

**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

Dr. Cuellar for Congress

ADDRESS (number and street)

PO Box 535

Check if different
than previously
reported. (ACC)

Alamo

TX

78516

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00912295

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

TX

15

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 /

02

D D /

12

Y Y Y Y

2026

through

M M /

03

D D /

31

Y Y Y Y

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

Petterson, Jay, , ,

Signature of Treasurer

Petterson, Jay, , ,

Date

M M /

04

D D /

15

Y Y Y Y

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

Dr. Cuellar for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	2		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))	6402.00	162738.51
(b) Total Contribution Refunds (from Line 20(d))	65.00	341.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	6337.00	162397.51
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	315802.76	1258959.94
(b) Total Offsets to Operating Expenditures (from Line 14)	17.22	248.25
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	315785.54	1258711.69
8. Cash on Hand at Close of Reporting Period (from Line 27)	85.82	
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)	1096400.00	

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

Dr. Cuellar for Congress

Report Covering the Period:

From:

MM / DD / YYYY
02 / 12 / 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).....

1735.00

57654.00

(ii) Unitemized

4667.00

94984.51

(iii) TOTAL of contributions
from individuals ▶

6402.00

152638.51

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

10000.00

(d) The Candidate

0.00

100.00

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

6402.00

162738.51

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

272400.00

1096400.00

(b) All Other Loans.....

0.00

0.00

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

272400.00

1096400.00

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

17.22

248.25

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)..... ▶

278819.22

1259386.76

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.....	315802.76	1258959.94
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	65.00	341.00
(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)).....	65.00	341.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	315867.76	1259300.94

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	37134.36
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	278819.22
25. SUBTOTAL (add Line 23 and Line 24).....	315953.58
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	315867.76
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	85.82

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 59

☒ 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)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

Berry, Tom, , ,

A.

Mailing Address 3509 Larkin Ln

City

Rowlett

State

TX

Zip Code

75089-2850

FEC ID number of contributing
federal political committee.

C

Name of Employer

Berry Family Services

Occupation

CFO

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 16 2026

Transaction ID : 7287637

Amount of Each Receipt this Period

250.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

ACTBLUE

B.

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6177.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 22 2026

Transaction ID : 7287637E

Amount of Each Receipt this Period

250.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

Boddy, Jean, , ,

C.

Mailing Address 241 E 3Rd St

City

Rifle

State

CO

Zip Code

81650-2319

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

390.00

Date of Receipt

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

Transaction ID : 7287711

Amount of Each Receipt this Period

50.00

☐ Memo Item

* Earmarked Contribution: See Below

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

300.00

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
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NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6177.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 22 2026

Transaction ID : 7287711E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

B.

Full Name (Last, First, Middle Initial)

Carney, Tim, , ,

Mailing Address 3412 Spring Ln

City

Bryan

State

TX

Zip Code

77802-3131

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Not Employed

Not Employed

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 14 2026

Transaction ID : 7105957

Amount of Each Receipt this Period

25.00

☐ Memo Item

* Earmarked Contribution: See Below

C.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6177.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 15 2026

Transaction ID : 7105957E

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

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:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

Carney, Tim, , ,

A.

Mailing Address 3412 Spring Ln

City
Bryan

State
TX

Zip Code
77802-3131

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not Employed

Occupation
Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

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

Transaction ID : 7287712

Amount of Each Receipt this Period

15.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

ACTBLUE

B.

Mailing Address PO Box 441146

City
West Somerville

State
MA

Zip Code
02144-0031

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation
Conduit total listed in Agg. field

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6177.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 22 2026

Transaction ID : 7287712E

Amount of Each Receipt this Period

15.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

Carney, Tim, , ,

C.

Mailing Address 3412 Spring Ln

City
Bryan

State
TX

Zip Code
77802-3131

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not Employed

Occupation
Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

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

Transaction ID : 7394307

Amount of Each Receipt this Period

15.00

☐ Memo Item

* Earmarked Contribution: See Below

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

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

30.00

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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NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

6177.00

Date of Receipt

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

Transaction ID : 7394307E

Amount of Each Receipt this Period

15.00



Memo Item

Note: Above Contribution earmarked through this organization.

B.

Full Name (Last, First, Middle Initial)

Casso, Chris, , ,

Mailing Address 10710 N 25Th Ln

City

McAllen

State

TX

Zip Code

78504-6329

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

STHS

Physician

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

850.00

Date of Receipt

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

Transaction ID : 7394270

Amount of Each Receipt this Period

100.00



Memo Item

* Earmarked Contribution: See Below

C.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

6177.00

Date of Receipt

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

Transaction ID : 7394270E

Amount of Each Receipt this Period

100.00



Memo Item

Note: Above Contribution earmarked through this organization.

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

100.00

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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NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

De Alba, Diana, , ,

A.

Mailing Address 3705 S J St

City

McAllen

State

TX

Zip Code

78503-1689

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 21 / 2026

Transaction ID : 7287747

Amount of Each Receipt this Period

15.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

ACTBLUE

B.

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6177.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 22 / 2026

Transaction ID : 7287747E

Amount of Each Receipt this Period

15.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

Holley, Maryellen, , ,

C.

Mailing Address 19 Tolan Way

City

Lafayette

State

CA

Zip Code

94549-2723

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 17 / 2026

Transaction ID : 7287652

Amount of Each Receipt this Period

50.00

☐ Memo Item

* Earmarked Contribution: See Below

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

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

65.00

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)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

6177.00

Date of Receipt

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

Transaction ID : 7287652E

Amount of Each Receipt this Period

50.00



Memo Item

Note: Above Contribution earmarked through this organization.

B.

Full Name (Last, First, Middle Initial)

Hoyer, David, , ,

Mailing Address 106 Oak Place Dr

Unit A

City

Houston

State

TX

Zip Code

77006-1788

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self Employed

Physician

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	2	

Transaction ID : 7105962

Amount of Each Receipt this Period

250.00



Memo Item

* Earmarked Contribution: See Below

C.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

6177.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	2	

Transaction ID : 7105962E

Amount of Each Receipt this Period

250.00



Memo Item

Note: Above Contribution earmarked through this organization.

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

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

250.00

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)

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

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NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

Miller, Inger, , ,

A.

Mailing Address 1217 Somerset Blvd

City

Colleyville

State

TX

Zip Code

76034-4279

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1600.00

Date of Receipt

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

Transaction ID : 7394312

Amount of Each Receipt this Period

100.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

ACTBLUE

B.

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6177.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 01 / 2026

Transaction ID : 7394312E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

Pelli, Denis, , ,

C.

Mailing Address 840 Broadway
Apt 7

City

New York

State

NY

Zip Code

10003-4823

FEC ID number of contributing
federal political committee.

C

Name of Employer

NYU

Occupation

Professor

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2026

Transaction ID : 7394263

Amount of Each Receipt this Period

250.00

☐ Memo Item

* Earmarked Contribution: See Below

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

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

350.00

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 12 OF 59

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

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NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6177.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 01 2026

Transaction ID : 7394263E

Amount of Each Receipt this Period

250.00



Memo Item

Note: Above Contribution earmarked through this organization.

B.

Full Name (Last, First, Middle Initial)

Peters, Beverly, , ,

Mailing Address 561 Briarcliff Dr

City

Garland

State

TX

Zip Code

75043-5663

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Not Employed

Not Employed

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
02 28 2026

Transaction ID : 7394279

Amount of Each Receipt this Period

50.00



Memo Item

* Earmarked Contribution: See Below

C.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6177.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 01 2026

Transaction ID : 7394279E

Amount of Each Receipt this Period

50.00



Memo Item

Note: Above Contribution earmarked through this organization.

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

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

50.00

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)

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

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NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

Ramos, Jamie, , ,

A.

Mailing Address 29908 Strong Rd

City

San Benito

State

TX

Zip Code

78586-7306

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fry's Pharmacy

Occupation

Pharmacist

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
02 / 28 / 2026

Transaction ID : 7394284

Amount of Each Receipt this Period

50.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

ACTBLUE

B.

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6177.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 01 / 2026

Transaction ID : 7394284E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

Sorenson, Julie, , ,

C.

Mailing Address 27131 Ashley Ct

City

Harlingen

State

TX

Zip Code

78552-1776

FEC ID number of contributing
federal political committee.

C

Name of Employer

Veterans Administration

Occupation

Physician

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
02 / 19 / 2026

Transaction ID : 7287690

Amount of Each Receipt this Period

500.00

☐ Memo Item

* Earmarked Contribution: See Below

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

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

550.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6177.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 22 2026

Transaction ID : 7287690E

Amount of Each Receipt this Period

500.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

B.

Full Name (Last, First, Middle Initial)

Whitescarver, Crystal, , ,

Mailing Address 17001 Madres De Avila

City

Tampa

State

FL

Zip Code

33613-5234

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Not Employed

Not Employed

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
02 19 2026

Transaction ID : 7287718

Amount of Each Receipt this Period

15.00

☐ Memo Item

* Earmarked Contribution: See Below

C.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6177.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 22 2026

Transaction ID : 7287718E

Amount of Each Receipt this Period

15.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

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

15.00

1735.00

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)

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

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NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

Cuellar, Ada, , ,

A.

Mailing Address 5409 Remington Dr

City
Harlingen

State
TX

Zip Code
78552-4304

FEC ID number of contributing
federal political committee.

C H6TX15238

Name of Employer
Self Employed

Occupation
Physician

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1098562.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 12 / 2026

Transaction ID : 7055043

Amount of Each Receipt this Period

54000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Cuellar, Ada, , ,

B.

Mailing Address 5409 Remington Dr

City
Harlingen

State
TX

Zip Code
78552-4304

FEC ID number of contributing
federal political committee.

C H6TX15238

Name of Employer
Self Employed

Occupation
Physician

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1098562.50

Date of Receipt

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

Transaction ID : 7150299

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Cuellar, Ada, , ,

C.

Mailing Address 5409 Remington Dr

City
Harlingen

State
TX

Zip Code
78552-4304

FEC ID number of contributing
federal political committee.

C H6TX15238

Name of Employer
Self Employed

Occupation
Physician

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1098562.50

Date of Receipt

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

Transaction ID : 7161655

Amount of Each Receipt this Period

100000.00

☐ Memo Item

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

179000.00

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 16 OF 59

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

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NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

Cuellar, Ada, , ,

A.

Mailing Address 5409 Remington Dr

City
Harlingen

State
TX

Zip Code
78552-4304

FEC ID number of contributing
federal political committee.

C H6TX15238

Name of Employer
Self Employed

Occupation
Physician

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1098562.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 20 / 2026

Transaction ID : 7181419

Amount of Each Receipt this Period

50000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Cuellar, Ada, , ,

B.

Mailing Address 5409 Remington Dr

City
Harlingen

State
TX

Zip Code
78552-4304

FEC ID number of contributing
federal political committee.

C H6TX15238

Name of Employer
Self Employed

Occupation
Physician

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1098562.50

Date of Receipt

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

Transaction ID : 8087445

Amount of Each Receipt this Period

18000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Cuellar, Ada, , ,

C.

Mailing Address 5409 Remington Dr

City
Harlingen

State
TX

Zip Code
78552-4304

FEC ID number of contributing
federal political committee.

C H6TX15238

Name of Employer
Self Employed

Occupation
Physician

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1098562.50

Date of Receipt

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

Transaction ID : 8087447

Amount of Each Receipt this Period

22000.00

☐ Memo Item

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

90000.00

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)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

Cuellar, Ada, , ,

A.

Mailing Address 5409 Remington Dr

City
Harlingen

State
TX

Zip Code
78552-4304

FEC ID number of contributing
federal political committee.

C H6TX15238

Name of Employer
Self Employed

Occupation
Physician

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1098562.50

Date of Receipt

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

Transaction ID : 8087457

Amount of Each Receipt this Period

3200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Cuellar, Ada, , ,

B.

Mailing Address 5409 Remington Dr

City
Harlingen

State
TX

Zip Code
78552-4304

FEC ID number of contributing
federal political committee.

C H6TX15238

Name of Employer
Self Employed

Occupation
Physician

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1098562.50

Date of Receipt

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

Transaction ID : 8087458

Amount of Each Receipt this Period

200.00

☐ 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)..... ►

3400.00

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

272400.00

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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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

A. Actblue Technical Services

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031Purpose of Disbursement
Credit Card Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

15.37

Transaction ID : 500110325

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Actblue Technical Services

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031Purpose of Disbursement
Credit Card Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

157.58

Transaction ID : 500110326

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Actblue Technical Services

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031Purpose of Disbursement
Credit Card Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

65.80

Transaction ID : 500110327

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

238.75

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

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

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NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

A. Actblue Technical Services

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031Purpose of Disbursement
Credit Card Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3.49

Transaction ID : 500110328

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amalgamated Bank

Mailing Address 1825 K St NW

City
WashingtonState
DCZip Code
20006-1202Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

212.25

Transaction ID : 500110329

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Amalgamated Bank

Mailing Address 1825 K St NW

City
WashingtonState
DCZip Code
20006-1202Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

332.25

Transaction ID : 500110330

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

547.99

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)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

A. Amani Hophop LLC

Mailing Address 1717 Hickory Ct

City
HarlingenState
TXZip Code
78550-4423Purpose of Disbursement
Media Production

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500110331

☐ Memo Item**B. Ambassador Public Affairs**Mailing Address 1634 I St NW
Ste 1050City
WashingtonState
DCZip Code
20006-4126Purpose of Disbursement
Communication Consulting

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

6500.00

Transaction ID : 500110332

☐ Memo Item**C. Blue Wave Political Partners**Mailing Address 122 C St NW
Ste 360City
WashingtonState
DCZip Code
20001-2149Purpose of Disbursement
Compliance Consulting

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2584.91

Transaction ID : 500110333

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

11084.91

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)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

A. Buying Time

Mailing Address PO Box 318

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		12		2026

City
CrownsvilleState
MDZip Code
21032-0318Purpose of Disbursement
Television Advertising

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

70907.00

Transaction ID : 500079514

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Buying Time

Mailing Address PO Box 318

Date of Disbursement

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

City
CrownsvilleState
MDZip Code
21032-0318Purpose of Disbursement
Television Advertising

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

72362.00

Transaction ID : 500110338

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Buying Time

Mailing Address PO Box 318

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		20		2026

City
CrownsvilleState
MDZip Code
21032-0318Purpose of Disbursement
Radio Advertising

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

6673.60

Transaction ID : 500110339

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

149942.60

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)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

A. Campaign Services LLCMailing Address 6814 E Riverside Dr
Unit 42City
AustinState
TXZip Code
78741-6670Purpose of Disbursement
Field Consulting

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
02	18	2026

FEC Identification Number

C

Amount of Each Disbursement this Period

600.00

Transaction ID : 500110340

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Campaign Services LLCMailing Address 6814 E Riverside Dr
Unit 42City
AustinState
TXZip Code
78741-6670Purpose of Disbursement
Canvassing Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
02	18	2026

FEC Identification Number

C

Amount of Each Disbursement this Period

5557.93

Transaction ID : 500110341

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Campaign Services LLCMailing Address 6814 E Riverside Dr
Unit 42City
AustinState
TXZip Code
78741-6670Purpose of Disbursement
Field Consulting

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
03	08	2026

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : 500110342

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

6657.93

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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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

A. Campaign Services LLCMailing Address 6814 E Riverside Dr
Unit 42City
AustinState
TXZip Code
78741-6670Purpose of Disbursement
Canvassing Services

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

5336.75

Transaction ID : 500110343

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Cavazos, Jared, , ,Mailing Address 882 Park Pl
Apt 2City
BrooklynState
NYZip Code
11216-4090Purpose of Disbursement
Communication Consulting

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : 500110262

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Cavazos, Jared, , ,Mailing Address 882 Park Pl
Apt 2City
BrooklynState
NYZip Code
11216-4090Purpose of Disbursement
Communication Consulting

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

400.00

Transaction ID : 500110263

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

8736.75

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

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

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NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

A. Cobarrubias, Vanessa, , ,

Mailing Address 1200 Industrial Way

City
HarlingenState
TXZip Code
78550-1787Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

13000.00

Transaction ID : 500110278

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. H-E-B

Mailing Address 646 S Flores St

City
San AntonioState
TXZip Code
78204-1219Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

308.95

Transaction ID : 500110365

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. H-E-B

Mailing Address 646 S Flores St

City
San AntonioState
TXZip Code
78204-1219Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

559.50

Transaction ID : 500110366

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

13868.45

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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NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

A. H-E-B

Mailing Address 646 S Flores St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		20		2026

City
San AntonioState
TXZip Code
78204-1219

FEC Identification Number

C

Purpose of Disbursement
Office Supplies

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

175.00

Transaction ID : 500110367

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. H-E-B

Mailing Address 646 S Flores St

Date of Disbursement

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

City
San AntonioState
TXZip Code
78204-1219

FEC Identification Number

C

Purpose of Disbursement
Office Supplies

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

132.91

Transaction ID : 500110368

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. InFocus Campaigns LLCMailing Address 4 NE 10Th St
260

Date of Disbursement

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

City
Oklahoma CityState
OKZip Code
73104-1402

FEC Identification Number

C

Purpose of Disbursement
GOTV Canvassing

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2404.50

Transaction ID : 500110369

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

2712.41

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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NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

A. JRLC Investments

Mailing Address 105 E Mile 12 1/2 N

Date of Disbursement

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

City
WeslacoState
TXZip Code
78599-2551

FEC Identification Number

C

Purpose of Disbursement
Site Rental

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

800.00

Transaction ID : 500110370

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Meta Platforms, Inc

Mailing Address 1 Hacker Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2026

City
Menlo ParkState
CAZip Code
94025-1456

FEC Identification Number

C

Purpose of Disbursement
Digital Advertising

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

337.00

Transaction ID : 500110348

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Meta Platforms, Inc

Mailing Address 1 Hacker Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		17		2026

City
Menlo ParkState
CAZip Code
94025-1456

FEC Identification Number

C

Purpose of Disbursement
Digital Advertising

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

337.00

Transaction ID : 500110349

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

1474.00

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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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

A. Meta Platforms, Inc

Mailing Address 1 Hacker Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		17		2026

City
Menlo ParkState
CAZip Code
94025-1456

FEC Identification Number

C

Purpose of Disbursement
Digital Advertising

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

337.00

Transaction ID : 500110350

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Meta Platforms, Inc

Mailing Address 1 Hacker Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		17		2026

City
Menlo ParkState
CAZip Code
94025-1456

FEC Identification Number

C

Purpose of Disbursement
Digital Advertising

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

337.00

Transaction ID : 500110351

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Meta Platforms, Inc

Mailing Address 1 Hacker Way

Date of Disbursement

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

City
Menlo ParkState
CAZip Code
94025-1456

FEC Identification Number

C

Purpose of Disbursement
Digital Advertising

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

337.00

Transaction ID : 500110352

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

1011.00

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

SCHEDULE B (FEC Form 3)
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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

A. Meta Platforms, Inc

Mailing Address 1 Hacker Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		20		2026

City
Menlo ParkState
CAZip Code
94025-1456

FEC Identification Number

C

Purpose of Disbursement
Digital Advertising

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

337.00

Transaction ID : 500110353

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Meta Platforms, Inc

Mailing Address 1 Hacker Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		23		2026

City
Menlo ParkState
CAZip Code
94025-1456

FEC Identification Number

C

Purpose of Disbursement
Digital Advertising

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

337.00

Transaction ID : 500110354

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Meta Platforms, Inc

Mailing Address 1 Hacker Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		23		2026

City
Menlo ParkState
CAZip Code
94025-1456

FEC Identification Number

C

Purpose of Disbursement
Digital Advertising

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

337.00

Transaction ID : 500110355

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

1011.00

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)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

A. Meta Platforms, Inc

Mailing Address 1 Hacker Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2026

City
Menlo ParkState
CAZip Code
94025-1456

FEC Identification Number

C

Purpose of Disbursement
Digital Advertising

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

337.00

Transaction ID : 500110356

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Meta Platforms, Inc

Mailing Address 1 Hacker Way

Date of Disbursement

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

City
Menlo ParkState
CAZip Code
94025-1456

FEC Identification Number

C

Purpose of Disbursement
Digital Advertising

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

337.00

Transaction ID : 500110357

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Meta Platforms, Inc

Mailing Address 1 Hacker Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		27		2026

City
Menlo ParkState
CAZip Code
94025-1456

FEC Identification Number

C

Purpose of Disbursement
Digital Advertising

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

337.00

Transaction ID : 500110358

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

1011.00

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)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

A. Meta Platforms, Inc

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456Purpose of Disbursement
Digital Advertising

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

337.00

Transaction ID : 500110359

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Meta Platforms, Inc

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456Purpose of Disbursement
Digital Advertising

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

197.94

Transaction ID : 500110360

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Meta Platforms, Inc

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456Purpose of Disbursement
Digital Advertising

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

337.00

Transaction ID : 500110361

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

871.94

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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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

A. Meta Platforms, Inc

Mailing Address 1 Hacker Way

Date of Disbursement

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

City
Menlo ParkState
CAZip Code
94025-1456

FEC Identification Number

C

Purpose of Disbursement
Digital Advertising

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

337.00

Transaction ID : 500110362

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Meta Platforms, Inc

Mailing Address 1 Hacker Way

Date of Disbursement

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

City
Menlo ParkState
CAZip Code
94025-1456

FEC Identification Number

C

Purpose of Disbursement
Digital Advertising

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

337.00

Transaction ID : 500110363

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Mint MobileMailing Address 1550 Scenic Ave
Ste 100

Date of Disbursement

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

City
Costa MesaState
CAZip Code
92626-1420

FEC Identification Number

C

Purpose of Disbursement
Utilities

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

114.37

Transaction ID : 500110371

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

788.37

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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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

A. Momentum CampaignsMailing Address 1775 St NW
Ste 1150City
WashingtonState
DCZip Code
20001Purpose of Disbursement
Text Messaging Services

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

2365.10

Transaction ID : 500110372

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Momentum CampaignsMailing Address 1775 St NW
Ste 1150City
WashingtonState
DCZip Code
20001Purpose of Disbursement
Web Hosting

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : 500110373

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Momentum CampaignsMailing Address 1775 St NW
Ste 1150City
WashingtonState
DCZip Code
20001Purpose of Disbursement
Text Messaging Services

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

781.86

Transaction ID : 500110374

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

3196.96

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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(check only one)

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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

A. MSL Strategies LLC

Mailing Address 15900 Glen Miro Dr

Date of Disbursement

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

City
HuntersvilleState
NCZip Code
28078-2255

FEC Identification Number

C

Purpose of Disbursement
Direct Mail Services

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

24502.01

Transaction ID : 500110375

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. NGP VANMailing Address 10801 N Mopac Expy
Ste # 300

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		27		2026

City
AustinState
TXZip Code
78759-5459

FEC Identification Number

C

Purpose of Disbursement
Software Rental

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

3046.18

Transaction ID : 500110376

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. NGP VANMailing Address 10801 N Mopac Expy
Ste # 300

Date of Disbursement

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

City
AustinState
TXZip Code
78759-5459

FEC Identification Number

C

Purpose of Disbursement
Software Rental

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

3046.18

Transaction ID : 500110377

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

30594.37

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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(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

A. Olson Remcho LLPMailing Address 555 Capitol Mall
Ste 400City
SacramentoState
CAZip Code
95814-4503Purpose of Disbursement
Legal Consulting

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

575.00

Transaction ID : 500110379

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Orlattle LLC

Mailing Address 80 M St SE

City
WashingtonState
DCZip Code
20003-3544Purpose of Disbursement
Media Production

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

68138.61

Transaction ID : 500110380

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Orlattle LLC

Mailing Address 80 M St SE

City
WashingtonState
DCZip Code
20003-3544Purpose of Disbursement
Media Production

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1164.90

Transaction ID : 500110381

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

69878.51

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)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

A. Orlattle LLC

Mailing Address 80 M St SE

Date of Disbursement

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

City
WashingtonState
DCZip Code
20003-3544

FEC Identification Number

C

Purpose of Disbursement
Digital Advertising

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1188.00

Transaction ID : 500110382

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Palomo, Sergio, , ,

Mailing Address 110 S Olivarez St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		08		2026

City
DonnaState
TXZip Code
78537-9492

FEC Identification Number

C

Purpose of Disbursement
GOTV Canvassing

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : 500110275

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. Rodriguez, Rodolfo, , ,

Mailing Address 3421 Lantana Dr

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		17		2026

City
WeslacoState
TXZip Code
78596-1874

FEC Identification Number

C

Purpose of Disbursement
GOTV Canvassing

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

750.00

Transaction ID : 500110272

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

2438.00

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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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

A. Sam's ClubMailing Address 2101 SE Simple Savings Dr
2101City
BentonvilleState
ARZip Code
72712-4304Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

238.05

Transaction ID : 500110384

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Spit It Out! AudioMailing Address 2744 N Bosworth Ave
Apt 1WCity
ChicagoState
ILZip Code
60614-1136Purpose of Disbursement
Media Production

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

168.75

Transaction ID : 500110387

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Printshop RGV

Mailing Address 3906 S Jackson Rd

City
EdinburgState
TXZip Code
78539-1439Purpose of Disbursement
Printing

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

200.00

Transaction ID : 500110389

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

606.80

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:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

A. The Printshop RGV

Mailing Address 3906 S Jackson Rd

Date of Disbursement

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

City
EdinburgState
TXZip Code
78539-1439Purpose of Disbursement
Printing

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

216.50

Transaction ID : 500110390

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. The Printshop RGV

Mailing Address 3906 S Jackson Rd

Date of Disbursement

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

City
EdinburgState
TXZip Code
78539-1439Purpose of Disbursement
Printing

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

108.25

Transaction ID : 500110391

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Townsend GroupMailing Address 220 Cabrini Blvd
Apt 3E

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	2	6

City
New YorkState
NYZip Code
10033-1111Purpose of Disbursement
Strategic Consulting

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

4628.00

Transaction ID : 500110392

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

4952.75

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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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

A. University Draft House Edinburg

Mailing Address 2405 W University Dr

Date of Disbursement

M M	D D	Y Y Y Y
02	23	2026

City
EdinburgState
TXZip Code
78539-2816Purpose of Disbursement
Catering

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

323.20

Transaction ID : 500110393

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. University Draft House Edinburg

Mailing Address 2405 W University Dr

Date of Disbursement

M M	D D	Y Y Y Y
02	27	2026

City
EdinburgState
TXZip Code
78539-2816Purpose of Disbursement
Catering

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

66.00

Transaction ID : 500110394

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. V&M Prints

Mailing Address 401 S Iowa Ave

Date of Disbursement

M M	D D	Y Y Y Y
02	17	2026

City
WeslacoState
TXZip Code
78596-6255Purpose of Disbursement
Printing

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1153.95

Transaction ID : 500110396

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

1543.15

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)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

A. V&M Prints

Mailing Address 401 S Iowa Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		27		2026

City
WeslacoState
TXZip Code
78596-6255

FEC Identification Number

C

Purpose of Disbursement
Printing

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

224.50

Transaction ID : 500110397

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Valerio Consulting

Mailing Address 1438 W Mile 14 N

Date of Disbursement

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

City
WeslacoState
TXZip Code
78599-2043

FEC Identification Number

C

Purpose of Disbursement
Communication Consulting

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

660.00

Transaction ID : 500110398

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. Valerio Consulting

Mailing Address 1438 W Mile 14 N

Date of Disbursement

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

City
WeslacoState
TXZip Code
78599-2043

FEC Identification Number

C

Purpose of Disbursement
Communication Consulting

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

660.00

Transaction ID : 500110399

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

1544.50

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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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

Full Name (Last, First, Middle Initial)

A. Valerio Consulting

Mailing Address 1438 W Mile 14 N

City
WeslacoState
TXZip Code
78599-2043Purpose of Disbursement
Communication Consulting

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

660.00

Transaction ID : 500110400

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Walmart

Mailing Address 702 SW 8Th St

City
BentonvilleState
ARZip Code
72712-6209Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

31.53

Transaction ID : 500110401

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

691.53

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

315403.67

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

PAGE 41 OF 59

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

NAME OF COMMITTEE (In Full)

Transaction ID : 4853087L

Dr. Cuellar for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Cuellar, Ada, , ,

Mailing Address

5409 Remington Dr

City

Harlingen

State

TX

ZIP Code

78552-4304

☒ Personal Funds of the Candidate

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
08 / 25 / 2025M M / D D / Y Y Y Y
/ / noneM M / D D / Y Y Y Y
/ / noneM M / D D / Y 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).....▶

25000.00

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)
LOANS

PAGE 42 OF 59

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : 4853094L

Dr. Cuellar for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Cuellar, Ada, , ,

Mailing Address

5409 Remington Dr

City

Harlingen

State

TX

ZIP Code

78552-4304

☒ Personal Funds of the Candidate

Original Amount of Loan

100000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 23 / 2025M M / D D / Y Y Y Y
noneM M / D D / Y 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).....▶

100000.00

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)
LOANS

PAGE 43 OF 59

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : 4853099L

Dr. Cuellar for Congress

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

Election: 2026

Cuellar, Ada, , ,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

5409 Remington Dr

City

Harlingen

State

TX

ZIP Code

78552-4304

☒ Personal Funds of the Candidate

Original Amount of Loan

1912.50

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1912.50

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 30 / 2025M M / D D / Y Y Y Y
noneM M / D D / Y 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).....▶

0.00

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 44 OF 59

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

NAME OF COMMITTEE (In Full)

Transaction ID : 4853101L

Dr. Cuellar for Congress

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

Election: 2026

Cuellar, Ada, , ,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

5409 Remington Dr

City

Harlingen

State

TX

ZIP Code

78552-4304

☒ Personal Funds of the Candidate

Original Amount of Loan

250.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

250.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 30 / 2025M 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).....▶

0.00

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)
LOANS

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Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : 6505432L

Dr. Cuellar for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Cuellar, Ada, , ,

Mailing Address

5409 Remington Dr

City

Harlingen

State

TX

ZIP Code

78552-4304

☒ Personal Funds of the Candidate

Original Amount of Loan

100000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
12 01 / 2025

M M / D D / Y Y Y Y

M M / D D / Y 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).....▶

100000.00

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 46 OF 59

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

NAME OF COMMITTEE (In Full)

Transaction ID : 6505468L

Dr. Cuellar for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Cuellar, Ada, , ,

Mailing Address

5409 Remington Dr

City

Harlingen

State

TX

ZIP Code

78552-4304

☒ Personal Funds of the Candidate

Original Amount of Loan

250000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

250000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
12 30 / 2025M 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).....▶

250000.00

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 47 OF 59

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

NAME OF COMMITTEE (In Full)

Transaction ID : 7055037L

Dr. Cuellar for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Cuellar, Ada, , ,

Mailing Address

5409 Remington Dr

City

Harlingen

State

TX

ZIP Code

78552-4304

☒ Personal Funds of the Candidate

Original Amount of Loan

160000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

160000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
01 29 / 2026

M M / D D / Y Y Y Y

M M / D D / Y 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).....▶

160000.00

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)
LOANS

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Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : 7055038L

Dr. Cuellar for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Cuellar, Ada, , ,

Mailing Address

5409 Remington Dr

City

Harlingen

State

TX

ZIP Code

78552-4304

☒ Personal Funds of the Candidate

Original Amount of Loan

75000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

75000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 05 / 2026M 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).....▶

75000.00

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 49 OF 59

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

NAME OF COMMITTEE (In Full)

Transaction ID : 7055041L

Dr. Cuellar for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Cuellar, Ada, , ,

Mailing Address

5409 Remington Dr

City

Harlingen

State

TX

ZIP Code

78552-4304

☒ Personal Funds of the Candidate

Original Amount of Loan

60000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

60000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

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

M M / D D / Y Y Y Y

M M / D D / Y 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).....▶

60000.00

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)
LOANS

PAGE 50 OF 59

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : 7055042L

Dr. Cuellar for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Cuellar, Ada, , ,

Mailing Address

5409 Remington Dr

City

Harlingen

State

TX

ZIP Code

78552-4304

☒ Personal Funds of the Candidate

Original Amount of Loan

54000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

54000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 11 / 2026

M M / D D / Y Y Y Y

M M / D D / Y 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).....▶

54000.00

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 51 OF 59

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

NAME OF COMMITTEE (In Full)

Transaction ID : 7055043L

Dr. Cuellar for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Cuellar, Ada, , ,

Mailing Address

5409 Remington Dr

City

Harlingen

State

TX

ZIP Code

78552-4304

☒ Personal Funds of the Candidate

Original Amount of Loan

54000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

54000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 12 / 2026M M / D D / Y 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).....▶

54000.00

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 52 OF 59

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

NAME OF COMMITTEE (In Full)

Transaction ID : 7150299L

Dr. Cuellar for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Cuellar, Ada, , ,

Mailing Address

5409 Remington Dr

City

Harlingen

State

TX

ZIP Code

78552-4304

☒ Personal Funds of the Candidate

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 18 / 2026M 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).....▶

25000.00

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 53 OF 59

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

NAME OF COMMITTEE (In Full)

Transaction ID : 7161655L

Dr. Cuellar for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Cuellar, Ada, , ,

Mailing Address

5409 Remington Dr

City

Harlingen

State

TX

ZIP Code

78552-4304

☒ Personal Funds of the Candidate

Original Amount of Loan

100000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

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

M M / D D / Y Y Y Y

M M / D D / Y 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).....▶

100000.00

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)
LOANS

PAGE 54 OF 59

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : 7181419L

Dr. Cuellar for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Cuellar, Ada, , ,

Mailing Address

5409 Remington Dr

City

Harlingen

State

TX

ZIP Code

78552-4304

☒ Personal Funds of the Candidate

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 20 / 2026

M M / D D / Y Y Y Y

M M / D D / Y 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).....▶

50000.00

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 55 OF 59

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

NAME OF COMMITTEE (In Full)

Transaction ID : 8087445L

Dr. Cuellar for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Cuellar, Ada, , ,

Mailing Address

5409 Remington Dr

City

Harlingen

State

TX

ZIP Code

78552-4304

☒ Personal Funds of the Candidate

Original Amount of Loan

18000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

18000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

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

M M / D D / Y Y Y Y

M M / D D / Y 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).....▶

18000.00

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)
LOANS

PAGE 56 OF 59

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : 8087447L

Dr. Cuellar for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Cuellar, Ada, , ,

Mailing Address

5409 Remington Dr

City

Harlingen

State

TX

ZIP Code

78552-4304

☒ Personal Funds of the Candidate

Original Amount of Loan

22000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

22000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

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

M M / D D / Y Y Y Y

M M / D D / Y 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).....▶

22000.00

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)
LOANS

PAGE 57 OF 59

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : 8087457L

Dr. Cuellar for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Cuellar, Ada, , ,

Mailing Address

5409 Remington Dr

City

Harlingen

State

TX

ZIP Code

78552-4304

☒ Personal Funds of the Candidate

Original Amount of Loan

3200.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3200.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

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

M M / D D / Y Y Y Y

M M / D D / Y 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).....▶

3200.00

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)
LOANS

PAGE 58 OF 59

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : 8087458L

Dr. Cuellar for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Cuellar, Ada, , ,

Mailing Address

5409 Remington Dr

City

Harlingen

State

TX

ZIP Code

78552-4304

☒ Personal Funds of the Candidate

Original Amount of Loan

200.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

200.00

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 30 / 2026M 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).....▶

200.00

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

1096400.00

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 59 OF 59

FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Dr. Cuellar for Congress

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

Buying Time

Nature of Debt (Purpose):

Television Advertising

Mailing Address PO Box 318

City

Crownsville

State

MD

Zip Code

21032-0318

Outstanding Balance Beginning This Period

70907.00

Transaction ID : 1250000493

Amount Incurred This Period

0.00

Payment This Period

70907.00

Outstanding Balance at Close of This Period

0.00

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)

0.00

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

0.00

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)