

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

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Wilneida Ny-12 Committee

ADDRESS (number and street)

105 West 86th Street

PO Box #312

Check if different
than previously
reported. (ACC)

New York

NY

10024

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

C00927095

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

NY

12

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
04 / 01 / 2026

through

M M / D D / Y Y Y Y
06 / 30 / 2026*I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.*

Type or Print Name of Treasurer Zauberer, Jasmine, , ,

Signature of Treasurer

Zauberer, Jasmine, , ,

Date

M M / D D / Y Y Y Y
07 / 15 / 2026

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

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

Wilneida Ny-12 Committee

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	1333.00	3685.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	1333.00	3685.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	37702.74	37702.74
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	37702.74	37702.74
8. Cash on Hand at Close of Reporting Period (from Line 27)	- 17.74	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	35300.00	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Wilneida Ny-12 Committee

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2026

To:

MM / DD / YYYY
06 / 30 / 2026**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

1000.00

3132.00

(ii) Unitemized

308.00

308.00

(iii) TOTAL of contributions
from individuals ▶

1308.00

3440.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

25.00

245.00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

1333.00

3685.00

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

34000.00

34000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

34000.00

34000.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS
(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

35333.00

37685.00

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.....	37702.74	37702.74
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	37702.74	37702.74

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2352.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	35333.00
25. SUBTOTAL (add Line 23 and Line 24).....	37685.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	37702.74
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	- 17.74

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

PAGE 5 OF 29

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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)

Wilneida Ny-12 Committee

Full Name (Last, First, Middle Initial)

Jaffer, Burhan, , ,

A.

Mailing Address 72 York Street

City

Jersey City

State

NJ

Zip Code

07302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hitachi

Occupation

Corporate Development

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	2	6

Transaction ID : A-53

Amount of Each Receipt this Period

500.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

Young, Susan, , ,

Mailing Address 4705 Cape May Avenue

City

San Diego

State

CA

Zip Code

92107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mothwing LLC

Occupation

Consultant

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	2	6

Transaction ID : A-49

Amount of Each Receipt this Period

500.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period



Memo Item

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

1000.00

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

1000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 29

☐ 11a ☐ 11b ☐ 11c ☒ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Wilneida Ny-12 Committee

Full Name (Last, First, Middle Initial)

Negron, Wilneida, , ,

A.

Mailing Address 105 West 86th Street
PO Box #312

City
New York

State
NY

Zip Code
10024

FEC ID number of contributing
federal political committee.

C H6NY12313

Name of Employer
New Venture Fund/Coworker

Occupation
Policy Director

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

29245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 17 2026

Transaction ID : A-55

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

25.00

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

25.00

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

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

FOR LINE NUMBER: PAGE 7 OF 29

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wilneida Ny-12 Committee

Full Name (Last, First, Middle Initial)

Negron, Wilneida, , ,

A.

Mailing Address 105 West 86th Street

PO Box #312

City

New York

State

NY

Zip Code

10024

FEC ID number of contributing
federal political committee.

C H6NY12313

Name of Employer

New Venture Fund/Coworker

Occupation

Policy Director

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2026

Transaction ID : A-65

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Loan from candidate personal funds

Full Name (Last, First, Middle Initial)

Negron, Wilneida, , ,

B.

Mailing Address 105 West 86th Street

PO Box #312

City

New York

State

NY

Zip Code

10024

FEC ID number of contributing
federal political committee.

C H6NY12313

Name of Employer

New Venture Fund/Coworker

Occupation

Policy Director

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

11720.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 24 / 2026

Transaction ID : A-67

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Loan from candidate personal funds

Full Name (Last, First, Middle Initial)

Negron, Wilneida, , ,

C.

Mailing Address 105 West 86th Street

PO Box #312

City

New York

State

NY

Zip Code

10024

FEC ID number of contributing
federal political committee.

C H6NY12313

Name of Employer

New Venture Fund/Coworker

Occupation

Policy Director

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

14220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2026

Transaction ID : A-68

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Loan from candidate personal funds

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

14000.00

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

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)

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☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wilneida Ny-12 Committee

Full Name (Last, First, Middle Initial)
Negron, Wilneida, , ,

Mailing Address 105 West 86th Street
PO Box #312

City
New York

State
NY

Zip Code
10024

FEC ID number of contributing
federal political committee.

C H6NY12313

Name of Employer
New Venture Fund/Coworker

Occupation
Policy Director

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

16220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 04 / 2026

Transaction ID : A-129

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Loan from candidate personal funds

Full Name (Last, First, Middle Initial)
Negron, Wilneida, , ,

Mailing Address 105 West 86th Street
PO Box #312

City
New York

State
NY

Zip Code
10024

FEC ID number of contributing
federal political committee.

C H6NY12313

Name of Employer
New Venture Fund/Coworker

Occupation
Policy Director

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

18220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2026

Transaction ID : A-130

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Loan from candidate personal funds

Full Name (Last, First, Middle Initial)
Negron, Wilneida, , ,

Mailing Address 105 West 86th Street
PO Box #312

City
New York

State
NY

Zip Code
10024

FEC ID number of contributing
federal political committee.

C H6NY12313

Name of Employer
New Venture Fund/Coworker

Occupation
Policy Director

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

21220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : A-131

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Loan from candidate personal funds

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

7000.00

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

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 9 OF 29

☐ 11a ☐ 11b ☐ 11c ☐ 11d
12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wilneida Ny-12 Committee

Full Name (Last, First, Middle Initial)

Negron, Wilneida, , ,

A.

Mailing Address 105 West 86th Street

PO Box #312

City

New York

State

NY

Zip Code

10024

FEC ID number of contributing
federal political committee.

C H6NY12313

Name of Employer

New Venture Fund/Coworker

Occupation

Policy Director

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

24220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2026

Transaction ID : A-132

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Loan from candidate personal funds

Full Name (Last, First, Middle Initial)

Negron, Wilneida, , ,

B.

Mailing Address 105 West 86th Street

PO Box #312

City

New York

State

NY

Zip Code

10024

FEC ID number of contributing
federal political committee.

C H6NY12313

Name of Employer

New Venture Fund/Coworker

Occupation

Policy Director

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

29220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : A-133

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Loan from candidate personal funds

Full Name (Last, First, Middle Initial)

Negron, Wilneida, , ,

C.

Mailing Address 105 West 86th Street

PO Box #312

City

New York

State

NY

Zip Code

10024

FEC ID number of contributing
federal political committee.

C H6NY12313

Name of Employer

New Venture Fund/Coworker

Occupation

Policy Director

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

34245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 23 / 2026

Transaction ID : A-134

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Loan from candidate personal funds

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

13000.00

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

34000.00

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

PAGE 10 OF 29

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Wilneida Ny-12 Committee

Full Name (Last, First, Middle Initial)

A. Borell, Marjorie, , ,

Mailing Address 145 West 108th Street

City
New YorkState
NYZip Code
10025Purpose of Disbursement
ballot services

001

Candidate Name

Category/
Type

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
0	4		2	3		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

525.00

Transaction ID : B-139

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Borell, Marjorie, , ,

Mailing Address 145 West 108th Street

City
New YorkState
NYZip Code
10025Purpose of Disbursement
ballot services

001

Candidate Name

Category/
Type

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
0	5		0	7		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

2237.50

Transaction ID : B-152

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Borough Strategies

Mailing Address 149 96th Street

City
BrooklynState
NYZip Code
11209Purpose of Disbursement
Ballot petitioning services

001

Candidate Name

Category/
Type

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
0	4		2	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : B-146

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

4762.50

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

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

PAGE 11 OF 29

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Wilneida Ny-12 Committee

Full Name (Last, First, Middle Initial)

A. Cadet, Steven, , ,

Mailing Address 174 Alkier Street

City
BrentwoodState
NYZip Code
11717Purpose of Disbursement
ballot services

001

Candidate Name

Category/
Type

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
0	5		1	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

3311.70

Transaction ID : B-155

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Canva

Mailing Address 110 Kippax Street

City
Surry Hills

State

Zip Code
02010

Purpose of Disbursement

006

Candidate Name

Category/
Type

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
0	5		0	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

285.00

Transaction ID : B-43

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Canva

Mailing Address 110 Kippax Street

City
Surry Hills

State

Zip Code
02010

Purpose of Disbursement

006

Candidate Name

Category/
Type

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
0	5		0	6		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

288.52

Transaction ID : B-44

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

3885.22

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

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

PAGE 12 OF 29

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Wilneida Ny-12 Committee

Full Name (Last, First, Middle Initial)

A. Cristabelle Vidal Marque, Xenia, , ,Mailing Address 101 Audubon Avenue
Apt. 46City
New YorkState
NYZip Code
10032Purpose of Disbursement
Ballot petitioning services

001

Candidate Name

Category/
Type

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
0	4		1	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : B-128

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Cristabelle Vidal Marque, Xenia, , ,Mailing Address 101 Audubon Avenue
Apt. 46City
New YorkState
NYZip Code
10032Purpose of Disbursement
Ballot petitioning services

001

Candidate Name

Category/
Type

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
0	5		0	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

375.00

Transaction ID : B-149

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Foy, Peter, , ,

Mailing Address 8 Sandy Hill Road

City
Mount SinaiState
NYZip Code
11766Purpose of Disbursement
Ballot petitioning services

001

Candidate Name

Category/
Type

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
0	5		0	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1675.00

Transaction ID : B-135

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

4050.00

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

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

Wilneida Ny-12 Committee

Full Name (Last, First, Middle Initial)

A. Franck, Madge, , ,

Mailing Address 483 East 93rd Street

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	2	6

City
New YorkState
NYZip Code
10128

FEC Identification Number

C

Purpose of Disbursement
Ballot petitioning services

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

368.00

Transaction ID : B-138

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Franck, Madge, , ,

Mailing Address 483 East 93rd Street

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	2	6

City
New YorkState
NYZip Code
10128

FEC Identification Number

C

Purpose of Disbursement
Ballot petitioning services

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

350.00

Transaction ID : B-151

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Franck, Madge, , ,

Mailing Address 483 East 93rd Street

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	2	6

City
New YorkState
NYZip Code
10128

FEC Identification Number

C

Purpose of Disbursement
Ballot petitioning services

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

175.00

Transaction ID : B-157

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

893.00

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

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

Wilneida Ny-12 Committee

Full Name (Last, First, Middle Initial)

A. Franck, Madge, , ,

Mailing Address 483 East 93rd Street

City
New YorkState
NYZip Code
10128

Purpose of Disbursement

001

Candidate Name

Category/
Type

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
0	6		1	5		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

2117.50

Transaction ID : B-159

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Franck, Madge, , ,

Mailing Address 483 East 93rd Street

City
New YorkState
NYZip Code
10128

Purpose of Disbursement

001

Candidate Name

Category/
Type

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
0	6		2	6		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

2117.50

Transaction ID : B-160

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Frazier, Treyvon, , ,

Mailing Address 308 Bradford Street

City
BrooklynState
NYZip Code
11207Purpose of Disbursement
Ballot petitioning services

001

Candidate Name

Category/
Type

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
0	4		3	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1400.00

Transaction ID : B-148

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

5635.00

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

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

Wilneida Ny-12 Committee

Full Name (Last, First, Middle Initial)

A. Law Office of Aaron S. Foldenauer

Mailing Address 30 Wall Street

City
New YorkState
NYZip Code
10005Purpose of Disbursement
Ballot Legal Services

001

Candidate Name

Category/
Type

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
0	4		2	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : B-137

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Liedtka, Henry, , ,Mailing Address 575 Saint Marks Avenue
1FCity
BrooklynState
NYZip Code
11216Purpose of Disbursement
ballot petition services

001

Candidate Name

Category/
Type

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
0	4		2	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1312.50

Transaction ID : B-145

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Liedtka, Henry, , ,Mailing Address 575 Saint Marks Avenue
1FCity
BrooklynState
NYZip Code
11216Purpose of Disbursement
ballot petition services

001

Candidate Name

Category/
Type

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
0	5		0	6		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1925.00

Transaction ID : B-150

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

8237.50

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☒ 17	☐ 18	☐ 19a	☐ 19b
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NAME OF COMMITTEE (In Full)

Wilneida Ny-12 Committee

Full Name (Last, First, Middle Initial)

A. Liedtka, Henry, , ,Mailing Address 575 Saint Marks Avenue
1FCity
BrooklynState
NYZip Code
11216Purpose of Disbursement
ballot petition services

001

Candidate Name

Category/
Type

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
0	5		1	2		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1443.75

Transaction ID : B-154

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Martin, Fredrika, , ,

Mailing Address 540 Fulton Street

City
BrooklynState
NYZip Code
11201

Purpose of Disbursement

001

Candidate Name

Category/
Type

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
0	5		2	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

664.42

Transaction ID : B-158

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Martin, Fredrika, , ,

Mailing Address 540 Fulton Street

City
BrooklynState
NYZip Code
11201

Purpose of Disbursement

001

Candidate Name

Category/
Type

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
0	6		3	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

3010.00

Transaction ID : B-161

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

5118.17

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☒ 17	☐ 18	☐ 19a	☐ 19b
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NAME OF COMMITTEE (In Full)

Wilneida Ny-12 Committee

Full Name (Last, First, Middle Initial)

A. May, Abigail, , ,Mailing Address 74-12 35th Avenue
E104City
QueensState
NYZip Code
11372Purpose of Disbursement
Ballot petitioning services

001

Candidate Name

Category/
Type

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
0	4		2	3		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

699.75

Transaction ID : B-140

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. May, Abigail, , ,Mailing Address 74-12 35th Avenue
E104City
QueensState
NYZip Code
11372Purpose of Disbursement
Ballot petitioning services

001

Candidate Name

Category/
Type

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
0	4		2	7		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

699.75

Transaction ID : B-144

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. May, Abigail, , ,Mailing Address 74-12 35th Avenue
E104City
QueensState
NYZip Code
11372Purpose of Disbursement
Ballot petitioning services

001

Candidate Name

Category/
Type

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
0	4		2	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

15.25

Transaction ID : B-147

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

1414.75

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Wilneida Ny-12 Committee

Full Name (Last, First, Middle Initial)

A. May, Abigail, , ,Mailing Address 74-12 35th Avenue
E104City
QueensState
NYZip Code
11372Purpose of Disbursement
Ballot petitioning services

001

Candidate Name

Category/
Type

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
0	5		1	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1570.20

Transaction ID : B-153

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Silverman, Susan, , ,

Mailing Address 128 East 4th Street

City
BrooklynState
NYZip Code
11218Purpose of Disbursement
ballot services

001

Candidate Name

Category/
Type

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
0	5		1	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

400.00

Transaction ID : B-156

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Solis, Aliecha, , ,Mailing Address 65 Pike Street
20ACity
New YorkState
NYZip Code
10002Purpose of Disbursement
Ballot petition services

001

Candidate Name

Category/
Type

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
0	4		2	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

400.00

Transaction ID : B-142

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

2370.20

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Wilneida Ny-12 Committee

Full Name (Last, First, Middle Initial)

A. Zauberer, Jasmine, , ,

Mailing Address 30 Salvatore Drive

City
West ParkState
NYZip Code
12493

Purpose of Disbursement

006

Candidate Name

Category/
Type

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
0	4		0	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B-57

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Zimmerman, Paula, , ,Mailing Address 130 West 15th Street
7UCity
New YorkState
NYZip Code
10011Purpose of Disbursement
ballot services

001

Candidate Name

Category/
Type

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
0	4		2	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : B-143

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Zimmerman, Paula, , ,Mailing Address 130 West 15th Street
7UCity
New YorkState
NYZip Code
10011

Purpose of Disbursement

001

Candidate Name

Category/
Type

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
0	5		0	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : B-136

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

1100.00

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

37466.34

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 20 OF 29

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C-65

Wilneida Ny-12 Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Negron, Wilneida, , ,

Mailing Address

105 West 86th Street
PO Box #312

City

New York

State

NY

ZIP Code

10024

☒ Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
04 13 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

Upon demand

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

10000.00

TOTALS This Period (last page in this line only).....▶

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 21 OF 29

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C-67

Wilneida Ny-12 Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Negron, Wilneida, , ,

Mailing Address

105 West 86th Street
PO Box #312

City

New York

State

NY

ZIP Code

10024

☒ Personal Funds of the Candidate

Original Amount of Loan

1500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1500.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
04 / 24 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

Upon demand

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

1500.00

TOTALS This Period (last page in this line only).....▶

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 22 OF 29

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C-68

Wilneida Ny-12 Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Negron, Wilneida, , ,

Mailing Address

105 West 86th Street
PO Box #312

City

New York

State

NY

ZIP Code

10024

☒ Personal Funds of the Candidate

Original Amount of Loan

2500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2500.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
04 30 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

Upon demand

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

2500.00

TOTALS This Period (last page in this line only).....▶

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 23 OF 29

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C-129

Wilneida Ny-12 Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Negron, Wilneida, , ,

Mailing Address

105 West 86th Street
PO Box #312

City

New York

State

NY

ZIP Code

10024

☒ Personal Funds of the Candidate

Original Amount of Loan

2000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 04 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

Upon demand

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

2000.00

TOTALS This Period (last page in this line only).....▶

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 24 OF 29

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C-130

Wilneida Ny-12 Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Negron, Wilneida, , ,

Mailing Address

105 West 86th Street
PO Box #312

City

New York

State

NY

ZIP Code

10024

☒ Personal Funds of the Candidate

Original Amount of Loan

2000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 05 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

Upon demand

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

2000.00

TOTALS This Period (last page in this line only).....▶

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 25 OF 29

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C-131

Wilneida Ny-12 Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Negron, Wilneida, , ,

Mailing Address

105 West 86th Street
PO Box #312

City

New York

State

NY

ZIP Code

10024

☒ Personal Funds of the Candidate

Original Amount of Loan

3000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 08 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

Upon demand

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

3000.00

TOTALS This Period (last page in this line only).....▶

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 26 OF 29

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C-132

Wilneida Ny-12 Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Negron, Wilneida, , ,

Mailing Address

105 West 86th Street
PO Box #312

City

New York

State

NY

ZIP Code

10024

☒ Personal Funds of the Candidate

Original Amount of Loan

3000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 12 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

Upon demand

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

3000.00

TOTALS This Period (last page in this line only).....▶

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 27 OF 29

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C-133

Wilneida Ny-12 Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Negron, Wilneida, , ,

Mailing Address

105 West 86th Street
PO Box #312

City

New York

State

NY

ZIP Code

10024

☒ Personal Funds of the Candidate

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 / 22 / 2026

M M / D D / Y Y Y Y

Upon demand

0.00

% (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

5000.00

TOTALS This Period (last page in this line only).....▶

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 28 OF 29

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C-134

Wilneida Ny-12 Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Negron, Wilneida, , ,

Mailing Address

105 West 86th Street
PO Box #312

City

New York

State

NY

ZIP Code

10024

☒ Personal Funds of the Candidate

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
06 23 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

Upon demand

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

5000.00

TOTALS This Period (last page in this line only).....▶

34000.00

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

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 29 OF 29

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Wilneida Ny-12 Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Negron, Wilneida, , ,

Nature of Debt (Purpose):

Mailing Address 105 West 86th Street
PO Box #312City
New YorkState
NYZip Code
10024

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-58

Amount Incurred This Period

500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Negron, Wilneida, , ,

Nature of Debt (Purpose):

Mailing Address 105 West 86th Street
PO Box #312City
New YorkState
NYZip Code
10024

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-61

Amount Incurred This Period

200.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

200.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Negron, Wilneida, , ,

Nature of Debt (Purpose):
Ballot petitioning servicesMailing Address 105 West 86th Street
PO Box #312City
New YorkState
NYZip Code
10024

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-63

Amount Incurred This Period

600.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

600.00

1) **SUBTOTALS** This Period This Page (optional) ▶

1300.00

2) **TOTALS** This Period (last page this line number only) ▶

1300.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶

34000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

35300.00