
21. OTHER DISBURSEMENTS .....	5195.00	31718.63
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	27442.65	388052.21

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	46573.63
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	513.24
25. SUBTOTAL (add Line 23 and Line 24).....	47086.87
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	27442.65
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	19644.22

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 5 OF 25	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Bonnie Watson Coleman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
The College Of New Jersey

Mailing Address 2000 Pennington Rd

City Ewing	State NJ	Zip Code 08618-1104
---------------	-------------	------------------------

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

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

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
513.24

Date of Receipt  

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

**Transaction ID : 24848307**

Amount of Each Receipt this Period  
513.24

Memo Item

Facility Rental Overpayment Return

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

Mailing Address

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

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	513.24
<b>TOTAL</b> This Period (last page this line number only).....▶	513.24

# 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 6 OF 25	
	<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)  
**Bonnie Watson Coleman for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. Amalgamated Bank</b>		M M / D D / Y Y Y Y 03 / 27 / 2026
Mailing Address 1825 K St NW		FEC Identification Number
City Washington	State DC	Zip Code 20006-1202
Purpose of Disbursement Bank Fees		<input type="checkbox"/> Category/Type
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For: 2026	158.78
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<b>Transaction ID : 500634300</b>
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. Capital One</b>		M M / D D / Y Y Y Y 02 / 06 / 2026
Mailing Address PO Box 71083		FEC Identification Number
City Charlotte	State NC	Zip Code 28272-1083
Purpose of Disbursement Credit Card Payment - Below if Itemized		<input type="checkbox"/> Category/Type
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For: 2026	1600.00
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<b>Transaction ID : 500634320</b>
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. Capital One</b>		M M / D D / Y Y Y Y 02 / 06 / 2026
Mailing Address PO Box 71083		FEC Identification Number
City Charlotte	State NC	Zip Code 28272-1083
Purpose of Disbursement Cash Back Rewards		<input type="checkbox"/> Category/Type
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For: 2026	- 25.00
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<b>Transaction ID : 500634321</b>
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
<input type="checkbox"/> President		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1758.78
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 25	
	<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)  
**Bonnie Watson Coleman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Apple</b>		Date of Disbursement MM / DD / YYYY 02 / 06 / 2026
Mailing Address 1 Infinite Loop		FEC Identification Number C
City Cupertino	State CA	Zip Code 95014-2083
Purpose of Disbursement Software	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 39.43	
Office Sought: <input 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) ▼	Transaction ID : 500634322 <input checked="" type="checkbox"/> Memo Item *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Apple</b>		Date of Disbursement MM / DD / YYYY 02 / 06 / 2026
Mailing Address 1 Infinite Loop		FEC Identification Number C
City Cupertino	State CA	Zip Code 95014-2083
Purpose of Disbursement Software	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 15.77	
Office Sought: <input 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) ▼	Transaction ID : 500634323 <input checked="" type="checkbox"/> Memo Item *
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Google Services</b>		Date of Disbursement MM / DD / YYYY 02 / 06 / 2026
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C
City Mountain View	State CA	Zip Code 94043-1351
Purpose of Disbursement Software	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 42.00	
Office Sought: <input 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) ▼	Transaction ID : 500634324 <input checked="" type="checkbox"/> Memo Item *
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 25	
	<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)  
**Bonnie Watson Coleman for Congress**

Full Name (Last, First, Middle Initial) <b>A. United States Postal Service</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2026	
Mailing Address 247 Nassau St Ste 2			FEC Identification Number C	
City Princeton	State NJ	Zip Code 08540-4619	Amount of Each Disbursement this Period 608.70	
Purpose of Disbursement PO Box Fee		Category/ Type	Transaction ID : 500634326	
Candidate Name		<input checked="" type="checkbox"/> Memo Item *		
Office Sought: <input 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: District:				

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2026	
Mailing Address PO Box 4833			FEC Identification Number C	
City Trenton	State NJ	Zip Code 08650-4833	Amount of Each Disbursement this Period 210.50	
Purpose of Disbursement Telecommunications		Category/ Type	Transaction ID : 500634327	
Candidate Name		<input checked="" type="checkbox"/> Memo Item *		
Office Sought: <input 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: District:				

Full Name (Last, First, Middle Initial) <b>C. Capital One</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2026	
Mailing Address PO Box 71083			FEC Identification Number C	
City Charlotte	State NC	Zip Code 28272-1083	Amount of Each Disbursement this Period 130.60	
Purpose of Disbursement Credit Card Fees		Category/ Type	Transaction ID : 500634328	
Candidate Name		<input checked="" type="checkbox"/> Memo Item *		
Office Sought: <input 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: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 25			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Bonnie Watson Coleman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Accurate Word, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2026
Mailing Address 4481 White Plains Ln		FEC Identification Number C
City White Plains	State MD	Zip Code 20695-3018
Purpose of Disbursement Printing		Amount of Each Disbursement this Period 578.00
Candidate Name		Transaction ID : 500634329
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Amalgamated Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2026
Mailing Address 1825 K St NW		FEC Identification Number C
City Washington	State DC	Zip Code 20006-1202
Purpose of Disbursement Bank Fees		Amount of Each Disbursement this Period 179.72
Candidate Name		Transaction ID : 500626170
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Capital One</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2026
Mailing Address PO Box 71083		FEC Identification Number C
City Charlotte	State NC	Zip Code 28272-1083
Purpose of Disbursement Credit Card Payment - Below if Itemized		Amount of Each Disbursement this Period 324.43
Candidate Name		Transaction ID : 500634311
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	504.15
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 25	
	<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)  
**Bonnie Watson Coleman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Capital One</b>		Date of Disbursement MM / DD / YYYY 03 / 06 / 2026
Mailing Address PO Box 71083		FEC Identification Number C
City Charlotte	State NC	Zip Code 28272-1083
Purpose of Disbursement Credit Card Fees		Amount of Each Disbursement this Period 16.82
Candidate Name		Transaction ID : 500634330
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Google Services</b>		Date of Disbursement MM / DD / YYYY 03 / 06 / 2026
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C
City Mountain View	State CA	Zip Code 94043-1351
Purpose of Disbursement Software		Amount of Each Disbursement this Period 42.00
Candidate Name		Transaction ID : 500634332
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement MM / DD / YYYY 03 / 06 / 2026
Mailing Address PO Box 4833		FEC Identification Number C
City Trenton	State NJ	Zip Code 08650-4833
Purpose of Disbursement Telecommunications		Amount of Each Disbursement this Period 210.41
Candidate Name		Transaction ID : 500634333
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 25	
	<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)  
**Bonnie Watson Coleman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Apple</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2026	
Mailing Address 1 Infinite Loop			FEC Identification Number C	
City Cupertino	State CA	Zip Code 95014-2083	Amount of Each Disbursement this Period 55.20	
Purpose of Disbursement Software		Category/ Type	Transaction ID : 500634334	
Candidate Name		<input checked="" type="checkbox"/> Memo Item *		
Office Sought: <input 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: District:				

Full Name (Last, First, Middle Initial) <b>B. Amalgamated Bank</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2026	
Mailing Address 1825 K St NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20006-1202	Amount of Each Disbursement this Period 14.00	
Purpose of Disbursement Bank Fees		Category/ Type	Transaction ID : 500626171	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input 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: District:				

Full Name (Last, First, Middle Initial) <b>C. Capitol Compliance Associates, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2026	
Mailing Address 600 Pennsylvania Ave SE Unit 15180			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-7508	Amount of Each Disbursement this Period 3018.74	
Purpose of Disbursement Compliance Services		Category/ Type	Transaction ID : 500626172	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input 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: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3032.74
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 25	
	<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)  
**Bonnie Watson Coleman for Congress**

Full Name (Last, First, Middle Initial) <b>A. New Blue Interactive, LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 16 / 2026
Mailing Address 5138 Newport Ave		FEC Identification Number C
City Bethesda	State MD	Zip Code 20816-3025
Purpose of Disbursement Digital Consulting Services		Amount of Each Disbursement this Period 502.50
Candidate Name		Transaction ID : 500626173
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Intuit, Inc.</b>		Date of Disbursement MM / DD / YYYY 03 / 13 / 2026
Mailing Address 2632 Marine Way		FEC Identification Number C
City Mountain View	State CA	Zip Code 94043-1126
Purpose of Disbursement Software		Amount of Each Disbursement this Period 79.50
Candidate Name		Transaction ID : 500634304
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Capitol Compliance Associates, Inc.</b>		Date of Disbursement MM / DD / YYYY 03 / 02 / 2026
Mailing Address 600 Pennsylvania Ave SE Unit 15180		FEC Identification Number C
City Washington	State DC	Zip Code 20003-7508
Purpose of Disbursement Compliance Services		Amount of Each Disbursement this Period 5037.48
Candidate Name		Transaction ID : 500634314
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5619.48
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 25	
	<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)  
**Bonnie Watson Coleman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Capital One</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2026	
Mailing Address PO Box 71083			FEC Identification Number <b>C</b>	
City Charlotte	State NC	Zip Code 28272-1083	Amount of Each Disbursement this Period 8172.43	
Purpose of Disbursement Credit Card Payment - Below if Itemized			Transaction ID : 500626174	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input 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: District:				

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2026	
Mailing Address 247 Nassau St Ste 2			FEC Identification Number <b>C</b>	
City Princeton	State NJ	Zip Code 08540-4619	Amount of Each Disbursement this Period 156.00	
Purpose of Disbursement Postage			Transaction ID : 500626180	
Candidate Name			<input checked="" type="checkbox"/> Memo Item *	
Office Sought: <input 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: District:				

Full Name (Last, First, Middle Initial) <b>C. Ambar Capitol Hill</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2026	
Mailing Address 523 8Th St SE			FEC Identification Number <b>C</b>	
City Washington	State DC	Zip Code 20003-2835	Amount of Each Disbursement this Period 477.65	
Purpose of Disbursement Catering			Transaction ID : 500626181	
Candidate Name			<input checked="" type="checkbox"/> Memo Item *	
Office Sought: <input 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: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8172.43
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 25	
	<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)  
**Bonnie Watson Coleman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Google Services</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2026
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C
City Mountain View	State CA	Zip Code 94043-1351
Purpose of Disbursement Software	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 42.00	
Office Sought: <input 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) ▼	Transaction ID : 500626184 <input checked="" type="checkbox"/> Memo Item *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capital One</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2026
Mailing Address PO Box 71083		FEC Identification Number C
City Charlotte	State NC	Zip Code 28272-1083
Purpose of Disbursement Cash Back Rewards	Category/Type	
Candidate Name	Amount of Each Disbursement this Period - 150.00	
Office Sought: <input 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) ▼	Transaction ID : 500626175 <input checked="" type="checkbox"/> Memo Item *
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Amtrak</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2026
Mailing Address 60 Massachusetts Ave NE		FEC Identification Number C
City Washington	State DC	Zip Code 20002-4285
Purpose of Disbursement Travel	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 210.00	
Office Sought: <input 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) ▼	Transaction ID : 500626185 <input checked="" type="checkbox"/> Memo Item *
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 25	
	<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)  
**Bonnie Watson Coleman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Apple</b>			Date of Disbursement MM / DD / YYYY 01 / 09 / 2026	
Mailing Address 1 Infinite Loop			FEC Identification Number C	
City Cupertino	State CA	Zip Code 95014-2083	Amount of Each Disbursement this Period 55.20	
Purpose of Disbursement Software		Category/ Type	Transaction ID : 500626176	
Candidate Name			<input checked="" type="checkbox"/> Memo Item *	
Office Sought: <input 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: District:				

Full Name (Last, First, Middle Initial) <b>B. Al's Airport Inn Bar &amp; Grill</b>			Date of Disbursement MM / DD / YYYY 01 / 09 / 2026	
Mailing Address 636 Bear Tavern Rd			FEC Identification Number C	
City Ewing	State NJ	Zip Code 08628-2701	Amount of Each Disbursement this Period 222.00	
Purpose of Disbursement Catering		Category/ Type	Transaction ID : 500626186	
Candidate Name			<input checked="" type="checkbox"/> Memo Item *	
Office Sought: <input 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: District:				

Full Name (Last, First, Middle Initial) <b>C. Marsilio's Kitchen</b>			Date of Disbursement MM / DD / YYYY 01 / 09 / 2026	
Mailing Address 71 W Upper Ferry Rd			FEC Identification Number C	
City Ewing	State NJ	Zip Code 08628-2710	Amount of Each Disbursement this Period 158.28	
Purpose of Disbursement Catering		Category/ Type	Transaction ID : 500626187	
Candidate Name			<input checked="" type="checkbox"/> Memo Item *	
Office Sought: <input 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: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 25	
	<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)  
**Bonnie Watson Coleman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ambar Capitol Hill</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2026	
Mailing Address 523 8Th St SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-2835	Amount of Each Disbursement this Period 350.00	
Purpose of Disbursement Catering		Category/ Type	Transaction ID : 500626178	
Candidate Name		<input checked="" type="checkbox"/> Memo Item *		
Office Sought: <input 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: District:				

Full Name (Last, First, Middle Initial) <b>B. Royal Sands Social Club</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2026	
Mailing Address 26 N St SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-3546	Amount of Each Disbursement this Period 2876.34	
Purpose of Disbursement Catering		Category/ Type	Transaction ID : 500626188	
Candidate Name		<input checked="" type="checkbox"/> Memo Item *		
Office Sought: <input 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: District:				

Full Name (Last, First, Middle Initial) <b>C. Verizon</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2026	
Mailing Address 1095 Avenue Of The Americas			FEC Identification Number C	
City New York	State NY	Zip Code 10036-6797	Amount of Each Disbursement this Period 210.50	
Purpose of Disbursement Telecommunications		Category/ Type	Transaction ID : 500626179	
Candidate Name		<input checked="" type="checkbox"/> Memo Item *		
Office Sought: <input 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: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 25	
	<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)  
**Bonnie Watson Coleman for Congress**

Full Name (Last, First, Middle Initial) <b>A. The College Of New Jersey</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2026	
Mailing Address 2000 Pennington Rd			FEC Identification Number C	
City Ewing	State NJ	Zip Code 08618-1104	Amount of Each Disbursement this Period 3484.46	
Purpose of Disbursement Catering		Category/ Type	Transaction ID : 500626189	
Candidate Name		<input checked="" type="checkbox"/> Memo Item *		
Office Sought: <input 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: District:				

Full Name (Last, First, Middle Initial) <b>B. Amalgamated Bank</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2026	
Mailing Address 1825 K St NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20006-1202	Amount of Each Disbursement this Period 180.26	
Purpose of Disbursement Bank Fees		Category/ Type	Transaction ID : 500634315	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input 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: District:				

Full Name (Last, First, Middle Initial) <b>C. Amalgamated Bank</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2026	
Mailing Address 1825 K St NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20006-1202	Amount of Each Disbursement this Period 42.00	
Purpose of Disbursement Bank Fees		Category/ Type	Transaction ID : 500634286	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input 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: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	222.26
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 25	
	<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)  
**Bonnie Watson Coleman for Congress**

Full Name (Last, First, Middle Initial) <b>A. NGP VAN, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2026	
Mailing Address 1101 15Th St NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20005-5002	Amount of Each Disbursement this Period 1869.85	
Purpose of Disbursement Software		Category/ Type	Transaction ID : 500626167	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input 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: District:				

Full Name (Last, First, Middle Initial) <b>B. Hood, Patricia, Ann, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2026	
Mailing Address 83 Point Ct			FEC Identification Number C	
City Lawrenceville	State NJ	Zip Code 08648-2873	Amount of Each Disbursement this Period 336.92	
Purpose of Disbursement Reimbursement - Postage & Shipping		Category/ Type	Transaction ID : 500634318	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input 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: District:				

Full Name (Last, First, Middle Initial) <b>C. United Parcel Service (UPS)</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2026	
Mailing Address 316 Pennsylvania Ave SE Ste 300			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-1173	Amount of Each Disbursement this Period 255.00	
Purpose of Disbursement Postage		Category/ Type	Transaction ID : 500634316	
Candidate Name			<input checked="" type="checkbox"/> Memo Item *	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2206.77
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 25	
	<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)  
**Bonnie Watson Coleman for Congress**

Full Name (Last, First, Middle Initial) <b>A. United Parcel Service (UPS)</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2026
Mailing Address 316 Pennsylvania Ave SE Ste 300		FEC Identification Number C
City Washington	State DC	Zip Code 20003-1173
Purpose of Disbursement Shipping		Amount of Each Disbursement this Period 81.92
Candidate Name		Transaction ID : 500634317
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Intuit, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2026
Mailing Address 2632 Marine Way		FEC Identification Number C
City Mountain View	State CA	Zip Code 94043-1126
Purpose of Disbursement Software		Amount of Each Disbursement this Period 79.50
Candidate Name		Transaction ID : 500626168
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Intuit, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2026
Mailing Address 2632 Marine Way		FEC Identification Number C
City Mountain View	State CA	Zip Code 94043-1126
Purpose of Disbursement Software		Amount of Each Disbursement this Period 79.50
Candidate Name		Transaction ID : 500634319
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	159.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 25			
	<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)  
**Bonnie Watson Coleman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Intuit, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2026
Mailing Address 2632 Marine Way			FEC Identification Number C
City Mountain View	State CA	Zip Code 94043-1126	Amount of Each Disbursement this Period 72.04
Purpose of Disbursement Software		Category/ Type	Transaction ID : 500626169
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input 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: District:			

Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement M M / D D / Y Y Y Y
Mailing Address			FEC Identification Number C
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
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:			

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y
Mailing Address			FEC Identification Number C
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	72.04
<b>TOTAL</b> This Period (last page this line number only).....▶	21747.65

# 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 21 OF 25	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Bonnie Watson Coleman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Abbvie Political Action Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2026
Mailing Address 1 N Waukegan Rd		FEC Identification Number C C00536573
City North Chicago	State IL	Zip Code 60064-1802
Purpose of Disbursement Refund		Amount of Each Disbursement this Period 500.00
Candidate Name	Category/ Type	Transaction ID : 500615622
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	500.00

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)  
17 18 19a 19b  
20a 20b 20c  21

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NAME OF COMMITTEE (In Full)  
**Bonnie Watson Coleman for Congress**

**A. Capital One**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 71083

City Charlotte State NC Zip Code 28272-1083

Purpose of Disbursement  
Credit Card Payment - Below if Itemized

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
01 / 09 / 2026

FEC Identification Number  
C

Amount of Each Disbursement this Period  
1971.92

Transaction ID : 500634452

Memo Item

**B. US House Gift Shop**

Full Name (Last, First, Middle Initial)  
Mailing Address 1 Independence Sq SW

City Washington State DC Zip Code 20219-0001

Purpose of Disbursement  
Officially Connected - Supporter Gifts

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
01 / 09 / 2026

FEC Identification Number  
C

Amount of Each Disbursement this Period  
1710.00

Transaction ID : 500626183

Memo Item \*

**C. National Democratic Club**

Full Name (Last, First, Middle Initial)  
Mailing Address 30 Ivy St SE

City Washington State DC Zip Code 20003-4006

Purpose of Disbursement  
Officially Connected - Catering

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
01 / 09 / 2026

FEC Identification Number  
C

Amount of Each Disbursement this Period  
261.92

Transaction ID : 500626177

Memo Item \*

**SUBTOTAL** of Disbursements This Page (optional).....▶ 1971.92

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 25
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Bonnie Watson Coleman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Capital One</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2026
Mailing Address PO Box 71083		FEC Identification Number C
City Charlotte	State NC	Zip Code 28272-1083
Purpose of Disbursement Credit Card Payment - Below if Itemized		Amount of Each Disbursement this Period 80.00
Candidate Name		Transaction ID : 500634474
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. National Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2026
Mailing Address 30 Ivy St SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-4006
Purpose of Disbursement Officially Connected - Catering		Amount of Each Disbursement this Period 80.00
Candidate Name		Transaction ID : 500634325
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Capital One</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2026
Mailing Address PO Box 71083		FEC Identification Number C
City Charlotte	State NC	Zip Code 28272-1083
Purpose of Disbursement Credit Card Payment - Below if Itemized		Amount of Each Disbursement this Period 143.08
Candidate Name		Transaction ID : 500634475
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	223.08
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 25	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Bonnie Watson Coleman for Congress**

Full Name (Last, First, Middle Initial) <b>A. National Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2026
Mailing Address 30 Ivy St SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-4006
Purpose of Disbursement Officially Connected - Catering		Amount of Each Disbursement this Period 143.08
Candidate Name		Transaction ID : 500634331
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Andre Carson For Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2026
Mailing Address PO Box 1863		FEC Identification Number C C00442921
City Indianapolis	State IN	Zip Code 46206-1863
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name CARSON, ANDRE, , ,		Transaction ID : 500634306
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IN District: 07		

Full Name (Last, First, Middle Initial) <b>C. LaMonica McIver For Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2026
Mailing Address PO Box 25585		FEC Identification Number C C00878603
City Newark	State NJ	Zip Code 07101-7585
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name MCIVER, LAMONICA, , ,		Transaction ID : 500634307
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NJ District: 10		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 25	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Bonnie Watson Coleman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Analilia Mejia For New Jersey</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2026
Mailing Address PO Box 41		FEC Identification Number C C00927681
City Bloomfield	State NJ	Zip Code 07003-0041
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name MEJIA, ANALILIA, , ,		Transaction ID : 500634297
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NJ	District: 11	

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5195.00