

**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

Piccinini 4 Congress

ADDRESS (number and street)

P.O. Box 602

Check if different
than previously
reported. (ACC)

Oakley

CA

94561

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00845438

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

CA

10

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

through

M M /

D D /

Y Y Y Y

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

Piccinini, Katherine, , ,

Signature of Treasurer

Piccinini, Katherine, , ,

Date

M M /

D D /

Y Y Y Y

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

Piccinini 4 Congress

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		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))	7284.48	17262.48
(b) Total Contribution Refunds (from Line 20(d))	0.00	22.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	7284.48	17240.48
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	4980.66	15212.21
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	38.63
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	4980.66	15173.58
8. Cash on Hand at Close of Reporting Period (from Line 27)	6381.39	
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)	8549.75	

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

Piccinini 4 Congress

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2026

To:

MM / DD / YYYY
03 / 31 / 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).....

4960.00

10196.00

(ii) Unitemized

2324.48

7066.48

(iii) TOTAL of contributions
from individuals ▶

7284.48

17262.48

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

0.00

0.00

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

7284.48

17262.48

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(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

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

0.00

38.63

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)..... ▶

7284.48

17301.11

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.....	4980.66	15212.21
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	22.00
(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	22.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	4980.66	15234.21

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	4077.57
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	7284.48
25. SUBTOTAL (add Line 23 and Line 24).....	11362.05
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	4980.66
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	6381.39

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 48

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

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

NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

Full Name (Last, First, Middle Initial)

Barham, Tom, , ,

A.

Mailing Address 315 Strand Avenue

City

Pleasant Hill

State

CA

Zip Code

94523

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 30 2026

Transaction ID : SA11AI.5677

Amount of Each Receipt this Period

250.00

☐ Memo Item

Donation

Full Name (Last, First, Middle Initial)

Burroughs, Robert, , ,

B.

Mailing Address 650 La Vista Rd

City

Walnut Creek

State

CA

Zip Code

94598

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2592.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 17 2026

Transaction ID : SA11AI.5665

Amount of Each Receipt this Period

200.00

☐ Memo Item

Donation

Full Name (Last, First, Middle Initial)

Calderon, Judy, , ,

C.

Mailing Address 96 Elder CT #A

City

Pacheco

State

CA

Zip Code

94553

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 02 2026

Transaction ID : SA11AI.5643

Amount of Each Receipt this Period

300.00

☐ Memo Item

Donation

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

750.00

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

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

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

PAGE 6 OF 48

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

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NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

Full Name (Last, First, Middle Initial)

DOnofrio, Antonio, , ,

A.

Mailing Address 4024 Newport Lane

City

Discovery Bay

State

CA

Zip Code

94505

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 30 2026

Transaction ID : SA11AI.5691

Amount of Each Receipt this Period

250.00

☐ Memo Item
Donation

Full Name (Last, First, Middle Initial)

Grcar, Joseph, , ,

B.

Mailing Address 6059 Castlebrook Drive

City

Castro Valley

State

CA

Zip Code

94552

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 03 2026

Transaction ID : SA11AI.5630

Amount of Each Receipt this Period

30.00

☐ Memo Item
Donation

Full Name (Last, First, Middle Initial)

Grcar, Joseph, , ,

C.

Mailing Address 6059 Castlebrook Drive

City

Castro Valley

State

CA

Zip Code

94552

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 25 2026

Transaction ID : SA11AI.5661

Amount of Each Receipt this Period

50.00

☐ Memo Item
Donation

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

330.00

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

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

Use separate schedule(s)
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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)

Piccinini 4 Congress

Full Name (Last, First, Middle Initial)

Green, Julie, , ,

A.

Mailing Address 3371 St. Mary's Road

City

Lafayette

State

CA

Zip Code

94549

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1030.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 02 2026

Transaction ID : SA11AI.5641

Amount of Each Receipt this Period

1000.00



Memo Item

Donation

Full Name (Last, First, Middle Initial)

Hall, Beverly, , ,

B.

Mailing Address 5041 Laurel Drive

City

Concord

State

CA

Zip Code

94521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 25 2026

Transaction ID : SA11AI.5584

Amount of Each Receipt this Period

30.00



Memo Item

TEA DONATION

Full Name (Last, First, Middle Initial)

McClintick, Marianne, , ,

C.

Mailing Address 52 Diablo View Road

City

Pleasant Hill

State

CA

Zip Code

94523

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 04 2026

Transaction ID : SA11AI.5635

Amount of Each Receipt this Period

250.00



Memo Item

Donation

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

1280.00

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

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

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

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NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

Full Name (Last, First, Middle Initial)
Riley, Dennis, , ,

Mailing Address 4044 Cowell Road

City
ConcordState
CAZip Code
94518FEC ID number of contributing
federal political committee.

C

Name of Employer
unknownOccupation
unknown

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		25		2026

Transaction ID : SA11AI.5594

Amount of Each Receipt this Period

500.00

☐ Memo Item
 Donation
Full Name (Last, First, Middle Initial)
Salvato, Patti, , ,

Mailing Address 510 Freya Way

City
Pleasant HillState
CAZip Code
94523FEC ID number of contributing
federal political committee.

C

Name of Employer
DTAOccupation
Accountant

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		26		2026

Transaction ID : SA11AI.5542

Amount of Each Receipt this Period

50.00

☐ Memo Item
 Donation
Full Name (Last, First, Middle Initial)
Salvato, Patti, , ,

Mailing Address 510 Freya Way

City
Pleasant HillState
CAZip Code
94523FEC ID number of contributing
federal political committee.

C

Name of Employer
DTAOccupation
Accountant

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		25		2026

Transaction ID : SA11AI.5583

Amount of Each Receipt this Period

50.00

☐ Memo Item
 Donation

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

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

600.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

Full Name (Last, First, Middle Initial)

Salvato, Patti, , ,

A.

Mailing Address 510 Freya Way

City

Pleasant Hill

State

CA

Zip Code

94523

FEC ID number of contributing
federal political committee.

C

Name of Employer

DTA

Occupation

Accountant

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 19 2026

Transaction ID : SA11AI.5694

Amount of Each Receipt this Period

50.00

☐ Memo Item

Donation

Full Name (Last, First, Middle Initial)

Taylor, Pamela, , ,

B.

Mailing Address 303 Skyview Dive

City

Pleasant Hill

State

CA

Zip Code

94523

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

644.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 18 2026

Transaction ID : SA11AI.5574

Amount of Each Receipt this Period

50.00

☐ Memo Item

Donation

Full Name (Last, First, Middle Initial)

Todesco, Jay, , ,

C.

Mailing Address 3134 Esperanza Drive

City

Concord

State

CA

Zip Code

94519

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 08 2026

Transaction ID : SA11AI.5543

Amount of Each Receipt this Period

350.00

☐ Memo Item

Donation

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

450.00

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

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

Use separate schedule(s)
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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)

Piccinini 4 Congress

Full Name (Last, First, Middle Initial)

Todesco, Jay, , ,

A.

Mailing Address 3134 Esperanza Drive

City

Concord

State

CA

Zip Code

94519

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 19 2026

Transaction ID : SA11AI.5581

Amount of Each Receipt this Period

100.00

☐ Memo Item
Donation

Full Name (Last, First, Middle Initial)

Whitsett, James, , ,

B.

Mailing Address 598 Maureen Lane

City

Pleasant Hill

State

CA

Zip Code

94523

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 25 2026

Transaction ID : SA11AI.5586

Amount of Each Receipt this Period

250.00

☐ Memo Item
Donation

Full Name (Last, First, Middle Initial)

Wiedemann, Sandy, , ,

C.

Mailing Address 9307 Mediar Dr

City

San Ramon

State

CA

Zip Code

94582

FEC ID number of contributing
federal political committee.

C

Name of Employer

retired

Occupation

retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 25 2026

Transaction ID : SA11AI.5600

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Donation

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

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

1350.00

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

PAGE 11 OF 48

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

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NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

Full Name (Last, First, Middle Initial)

Wolf, Nancy, , ,

Mailing Address 1815 Dixon Lane

City

Concord

State

CA

Zip Code

94521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
01		08		2026

Transaction ID : SA11AI.5544

Amount of Each Receipt this Period

50.00

☐ Memo Item
 Donation

Full Name (Last, First, Middle Initial)

Wolf, Nancy, , ,

Mailing Address 1815 Dixon Lane

City

Concord

State

CA

Zip Code

94521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
01		08		2026

Transaction ID : SA11AI.5545

Amount of Each Receipt this Period

50.00

☐ Memo Item
 Donation

Full Name (Last, First, Middle Initial)

Wolf, Nancy, , ,

Mailing Address 1815 Dixon Lane

City

Concord

State

CA

Zip Code

94521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

425.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02		19		2026

Transaction ID : SA11AI.5582

Amount of Each Receipt this Period

50.00

☐ Memo Item
 Donation

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

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

150.00

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

Use separate schedule(s)
for each category of the
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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)

Piccinini 4 Congress

Full Name (Last, First, Middle Initial)

Wolf, Nancy, , ,

A.

Mailing Address 1815 Dixon Lane

City

Concord

State

CA

Zip Code

94521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 17 2026

Transaction ID : SA11AI.5663

Amount of Each Receipt this Period

50.00

☐ Memo Item
Donation

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)..... ▶

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

50.00

4960.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

Full Name (Last, First, Middle Initial)

A. Amazon

Mailing Address 410 Terry Avenue

City
N SeattleState
WAZip Code
98109Purpose of Disbursement
mailing labels ribbon scrolls

006

Candidate Name
Piccinini 4 CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

Date of Disbursement

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

FEC Identification Number

C C00845438

Amount of Each Disbursement this Period

102.18

Transaction ID : SB17.5621

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amazon

Mailing Address 410 Terry Avenue

City
N SeattleState
WAZip Code
98109Purpose of Disbursement
envelopes

006

Candidate Name
Piccinini 4 CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	9	/	2	0	2	6

FEC Identification Number

C C00845438

Amount of Each Disbursement this Period

126.12

Transaction ID : SB17.5699

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Amazon

Mailing Address 410 Terry Avenue

City
N SeattleState
WAZip Code
98109Purpose of Disbursement
envelopes and labels

006

Candidate Name
Piccinini 4 CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	9	/	2	0	2	6

FEC Identification Number

C C00845438

Amount of Each Disbursement this Period

146.76

Transaction ID : SB17.5700

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

375.06

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
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NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

Full Name (Last, First, Middle Initial)

A. Amazon

Mailing Address 410 Terry Avenue

City
N SeattleState
WAZip Code
98109Purpose of Disbursement
prime membership

001

Candidate Name
Piccinini 4 CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

Date of Disbursement

M M / D D / Y Y Y Y
03 / 09 / 2026

FEC Identification Number

C C00845438

Amount of Each Disbursement this Period

8.15

Transaction ID : SB17.5701

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amazon

Mailing Address 410 Terry Avenue

City
N SeattleState
WAZip Code
98109Purpose of Disbursement
Apron supplies event

007

Candidate Name
Piccinini 4 CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

Date of Disbursement

M M / D D / Y Y Y Y
03 / 30 / 2026

FEC Identification Number

C C00845438

Amount of Each Disbursement this Period

42.94

Transaction ID : SB17.5714

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Amazon

Mailing Address 410 Terry Avenue

City
N SeattleState
WAZip Code
98109Purpose of Disbursement
Aprons/ engraving sheets

007

Candidate Name
Piccinini 4 CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

Date of Disbursement

M M / D D / Y Y Y Y
03 / 30 / 2026

FEC Identification Number

C C00845438

Amount of Each Disbursement this Period

125.20

Transaction ID : SB17.5719

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

176.29

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)

Piccinini 4 Congress

Full Name (Last, First, Middle Initial)

A. Anedot

Mailing Address 1340 Poydras St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		28		2026

City
New OrleansState
LAZip Code
70112

FEC Identification Number

C C00845438Purpose of Disbursement
credit card fee February

001

Amount of Each Disbursement this Period

70.80

Transaction ID : SB17.5628

☐ Memo ItemCandidate Name
Piccinini 4 CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

Full Name (Last, First, Middle Initial)

B. Anedot

Mailing Address 1340 Poydras St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2026

City
New OrleansState
LAZip Code
70112

FEC Identification Number

C C00845438Purpose of Disbursement
credit card monthly fee

001

Amount of Each Disbursement this Period

31.98

Transaction ID : SB17.5720

☐ Memo ItemCandidate Name
Piccinini 4 CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

Full Name (Last, First, Middle Initial)

C. Antonio Russomanno U.S.G SIGNS

Mailing Address 29 Spruce Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		19		2026

City
BrentwoodState
CAZip Code
94513

FEC Identification Number

C C00845438Purpose of Disbursement
signage

006

Amount of Each Disbursement this Period

243.06

Transaction ID : SB17.5712

☐ Memo ItemCandidate Name
Piccinini 4 CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

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

345.84

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

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

Piccinini 4 Congress

Full Name (Last, First, Middle Initial)

A. Contra Costa Republican Party

Mailing Address 1615 Bonanza Ste 310

City
Walnut CreekState
CAZip Code
94596Purpose of Disbursement
Registration for Diinner K.Kiley

007

Candidate Name
Piccinini 4 CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2026

FEC Identification Number

C C00845438

Amount of Each Disbursement this Period

150.00

Transaction ID : SB17.5605

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Contra Costa Republican Party

Mailing Address 1615 Bonanza Ste 310

City
Walnut CreekState
CAZip Code
94596Purpose of Disbursement
dues central committee

001

Candidate Name
Piccinini 4 CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		18		2026

FEC Identification Number

C C00845438

Amount of Each Disbursement this Period

105.00

Transaction ID : SB17.5620

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Costco

Mailing Address 2201 Verne Roberts Circle

City
AntiochState
CAZip Code
94509Purpose of Disbursement
Campaign luunch

007

Candidate Name
Piccinini 4 CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2026

FEC Identification Number

C C00845438

Amount of Each Disbursement this Period

42.86

Transaction ID : SB17.5696

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

297.86

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

Full Name (Last, First, Middle Initial)

A. Go Daddy.com

Mailing Address 2155 E Go Daddy Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2026

City
TempeState
AZZip Code
85284

FEC Identification Number

C	C00845438
---	-----------

Purpose of Disbursement
email platform monthly

001

Amount of Each Disbursement this Period

2.50

Transaction ID : SB17.5550

☐ Memo ItemCandidate Name
Piccinini 4 CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 10

Full Name (Last, First, Middle Initial)

B. Go Daddy.com

Mailing Address 2155 E Go Daddy Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		06		2026

City
TempeState
AZZip Code
85284

FEC Identification Number

C	C00845438
---	-----------

Purpose of Disbursement
Monthly platform email exp

001

Amount of Each Disbursement this Period

2.50

Transaction ID : SB17.5606

☐ Memo ItemCandidate Name
Piccinini 4 CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 10

Full Name (Last, First, Middle Initial)

C. Go Daddy.com

Mailing Address 2155 E Go Daddy Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		06		2026

City
TempeState
AZZip Code
85284

FEC Identification Number

C	C00845438
---	-----------

Purpose of Disbursement
GO DAddy email platform

001

Amount of Each Disbursement this Period

2.50

Transaction ID : SB17.5697

☐ Memo ItemCandidate Name
Piccinini 4 CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 10

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

7.50

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

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SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

Full Name (Last, First, Middle Initial)

A. Go Daddy.com

Mailing Address 2155 E Go Daddy Way

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	2	6

City
TempeState
AZZip Code
85284

FEC Identification Number

C	C00845438
---	-----------

Purpose of Disbursement
database platform

001

Amount of Each Disbursement this Period

32.99

Candidate Name
Piccinini 4 CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

Transaction ID : SB17.5702

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Go Daddy.com

Mailing Address 2155 E Go Daddy Way

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	2	6

City
TempeState
AZZip Code
85284

FEC Identification Number

C	C00845438
---	-----------

Purpose of Disbursement
database platform emails

001

Amount of Each Disbursement this Period

89.99

Candidate Name
Piccinini 4 CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

Transaction ID : SB17.5718

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JBS Promotions

Mailing Address 194 Holiday Court

Date of Disbursement

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

City
MartinezState
CAZip Code
94553

FEC Identification Number

C	C00845438
---	-----------

Purpose of Disbursement
campaign hats

006

Amount of Each Disbursement this Period

429.50

Candidate Name
Piccinini 4 CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

Transaction ID : SB17.5623

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

552.48

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

SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

Full Name (Last, First, Middle Initial)

A. MailChimp

Mailing Address 675 Ponce de Leon Ave NE #5000

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	9		2	0	2	6

City
AtlantaState
GAZip Code
30308Purpose of Disbursement
monthly email platform

001

Candidate Name
Piccinini 4 CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

FEC Identification Number

C C00845438

Amount of Each Disbursement this Period

19.50

Transaction ID : SB17.5551

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MailChimp

Mailing Address 675 Ponce de Leon Ave NE #5000

Date of Disbursement

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

City
AtlantaState
GAZip Code
30308Purpose of Disbursement
Monthly data base platform

001

Candidate Name
Piccinini 4 CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

FEC Identification Number

C C00845438

Amount of Each Disbursement this Period

19.50

Transaction ID : SB17.5608

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MailChimp

Mailing Address 675 Ponce de Leon Ave NE #5000

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	9		2	0	2	6

City
AtlantaState
GAZip Code
30308Purpose of Disbursement
data base platform

001

Candidate Name
Piccinini 4 CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

FEC Identification Number

C C00845438

Amount of Each Disbursement this Period

6.50

Transaction ID : SB17.5613

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

45.50

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

Full Name (Last, First, Middle Initial)

A. Office Depot

Mailing Address 5885 Lone Tree Way

Date of Disbursement

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

City
AntiochState
CAZip Code
94531Purpose of Disbursement
printing petitions

006

FEC Identification Number

C C00845438

Amount of Each Disbursement this Period

15.80

Transaction ID : SB17.5549

☐ Memo ItemCandidate Name
Piccinini 4 CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 10

Full Name (Last, First, Middle Initial)

B. Office Depot

Mailing Address 5885 Lone Tree Way

Date of Disbursement

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

City
AntiochState
CAZip Code
94531Purpose of Disbursement
printing invitations

006

FEC Identification Number

C C00845438

Amount of Each Disbursement this Period

63.66

Transaction ID : SB17.5601

☐ Memo ItemCandidate Name
Piccinini 4 CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 10

Full Name (Last, First, Middle Initial)

C. Office Depot

Mailing Address 5885 Lone Tree Way

Date of Disbursement

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

City
AntiochState
CAZip Code
94531Purpose of Disbursement
Office supplies

001

FEC Identification Number

C C00845438

Amount of Each Disbursement this Period

117.43

Transaction ID : SB17.5604

☐ Memo ItemCandidate Name
Piccinini 4 CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 10

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

196.89

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

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

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NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

Full Name (Last, First, Middle Initial)

A. Office Depot

Mailing Address 5885 Lone Tree Way

City
AntiochState
CAZip Code
94531Purpose of Disbursement
printing invitation flyers

007

Candidate Name
Piccinini 4 CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

Date of Disbursement

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

FEC Identification Number

C C00845438

Amount of Each Disbursement this Period

65.96

Transaction ID : SB17.5607

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Office Depot

Mailing Address 5885 Lone Tree Way

City
AntiochState
CAZip Code
94531Purpose of Disbursement
affordable labels printing

006

Candidate Name
Piccinini 4 CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	9		2	0	2	6

FEC Identification Number

C C00845438

Amount of Each Disbursement this Period

11.56

Transaction ID : SB17.5612

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Office Depot

Mailing Address 5885 Lone Tree Way

City
AntiochState
CAZip Code
94531Purpose of Disbursement
printing labels

006

Candidate Name
Piccinini 4 CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	2	6

FEC Identification Number

C C00845438

Amount of Each Disbursement this Period

7.68

Transaction ID : SB17.5698

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

85.20

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:
(check only one)

PAGE 22 OF 48

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

Full Name (Last, First, Middle Initial)

A. Office Depot

Mailing Address 5885 Lone Tree Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		12		2026

City
AntiochState
CAZip Code
94531Purpose of Disbursement
Ivory papaer for scrolls

006

FEC Identification Number

C C00845438

Candidate Name
Piccinini 4 CongressCategory/
Type

Amount of Each Disbursement this Period

109.03

Transaction ID : SB17.5703

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 10

Full Name (Last, First, Middle Initial)

B. Office Depot

Mailing Address 5885 Lone Tree Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2026

City
AntiochState
CAZip Code
94531Purpose of Disbursement
Printing city labels

006

FEC Identification Number

C C00845438

Candidate Name
Piccinini 4 CongressCategory/
Type

Amount of Each Disbursement this Period

17.76

Transaction ID : SB17.5706

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 10

Full Name (Last, First, Middle Initial)

C. Office Depot

Mailing Address 5885 Lone Tree Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		17		2026

City
AntiochState
CAZip Code
94531Purpose of Disbursement
Printing scrolls

006

FEC Identification Number

C C00845438

Candidate Name
Piccinini 4 CongressCategory/
Type

Amount of Each Disbursement this Period

26.34

Transaction ID : SB17.5707

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 10

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

153.13

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 PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

Full Name (Last, First, Middle Initial)

A. Office Depot

Mailing Address 5885 Lone Tree Way

Date of Disbursement

M M	D D	Y Y Y Y
03	30	2026

City
AntiochState
CAZip Code
94531Purpose of Disbursement
printing letters & labels for cities in district

006

FEC Identification Number

C C00845438

Amount of Each Disbursement this Period

504.07

Transaction ID : SB17.5713

☐ Memo ItemCandidate Name
Piccinini 4 CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

Full Name (Last, First, Middle Initial)

B. Secretary of State

Mailing Address 1500 11th Street

Date of Disbursement

M M	D D	Y Y Y Y
03	17	2026

City
SacramentoState
CAZip Code
95814Purpose of Disbursement
candidate filing fee

001

FEC Identification Number

C C00845438

Amount of Each Disbursement this Period

1470.98

Transaction ID : SB17.5705

☐ Memo ItemCandidate Name
Piccinini 4 CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

Full Name (Last, First, Middle Initial)

C. WINCO

Mailing Address 6700 Lone Tree Way

Date of Disbursement

M M	D D	Y Y Y Y
01	02	2026

City
BrentwoodState
CAZip Code
94513Purpose of Disbursement
volunteer lunch

007

FEC Identification Number

C C00845438

Amount of Each Disbursement this Period

3.08

Transaction ID : SB17.5547

☐ Memo ItemCandidate Name
Piccinini 4 CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

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

1978.13

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)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

Full Name (Last, First, Middle Initial)

A. WINCO

Mailing Address 6700 Lone Tree Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		02		2026

City
BrentwoodState
CAZip Code
94513Purpose of Disbursement
volunteer lunch

007

FEC Identification Number

C C00845438

Candidate Name
Piccinini 4 CongressCategory/
Type

Amount of Each Disbursement this Period

18.28

Transaction ID : SB17.5548

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 10

Full Name (Last, First, Middle Initial)

B. WINCO

Mailing Address 6700 Lone Tree Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		27		2026

City
BrentwoodState
CAZip Code
94513Purpose of Disbursement
Volunteer beverage

007

FEC Identification Number

C C00845438

Candidate Name
Piccinini 4 CongressCategory/
Type

Amount of Each Disbursement this Period

5.58

Transaction ID : SB17.5555

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 10

Full Name (Last, First, Middle Initial)

C. WINCO

Mailing Address 6700 Lone Tree Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2026

City
BrentwoodState
CAZip Code
94513Purpose of Disbursement
Luncheon volunteers

007

FEC Identification Number

C C00845438

Candidate Name
Piccinini 4 CongressCategory/
Type

Amount of Each Disbursement this Period

2.94

Transaction ID : SB17.5602

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 10

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

26.80

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)

Piccinini 4 Congress

Full Name (Last, First, Middle Initial)

A. WINCO

Mailing Address 6700 Lone Tree Way

Date of Disbursement

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

City
BrentwoodState
CAZip Code
94513Purpose of Disbursement
volunteer luncheon

007

FEC Identification Number

C C00845438

Candidate Name
Piccinini 4 CongressCategory/
Type

Amount of Each Disbursement this Period

50.08

Transaction ID : SB17.5603

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 10

Full Name (Last, First, Middle Initial)

B. WINCO

Mailing Address 6700 Lone Tree Way

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	7		2	0	2	6

City
BrentwoodState
CAZip Code
94513Purpose of Disbursement
volunteer luncheon

007

FEC Identification Number

C C00845438

Candidate Name
Piccinini 4 CongressCategory/
Type

Amount of Each Disbursement this Period

44.68

Transaction ID : SB17.5609

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 10

Full Name (Last, First, Middle Initial)

C. WINCO

Mailing Address 6700 Lone Tree Way

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	9		2	0	2	6

City
BrentwoodState
CAZip Code
94513Purpose of Disbursement
campaign volunteer lunch

007

FEC Identification Number

C C00845438

Candidate Name
Piccinini 4 CongressCategory/
Type

Amount of Each Disbursement this Period

62.70

Transaction ID : SB17.5610

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 10

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

157.46

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)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

Full Name (Last, First, Middle Initial)

A. WINCO

Mailing Address 6700 Lone Tree Way

Date of Disbursement

M M	D D	Y Y Y Y
02	19	2026

City
BrentwoodState
CAZip Code
94513Purpose of Disbursement
campaign volunteer lunch

007

FEC Identification Number

C C00845438

Candidate Name
Piccinini 4 CongressCategory/
Type

Amount of Each Disbursement this Period

2.98

Transaction ID : SB17.5611

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 10

Full Name (Last, First, Middle Initial)

B. WINCO

Mailing Address 6700 Lone Tree Way

Date of Disbursement

M M	D D	Y Y Y Y
03	05	2026

City
BrentwoodState
CAZip Code
94513Purpose of Disbursement
campaign lunch

007

FEC Identification Number

C C00845438

Candidate Name
Piccinini 4 CongressCategory/
Type

Amount of Each Disbursement this Period

36.63

Transaction ID : SB17.5695

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 10

Full Name (Last, First, Middle Initial)

C. WINCO

Mailing Address 6700 Lone Tree Way

Date of Disbursement

M M	D D	Y Y Y Y
03	13	2026

City
BrentwoodState
CAZip Code
94513Purpose of Disbursement
campaign lunch

007

FEC Identification Number

C C00845438

Candidate Name
Piccinini 4 CongressCategory/
Type

Amount of Each Disbursement this Period

24.39

Transaction ID : SB17.5704

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 10

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

64.00

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 PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

Full Name (Last, First, Middle Initial)

A. WINCO

Mailing Address 6700 Lone Tree Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		19		2026

City
BrentwoodState
CAZip Code
94513Purpose of Disbursement
meeting lunch

007

Candidate Name
Piccinini 4 CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

FEC Identification Number

C C00845438

Amount of Each Disbursement this Period

45.38

Transaction ID : SB17.5708

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINCO

Mailing Address 6700 Lone Tree Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		27		2026

City
BrentwoodState
CAZip Code
94513Purpose of Disbursement
Meeting lunch

007

Candidate Name
Piccinini 4 CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

FEC Identification Number

C C00845438

Amount of Each Disbursement this Period

57.93

Transaction ID : SB17.5709

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

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

103.31

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

4565.45

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

PAGE 28 OF 48

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4270

Piccinini 4 Congress

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

Piccinini, Katherine, , ,

Mailing Address

P.O.Box 602

City

Oakley

State

CA

ZIP Code

94561

☒ Personal Funds of the Candidate

Original Amount of Loan

310.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

310.00

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
07 01 / 2023M M / D D / Y Y Y Y
noneY Y Y Y
none

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).....▶

310.00

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 29 OF 48

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4385

Piccinini 4 Congress

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

Piccinini, Katherine, , ,

Mailing Address

P.O.Box 602

City

Oakley

State

CA

ZIP Code

94561

☒ Personal Funds of the Candidate

Original Amount of Loan

502.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

502.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
01 02 / 2024

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

none

% (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).....▶

502.00

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.

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SC/10

Transaction ID : SC/10.4385

Interest rate is zero

Form/Schedule:

Transaction ID:

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

PAGE 31 OF 48

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4386

Piccinini 4 Congress

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

Election: 2024

Piccinini, Katherine, , ,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

P.O.Box 602

City

Oakley

State

CA

ZIP Code

94561

☒ Personal Funds of the Candidate

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
01 23 / 2024

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

none

% (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).....▶

1000.00

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.

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SC/10

Transaction ID : SC/10.4386

Interest rate is zero

Form/Schedule:

Transaction ID:

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

PAGE 33 OF 48

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4957

Piccinini 4 Congress

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

Piccinini, Katherine, , ,

Election: 2024

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

P.O.Box 602

City

Oakley

State

CA

ZIP Code

94561

☒ Personal Funds of the Candidate

Original Amount of Loan

500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

500.00

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 09 / 2024

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

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).....▶

500.00

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

2312.00

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 34 OF 48

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

NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

Mileage Feb 15 to Mar 31 2024

Mailing Address P.O.Box 602

City

Oakley

State

CA

Zip Code

94561

Outstanding Balance Beginning This Period

260.65

Transaction ID : SD10.4480

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

260.65

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

APRIL TRAVEL EXPENSE

Mailing Address P.O.Box 602

City

Oakley

State

CA

Zip Code

94561

Outstanding Balance Beginning This Period

139.50

Transaction ID : SD10.4510

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

139.50

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

May Travel expense

Mailing Address P.O.Box 602

City

Oakley

State

CA

Zip Code

94561

Outstanding Balance Beginning This Period

262.24

Transaction ID : SD10.4576

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

262.24

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

662.39

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

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

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

NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

Conference GOP Meals

Mailing Address P.O.Box 602

City

Oakley

State

CA

Zip Code

94561

Outstanding Balance Beginning This Period

147.47

Transaction ID : SD10.4577

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

147.47

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

May conf parking / postage

Mailing Address P.O.Box 602

City

Oakley

State

CA

Zip Code

94561

Outstanding Balance Beginning This Period

195.00

Transaction ID : SD10.4578

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

195.00

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

June Travel Expense

Mailing Address P.O.Box 602

City

Oakley

State

CA

Zip Code

94561

Outstanding Balance Beginning This Period

259.86

Transaction ID : SD10.4649

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

259.86

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

602.33

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

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(check only one)

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☒ 10

NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

July 2024 Travel Expense mileage

Mailing Address P.O.Box 602

City
Oakley

State
CA

Zip Code
94561

Outstanding Balance Beginning This Period

373.10

Transaction ID : SD10.4780

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

373.10

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

Travel Mileage Expense AUGUST 2024

Mailing Address P.O.Box 602

City
Oakley

State
CA

Zip Code
94561

Outstanding Balance Beginning This Period

364.28

Transaction ID : SD10.4890

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

364.28

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

Travel expense September

Mailing Address P.O.Box 602

City
Oakley

State
CA

Zip Code
94561

Outstanding Balance Beginning This Period

302.56

Transaction ID : SD10.4986

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

302.56

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

1039.94

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

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

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

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(check only one)

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☒ 10

NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

Travel mileage

Mailing Address P.O.Box 602

City

Oakley

State

CA

Zip Code

94561

Outstanding Balance Beginning This Period

319.57

Transaction ID : SD10.5048

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

319.57

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

meal at Overpass rally parade

Mailing Address P.O.Box 602

City

Oakley

State

CA

Zip Code

94561

Outstanding Balance Beginning This Period

38.17

Transaction ID : SD10.5123

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

38.17

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

Mileage Oct 17-31 2024

Mailing Address P.O.Box 602

City

Oakley

State

CA

Zip Code

94561

Outstanding Balance Beginning This Period

313.14

Transaction ID : SD10.5124

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

313.14

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

670.88

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

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

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

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(check only one)

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☒ 10

NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

TRAVEL MILEAGE NOV 1 - 25TH

Mailing Address P.O.Box 602

City
Oakley

State
CA

Zip Code
94561

Outstanding Balance Beginning This Period

178.90

Transaction ID : SD10.5153

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

178.90

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

DECEMBER MILEAGE

Mailing Address P.O.Box 602

City
Oakley

State
CA

Zip Code
94561

Outstanding Balance Beginning This Period

54.00

Transaction ID : SD10.5171

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

54.00

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

MILEAGE JANAURY 2025

Mailing Address P.O.Box 602

City
Oakley

State
CA

Zip Code
94561

Outstanding Balance Beginning This Period

27.00

Transaction ID : SD10.5203

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

27.00

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

259.90

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

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

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

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(check only one)

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☒ 10

NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

FEE FOR X POSTINGS

Mailing Address P.O.Box 602

City
Oakley

State
CA

Zip Code
94561

Outstanding Balance Beginning This Period

22.00

Transaction ID : SD10.5204

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

22.00

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

Mileage February 2025

Mailing Address P.O.Box 602

City
Oakley

State
CA

Zip Code
94561

Outstanding Balance Beginning This Period

18.00

Transaction ID : SD10.5210

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

18.00

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

Monthly X posting

Mailing Address P.O.Box 602

City
Oakley

State
CA

Zip Code
94561

Outstanding Balance Beginning This Period

11.00

Transaction ID : SD10.5211

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11.00

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

51.00

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

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

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

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(check only one)

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☒ 10

NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

mileage March 2025

Mailing Address P.O.Box 602

City

Oakley

State

CA

Zip Code

94561

Outstanding Balance Beginning This Period

133.80

Transaction ID : SD10.5219

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

133.80

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

meals at convention CAGOP

Mailing Address P.O.Box 602

City

Oakley

State

CA

Zip Code

94561

Outstanding Balance Beginning This Period

197.75

Transaction ID : SD10.5220

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

197.75

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

monthly X platform

Mailing Address P.O.Box 602

City

Oakley

State

CA

Zip Code

94561

Outstanding Balance Beginning This Period

11.00

Transaction ID : SD10.5221

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11.00

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

342.55

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

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

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

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

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(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

Mileage Expense April 2025

Mailing Address P.O.Box 602

City

Oakley

State

CA

Zip Code

94561

Outstanding Balance Beginning This Period

37.00

Transaction ID : SD10.5261

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

37.00

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

monthly platform X

Mailing Address P.O.Box 602

City

Oakley

State

CA

Zip Code

94561

Outstanding Balance Beginning This Period

11.00

Transaction ID : SD10.5262

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11.00

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

Monthly platform for X

Mailing Address P.O.Box 602

City

Oakley

State

CA

Zip Code

94561

Outstanding Balance Beginning This Period

11.00

Transaction ID : SD10.5263

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11.00

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

59.00

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)

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☒ 10

NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

Mileage expense May 2025

Mailing Address P.O.Box 602

City
Oakley

State
CA

Zip Code
94561

Outstanding Balance Beginning This Period

215.27

Transaction ID : SD10.5264

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

215.27

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

Mileage Expense June 2025

Mailing Address P.O.Box 602

City
Oakley

State
CA

Zip Code
94561

Outstanding Balance Beginning This Period

119.58

Transaction ID : SD10.5265

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

119.58

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

Monthly platform for X

Mailing Address P.O.Box 602

City
Oakley

State
CA

Zip Code
94561

Outstanding Balance Beginning This Period

11.00

Transaction ID : SD10.5266

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11.00

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

345.85

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

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

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

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

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(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

Mileage for August

Mailing Address P.O.Box 602

City

Oakley

State

CA

Zip Code

94561

Outstanding Balance Beginning This Period

69.04

Transaction ID : SD10.5346

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

69.04

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

MONTHLY FEE FOR X PLATFORM

Mailing Address P.O.Box 602

City

Oakley

State

CA

Zip Code

94561

Outstanding Balance Beginning This Period

11.00

Transaction ID : SD10.5405

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11.00

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

Mileage travel September

Mailing Address P.O.Box 602

City

Oakley

State

CA

Zip Code

94561

Outstanding Balance Beginning This Period

176.10

Transaction ID : SD10.5406

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

176.10

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

256.14

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

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☒ 10

NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

Monthly X Platform

Mailing Address P.O.Box 602

City
Oakley

State
CA

Zip Code
94561

Outstanding Balance Beginning This Period

11.00

Transaction ID : SD10.5528

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11.00

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

Mileage October

Mailing Address P.O.Box 602

City
Oakley

State
CA

Zip Code
94561

Outstanding Balance Beginning This Period

352.50

Transaction ID : SD10.5529

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

352.50

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

reimburse postage

Mailing Address P.O.Box 602

City
Oakley

State
CA

Zip Code
94561

Outstanding Balance Beginning This Period

148.17

Transaction ID : SD10.5531

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

148.17

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

511.67

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

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

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

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☒ 10

NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

monthly X platform

Mailing Address P.O.Box 602

City
Oakley

State
CA

Zip Code
94561

Outstanding Balance Beginning This Period

11.00

Transaction ID : SD10.5532

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11.00

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

Mileage November

Mailing Address P.O.Box 602

City
Oakley

State
CA

Zip Code
94561

Outstanding Balance Beginning This Period

131.20

Transaction ID : SD10.5533

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

131.20

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

Monthly X Platform

Mailing Address P.O.Box 602

City
Oakley

State
CA

Zip Code
94561

Outstanding Balance Beginning This Period

11.00

Transaction ID : SD10.5534

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11.00

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

153.20

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

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

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

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☒ 10

NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

December mileage

Mailing Address P.O.Box 602

City
Oakley

State
CA

Zip Code
94561

Outstanding Balance Beginning This Period

177.66

Transaction ID : SD10.5535

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

177.66

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

Mileage Expense Januaary 2026

Mailing Address P.O.Box 602

City
Oakley

State
CA

Zip Code
94561

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5721

Amount Incurred This Period

464.64

Payment This Period

0.00

Outstanding Balance at Close of This Period

464.64

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

Monthly X postings

Mailing Address P.O.Box 602

City
Oakley

State
CA

Zip Code
94561

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5724

Amount Incurred This Period

11.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11.00

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

653.30

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

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

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

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(check only one)

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☒ 10

NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

Mileage expense February 2026

Mailing Address P.O.Box 602

City
Oakley

State
CA

Zip Code
94561

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5725

Amount Incurred This Period

319.30

Payment This Period

0.00

Outstanding Balance at Close of This Period

319.30

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

Mileage expense March 2026

Mailing Address P.O.Box 602

City
Oakley

State
CA

Zip Code
94561

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5727

Amount Incurred This Period

288.30

Payment This Period

0.00

Outstanding Balance at Close of This Period

288.30

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

Piccinini, Katherine, , ,

Nature of Debt (Purpose):

March monthly X posting

Mailing Address P.O.Box 602

City
Oakley

State
CA

Zip Code
94561

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5728

Amount Incurred This Period

11.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11.00

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

618.60

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

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

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

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

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

NAME OF COMMITTEE (In Full)

Piccinini 4 Congress

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

Piccinini 4 Congress

Nature of Debt (Purpose):

Monthly X posting

Mailing Address P.O. Box 602

City
OakleyState
CAZip Code
94561

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5722

Amount Incurred This Period

11.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11.00

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

11.00

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

6237.75

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

2312.00

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

8549.75