

**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

Garamendi for Congress

ADDRESS (number and street)

PO Box 65322

Check if different  
than previously  
reported. (ACC)

Washington

DC

20035

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

C00462697

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

CA

08

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
04 / 01 / 2025

through

M M / D D / Y Y Y Y  
06 / 30 / 2025*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 Kyriacopoulos, Janica, , ,

Signature of Treasurer

Kyriacopoulos, Janica, , ,

Date

M M / D D / Y Y Y Y  
07 / 15 / 2025

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

**Garamendi for Congress**

Report Covering the Period:

From:

MM / DD / YYYY  
04 / 01 / 2025

To:

MM / DD / YYYY  
06 / 30 / 2025

|  | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)  |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e)) ....   | 116840.00               | 152132.00                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....  | 0.00                    | 2700.00                            |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 116840.00               | 149432.00                          |
| 7. Net Operating Expenditures  |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....   | 35681.30                | 146407.88                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14) .....  | 0.00                    | 0.00                               |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 35681.30                | 146407.88                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27) .....   | 1198222.04              |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 0.00                    |                                    |

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Garamendi for Congress

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
04 / 01 / 2025

To:

M M / D D / Y Y Y Y  
06 / 30 / 2025**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).....

67350.00

71700.00

(ii) Unitemized .....

740.00

1182.00

(iii) TOTAL of contributions  
from individuals ▶

68090.00

72882.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees  
(such as PACs) .....

48750.00

79250.00

(d) The Candidate .....

0.00

0.00

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

116840.00

152132.00

12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES .....

0.00

0.00

## 13. LOANS:

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

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

0.00

0.00

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

0.00

0.00

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

0.00

62.76

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

116840.00

152194.76

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....  | 35681.30                      | 146407.88                          |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:   |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....   | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:   |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 2700.00                            |
| (b) Political Party Committees.....  | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs) .....                       | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 2700.00                            |
| 21. OTHER DISBURSEMENTS .....  | 55500.00                      | 109100.00                          |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 91181.30                      | 258207.88                          |

## **III. CASH SUMMARY**

|   |            |
|---|------------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 1172563.34 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 116840.00  |
| 25. SUBTOTAL (add Line 23 and Line 24).....   | 1289403.34 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 91181.30   |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 1198222.04 |

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

PAGE 5 OF 83

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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

NAME OF COMMITTEE (In Full)

**Garamendi for Congress**

Full Name (Last, First, Middle Initial)

Bidart, Michael, J., ,

**A.**

Mailing Address 600 S Indian Hill Blvd

City

Claremont

State

CA

Zip Code

91711-5444

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Shernoff Bidart Echeverria Bentley LLP

Occupation

Partner

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

**Transaction ID : 13175845**

Amount of Each Receipt this Period

3500.00



Memo Item

Full Name (Last, First, Middle Initial)

Blumkin, Matthew, , ,

**B.**

Mailing Address 18765 Fairfield Rd

City

Porter Ranch

State

CA

Zip Code

91326-3918

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Greenspan Company

Occupation

Public Adjuster/Attorney

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

**Transaction ID : 13164463**

Amount of Each Receipt this Period

2500.00



Memo Item

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

ACTBLUE

**C.**

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 ▼

43335.00

Date of Receipt

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

**Transaction ID : 13164463E**

Amount of Each Receipt this Period

2500.00



Memo Item

Note: Above Contribution earmarked through this organization.

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

6000.00

**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 6 OF 83

☒ 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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

Bucheger, Ray, , ,

A.

Mailing Address 1120 G St NW  
Ste 1020

City  
Washington

State  
DC

Zip Code  
20002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Accelerate-Strategies

Occupation  
Partner

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 19 2025

Transaction ID : 13072271

Amount of Each Receipt this Period

500.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

ActBlue Technical Services

B.

Mailing Address PO Box 382110

City  
Cambridge

State  
MA

Zip Code  
02238-2110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Conduit total listed in Agg. field

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 19 2025

Transaction ID : 13072271E

Amount of Each Receipt this Period

500.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

Dean, Dana, L., ,

C.

Mailing Address 236 Saint Augustine Dr

City  
Benicia

State  
CA

Zip Code  
94510-2851

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hanson Bridgett LLP

Occupation  
Attorney

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 04 2025

Transaction ID : 12708732

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)..... ▶

1000.00

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

PAGE 7 OF 83

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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

NAME OF COMMITTEE (In Full)

**Garamendi 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 ▼

43335.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 07 2025

Transaction ID : 12708732E

Amount of Each Receipt this Period

500.00



Memo Item

Note: Above Contribution earmarked through this organization.

**B.**

Full Name (Last, First, Middle Initial)

DiLeo, Stephen, , ,

Mailing Address 1180 Nimitz Ave

City

Vallejo

State

CA

Zip Code

94592-1053

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

Name of Employer

Occupation

Stephen DiLeo

Manager

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 09 2025

Transaction ID : 12954110

Amount of Each Receipt this Period

3500.00



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 ▼

43335.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 14 2025

Transaction ID : 12954110E

Amount of Each Receipt this Period

3500.00



Memo Item

Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

3500.00

# **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 8 OF 83

☒ 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)

**Garamendi for Congress**

Full Name (Last, First, Middle Initial)

Emerson, John, Bonnell, ,

**A.**

Mailing Address 9583 Lime Orchard Rd

City

Beverly Hills

State

CA

Zip Code

90210-1315

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Capital Group

Occupation

Executive

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 30 2025

Transaction ID : 13119925

Amount of Each Receipt this Period

1000.00

☐ 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 ▼

43335.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 02 2025

Transaction ID : 13119925E

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

Evalle, John, , ,

**C.**

Mailing Address 449 Sawyer Dr

City

Vacaville

State

CA

Zip Code

95687-7895

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Travis Credit Union

Occupation

Military Affairs Officer

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 21 2025

Transaction ID : 12984693

Amount of Each Receipt this Period

500.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

1500.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 83

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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

NAME OF COMMITTEE (In Full)

Garamendi 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 ▼

43335.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 1 |   | 2 | 0 | 5 |   |

Transaction ID : 12984693E

Amount of Each Receipt this Period

500.00



Memo Item

Note: Above Contribution earmarked through this organization.

B.

Full Name (Last, First, Middle Initial)

Funderburk, William, , ,

Mailing Address 8100 Connecticut Ave  
Apt 1209

City

Chevy Chase

State

MD

Zip Code

20815-2818

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self Employed

Attorney

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 8 |   | 2 | 0 | 5 |   |

Transaction ID : 13174284

Amount of Each Receipt this Period

500.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

Garson, Brett, , ,

Mailing Address 1150 Connecticut Ave NW  
Ste 730

City

Washington

State

DC

Zip Code

20036-4163

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Smith Garson

CEO

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : 13059228

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)..... ▶

1000.00

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

PAGE 10 OF 83

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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

NAME OF COMMITTEE (In Full)

**Garamendi 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 ▼

43335.00

Date of Receipt

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

**Transaction ID : 13059228E**

Amount of Each Receipt this Period

500.00



Memo Item

Note: Above Contribution earmarked through this organization.

**B.**

Full Name (Last, First, Middle Initial)

Gray, Jim, , ,

Mailing Address 237 Guaymas Pl

City

Davis

State

CA

Zip Code

95616-0453

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

Name of Employer

Occupation

Self

Commercial Real Estate

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 3 | 0 |   | 2 | 0 | 5 |   |

**Transaction ID : 13044560**

Amount of Each Receipt this Period

1000.00



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 ▼

43335.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 5 |   | 2 | 0 | 5 |   |

**Transaction ID : 13044560E**

Amount of Each Receipt this Period

1000.00



Memo Item

Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

1000.00

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

PAGE 11 OF 83

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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

NAME OF COMMITTEE (In Full)

**Garamendi for Congress**

Full Name (Last, First, Middle Initial)

Greenspan, Robb, T., ,

**A.**

Mailing Address 3940 Prado Del Trigo

City

Calabasas

State

CA

Zip Code

91302-3643

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 ▼

3000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 8 |   | 2 | 0 | 5 |   |

**Transaction ID : 13175810**

Amount of Each Receipt this Period

3000.00

☐ 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 ▼

43335.00

Date of Receipt

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

**Transaction ID : 13175810E**

Amount of Each Receipt this Period

3000.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

Gridley, Michael, A., ,

**C.**

Mailing Address 169 Magee Ave

City

Mill Valley

State

CA

Zip Code

94941-4533

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 ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 3 | 0 |   | 2 | 0 | 5 |   |

**Transaction ID : 13044561**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

4000.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 83

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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

NAME OF COMMITTEE (In Full)

**Garamendi 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 ▼

43335.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 05 2025D D / Y Y Y Y Y  
05 2025Y Y Y Y Y  
2025

Transaction ID : 13044561E

Amount of Each Receipt this Period

1000.00



Memo Item

Note: Above Contribution earmarked through this organization.

**B.**

Full Name (Last, First, Middle Initial)

Hunter-Ishikawa, Zen, , ,

Mailing Address 504 Kings Way

City

Suisun City

State

CA

Zip Code

94585-1843

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

Name of Employer

Occupation

Self

Entrepreneur

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  
04 24 2025D D / Y Y Y Y Y  
24 2025Y Y Y Y Y  
2025

Transaction ID : 13023336

Amount of Each Receipt this Period

1000.00



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 ▼

43335.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 28 2025D D / Y Y Y Y Y  
28 2025Y Y Y Y Y  
2025

Transaction ID : 13023336E

Amount of Each Receipt this Period

1000.00



Memo Item

Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

1000.00

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

PAGE 13 OF 83

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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

NAME OF COMMITTEE (In Full)

**Garamendi for Congress**

Full Name (Last, First, Middle Initial)

Lacy, William, B., ,

**A.**

Mailing Address 1114 Purdue Dr

City  
DavisState  
CAZip Code  
95616-1736FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not EmployedOccupation  
Not Employed

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 11 2025**Transaction ID : 12954112**

Amount of Each Receipt this Period

500.00

☐ Memo Item

\* Earmarked Contribution: See Below

**B.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO Box 441146

City  
West SomervilleState  
MAZip Code  
02144-0031FEC 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 ▼

43335.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 14 2025**Transaction ID : 12954112E**

Amount of Each Receipt this Period

500.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

**C.**

Full Name (Last, First, Middle Initial)

Lansing, Sherry, , ,

Mailing Address 11812 San Vicente Blvd  
Ste 200City  
Los AngelesState  
CAZip Code  
90049-6622FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Sherry Lansing FoundationOccupation  
CEO

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  
06 20 2025**Transaction ID : 13164466**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

1500.00

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

PAGE 14 OF 83

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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

NAME OF COMMITTEE (In Full)

**Garamendi 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 ▼

43335.00

Date of Receipt

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

**Transaction ID : 13164466E**

Amount of Each Receipt this Period

1000.00



Memo Item

Note: Above Contribution earmarked through this organization.

**B.**

Full Name (Last, First, Middle Initial)

Lindeman, David, , ,

Mailing Address 2732 Calder Ct

City

Davis

State

CA

Zip Code

95618-7624

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 ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 4 |   | 2 | 0 | 5 |   |

**Transaction ID : 12708733**

Amount of Each Receipt this Period

500.00



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 ▼

43335.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 7 |   | 2 | 0 | 5 |   |

**Transaction ID : 12708733E**

Amount of Each Receipt this Period

500.00



Memo Item

Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

500.00

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

PAGE 15 OF 83

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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

NAME OF COMMITTEE (In Full)

**Garamendi for Congress**

Full Name (Last, First, Middle Initial)

Lyau, Bradford, , ,

**A.**

Mailing Address 1261 Bray Dr

City

Woodland

State

CA

Zip Code

95776-6776

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Globosocks LLC

Occupation

Entrepreneur

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 3 |   | 2 | 0 | 5 |   |

Transaction ID : 13023335

Amount of Each Receipt this Period

500.00

☐ 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 ▼

43335.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 8 |   | 2 | 0 | 5 |   |

Transaction ID : 13023335E

Amount of Each Receipt this Period

500.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

Marrone, Pamela, , ,

**C.**

Mailing Address 3333 Victoria Pl

City

Davis

State

CA

Zip Code

95616-2631

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Invasive Species Corporation

Occupation

Co-founder &amp; Executive Chair

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 7 |   | 2 | 0 | 5 |   |

Transaction ID : 13023338

Amount of Each Receipt this Period

500.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

1000.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 83

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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

NAME OF COMMITTEE (In Full)

**Garamendi 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 ▼

43335.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 28 2025**Transaction ID : 13023338E**

Amount of Each Receipt this Period

500.00



Memo Item

Note: Above Contribution earmarked through this organization.

**B.**

Full Name (Last, First, Middle Initial)

Mc Intosh, Daniel, G., ,

Mailing Address 130 East Ave

City

Rochester

State

NY

Zip Code

14604-2526

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

Name of Employer

Occupation

Content Partners, LLC

Attorney

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 23 2025**Transaction ID : 13175806**

Amount of Each Receipt this Period

500.00



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 ▼

43335.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 30 2025**Transaction ID : 13175806E**

Amount of Each Receipt this Period

500.00



Memo Item

Note: Above Contribution earmarked through this organization.

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

500.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 83

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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

NAME OF COMMITTEE (In Full)

**Garamendi for Congress**

Full Name (Last, First, Middle Initial)

Minalga, Cecilia, , ,

**A.**

Mailing Address 21 Ocho Rios Pl

City

Danville

State

CA

Zip Code

94526-4821

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 ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 6 |   | 2 | 0 | 2 | 5 |

**Transaction ID : 12708735**

Amount of Each Receipt this Period

500.00

☐ 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 ▼

43335.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 7 |   | 2 | 0 | 2 | 5 |

**Transaction ID : 12708735E**

Amount of Each Receipt this Period

500.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

Morris, John, G., ,

**C.**

Mailing Address 621 Perugia Way

City

Los Angeles

State

CA

Zip Code

90077-3710

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Investor

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

**Transaction ID : 13175808**

Amount of Each Receipt this Period

3500.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

4000.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 83

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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

NAME OF COMMITTEE (In Full)

**Garamendi 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 ▼

43335.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 30 2025**Transaction ID : 13175808E**

Amount of Each Receipt this Period

3500.00



Memo Item

Note: Above Contribution earmarked through this organization.

**B.**

Full Name (Last, First, Middle Initial)

Morris, John, G., ,

Mailing Address 621 Perugia Way

City

Los Angeles

State

CA

Zip Code

90077-3710

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

Name of Employer

Occupation

Self

Investor

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 27 2025**Transaction ID : 13175852**

Amount of Each Receipt this Period

1500.00



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 ▼

43335.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 30 2025**Transaction ID : 13175852E**

Amount of Each Receipt this Period

1500.00



Memo Item

Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

1500.00

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

PAGE 19 OF 83

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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

NAME OF COMMITTEE (In Full)

**Garamendi for Congress**

Full Name (Last, First, Middle Initial)

Pereyda, Ryan, , ,

**A.**

Mailing Address 59 Tiger Tail Ct

City

Orinda

State

CA

Zip Code

94563-1420

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

Name of Employer

Patriot Contact Services LLC

Occupation

Principal &amp; CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 8 |   | 2 | 0 | 2 | 5 |

**Transaction ID : 12954109**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

\* Earmarked Contribution: See Below

**B.**

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 ▼

43335.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 4 |   | 2 | 0 | 2 | 5 |

**Transaction ID : 12954109E**

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

**C.**

Full Name (Last, First, Middle Initial)

Person, Sandy, , ,

Mailing Address 461 Willamette Dr

City

Vacaville

State

CA

Zip Code

95688-4227

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

Name of Employer

Travis Community Consortium

Occupation

Exec Director

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 3 |   | 2 | 0 | 2 | 5 |

**Transaction ID : 13023334**

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)..... ▶

1500.00

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

PAGE 20 OF 83

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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

NAME OF COMMITTEE (In Full)

**Garamendi 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 ▼

43335.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 8 |   | 2 | 0 | 2 | 5 |

Transaction ID : 13023334E

Amount of Each Receipt this Period

500.00



Memo Item

Note: Above Contribution earmarked through this organization.

**B.**

Full Name (Last, First, Middle Initial)

Pomerance, Drew, , ,

Mailing Address 18914 Carmel Crest Dr

City

Tarzana

State

CA

Zip Code

91356-5827

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

Name of Employer

Occupation

Self

Attorney

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 9 |   | 2 | 0 | 2 | 5 |

Transaction ID : 13164465

Amount of Each Receipt this Period

3500.00



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 ▼

43335.00

Date of Receipt

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

Transaction ID : 13164465E

Amount of Each Receipt this Period

3500.00



Memo Item

Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3500.00

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

PAGE 21 OF 83

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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

NAME OF COMMITTEE (In Full)

**Garamendi for Congress**

Full Name (Last, First, Middle Initial)

Recht, Philip, R., ,

Mailing Address 645 N Bonhill Rd

City

Los Angeles

State

CA

Zip Code

90049-2301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mayer Brown LLP

Occupation

Attorney

Receipt For: 2026

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 8 |   | 2 | 0 | 5 |   |

Transaction ID : 13175809

Amount of Each Receipt this Period

1000.00

☐ Memo Item

\* Earmarked Contribution: See Below

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 ▼

43335.00

Date of Receipt

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

Transaction ID : 13175809E

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

Russell, Mike, , ,

Mailing Address 715 Falcon Ave

City

Davis

State

CA

Zip Code

95616-0163

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2026

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 9 |   | 2 | 0 | 5 |   |

Transaction ID : 13157967

Amount of Each Receipt this Period

1000.00

☐ Memo Item

2000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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 22 OF 83

☒ 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)

**Garamendi for Congress**

Full Name (Last, First, Middle Initial)

San Pablo Lytton

**A.** Mailing Address 13255 San Pablo Ave

City

San Pablo

State

CA

Zip Code

94806-3907

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 30 2025

**Transaction ID : 13255946**

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

San Pablo Lytton

**B.** Mailing Address 13255 San Pablo Ave

City

San Pablo

State

CA

Zip Code

94806-3907

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 30 2025

**Transaction ID : 13255947**

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Schacht, Linda, , ,

**C.** Mailing Address 2811 Benvenue Ave

City

Berkeley

State

CA

Zip Code

94705-2103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UC Berkeley

Occupation

faculty

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 30 2025

**Transaction ID : 13044559**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

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

8000.00

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

PAGE 23 OF 83

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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

NAME OF COMMITTEE (In Full)

**Garamendi 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 ▼

43335.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 05 2025**Transaction ID : 13044559E**

Amount of Each Receipt this Period

1000.00



Memo Item

Note: Above Contribution earmarked through this organization.

**B.**

Full Name (Last, First, Middle Initial)

Sitzmann, Gary, , ,

Mailing Address 46314 Nandina Ct

City

Indian Wells

State

CA

Zip Code

92210-7324

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 ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 01 2025**Transaction ID : 13044562**

Amount of Each Receipt this Period

3500.00



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 ▼

43335.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 05 2025**Transaction ID : 13044562E**

Amount of Each Receipt this Period

3500.00



Memo Item

Note: Above Contribution earmarked through this organization.

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

3500.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 83

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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

NAME OF COMMITTEE (In Full)

**Garamendi for Congress**

Full Name (Last, First, Middle Initial)

Sitzmann, Lindy, L., ,

**A.**Mailing Address 3697 Mt Diablo Blvd  
Ste 100City  
LafayetteState  
CAZip Code  
94549-3769FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Homemaker

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 5 |   | 2 | 0 | 2 | 5 |

**Transaction ID : 13044552**

Amount of Each Receipt this Period

3500.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

ACTBLUE

**B.**

Mailing Address PO Box 441146

City  
West SomervilleState  
MAZip Code  
02144-0031FEC 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 ▼

43335.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 5 |   | 2 | 0 | 2 | 5 |

**Transaction ID : 13044552E**

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

Strumwasser, Michael, , ,

**C.**Mailing Address 10590 Wilshire Blvd  
Apt 704City  
Los AngelesState  
CAZip Code  
90024-4557FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Strumwasser & Woocher LLPOccupation  
Attorney

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 8 |   | 2 | 0 | 2 | 5 |

**Transaction ID : 13175811**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

4500.00

**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 25 OF 83

☒ 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)

Garamendi 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 ▼

43335.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 30 2025

Transaction ID : 13175811E

Amount of Each Receipt this Period

1000.00



Memo Item

Note: Above Contribution earmarked through this organization.

B.

Full Name (Last, First, Middle Initial)

Townsend, Christopher, J., ,

Mailing Address 26022 Horseshoe Cir

City

Laguna Hills

State

CA

Zip Code

92653-6148

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Townsend Public Affairs

President

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 07 2025

Transaction ID : 13059229

Amount of Each Receipt this Period

3500.00



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 ▼

43335.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 12 2025

Transaction ID : 13059229E

Amount of Each Receipt this Period

3500.00



Memo Item

Note: Above Contribution earmarked through this organization.

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

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

3500.00

# **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 26 OF 83

☒ 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)

**Garamendi for Congress**

Full Name (Last, First, Middle Initial)

Vaccaro, Sue, Haber, ,

**A.**

Mailing Address 3225 Seminole Cir

City

Fairfield

State

CA

Zip Code

94534-7858

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Vaccaro & Associates

Occupation

Principal

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  
04 25 2025

Transaction ID : 13011528

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Way, Jeannette, , ,

**B.**

Mailing Address 512 Rambleton Dr

City

Vacaville

State

CA

Zip Code

95688-9227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Jeannette Way

Occupation

Realtor

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 25 2025

Transaction ID : 13023337

Amount of Each Receipt this Period

100.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

ACTBLUE

**C.**

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 ▼

43335.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 28 2025

Transaction ID : 13023337E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

350.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 27 OF 83

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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

NAME OF COMMITTEE (In Full)

**Garamendi for Congress**

Full Name (Last, First, Middle Initial)

Whitehouse, Ruth, , ,

**A.**

Mailing Address 7679 Glow Ln

City

Vacaville

State

CA

Zip Code

95688-9648

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2026

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 7 |   | 2 | 0 | 2 | 5 |

**Transaction ID : 13048277**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Yarbrough Russo, Debra, , ,

**B.**

Mailing Address 4125 Green Valley Rd

City

Fairfield

State

CA

Zip Code

94534-1346

FEC ID number of contributing  
federal political committee.

C

Name of Employer

B &amp; L Properties

Occupation

Owner

Receipt For: 2026

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 7 |   | 2 | 0 | 2 | 5 |

**Transaction ID : 13048268**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Yilma, Tilahun, Daniel, , Ph.D.

**C.**

Mailing Address 826 Oak Ave

City

Davis

State

CA

Zip Code

95616-3631

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 ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 9 |   | 2 | 0 | 2 | 5 |

**Transaction ID : 13044558**

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)..... ▶

|         |
|---------|
| 2000.00 |
|---------|

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

PAGE 28 OF 83

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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

NAME OF COMMITTEE (In Full)

**Garamendi 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 ▼

43335.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 5 |   | 2 | 0 | 2 | 5 |

Transaction ID : 13044558E

Amount of Each Receipt this Period

500.00



Memo Item

Note: Above Contribution earmarked through this organization.

**B.**

Full Name (Last, First, Middle Initial)

Yin, C.C., , ,

Mailing Address 185 Butcher Rd

City

Vacaville

State

CA

Zip Code

95687-5656

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

Name of Employer

Occupation

Self-Employed

Fast Food Owner

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 6 |   | 2 | 0 | 2 | 5 |

Transaction ID : 12966124

Amount of Each Receipt this Period

3500.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Yocha Dehe Wintun Nation

Mailing Address PO Box 18

City

Brooks

State

CA

Zip Code

95606-0018

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

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : 13255943

Amount of Each Receipt this Period

3500.00



Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

7000.00

FOR LINE NUMBER:  
(check only one)

|   |     |     |     |     |    |
|---|-----|-----|-----|-----|----|
| × | 11a | 11b | 11c | 11d |    |
|   | 12  | 13a | 13b | 14  | 15 |

## Garamendi for Congress

Yocha Dehe Wintun Nation

Zip Code  
95606-0018

|   |  |
|---|--|
| C |  |
|---|--|

3500.00

7000.00

Zip Code

C

Memo Item

Zip Code

C

A diagram of a 2D hexagonal lattice. A central site is highlighted by a downward-pointing arrow. The lattice consists of two rows of sites. The top row has 10 sites, and the bottom row has 10 sites. The central site in the top row is the 5th site from the left. The central site in the bottom row is the 4th site from the left.

Memo Item

3500.00

67350.00

# **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 30 OF 83

☐ 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)

**Garamendi for Congress**

Full Name (Last, First, Middle Initial)

AAR CORP. PAC

**A.**

Mailing Address 1100 N Wood Dale Rd

City

Wood Dale

State

IL

Zip Code

60191-1060

FEC ID number of contributing  
federal political committee.

**C** C00625921

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 25 2025

Transaction ID : 13169231

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Amalgamated Transit Union-COPE

**B.**

Mailing Address 10000 New Hampshire Ave

City

Silver Spring

State

MD

Zip Code

20903-1706

FEC ID number of contributing  
federal political committee.

**C** C00032995

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 02 2025

Transaction ID : 13038532

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

American Maritime Officers Voluntary Political Action Fund

**C.**

Mailing Address PO Box 66

City

Dania Beach

State

FL

Zip Code

33004-0066

FEC ID number of contributing  
federal political committee.

**C** C00027532

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 30 2025

Transaction ID : 13187993

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

7500.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 83

|                              |                              |   |                              |
|------------------------------|------------------------------|---|------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 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)

**Garamendi for Congress**

Full Name (Last, First, Middle Initial)

BLANK ROME PAC

**A.**Mailing Address 1825 I St NW  
Ste 1200City  
WashingtonState  
DCZip Code  
20006-5417FEC ID number of contributing  
federal political committee.**C** C00150797

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 05  |   | 14  |   | 2025        |

Transaction ID : 13064058

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Blue Diamond Growers Political Action Committee

Mailing Address 1802 C St

City  
SacramentoState  
CAZip Code  
95811-1010FEC ID number of contributing  
federal political committee.**C** C00080135

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 06  |   | 11  |   | 2025        |

Transaction ID : 13137474

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Council for a Livable World Candidate Fund

Mailing Address 820 1st St NE  
Ste LL180City  
WashingtonState  
DCZip Code  
20002-8064FEC ID number of contributing  
federal political committee.**C** C00387555

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 05  |   | 01  |   | 2025        |

Transaction ID : 13080206

Amount of Each Receipt this Period

1000.00

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

3000.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 32 OF 83

|                              |                              |   |                              |                             |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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

NAME OF COMMITTEE (In Full)

**Garamendi for Congress**

Full Name (Last, First, Middle Initial)

CULAC the PAC of Credit Union National Association

**A.**Mailing Address 601 Pennsylvania Ave NW  
Ste 600SCity  
WashingtonState  
DCZip Code  
20004-2620FEC ID number of contributing  
federal political committee.**C** C00007880

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

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

**Transaction ID : 13169235**

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

D.R.I.V.E. - DEMOCRAT, REPUBLICAN, INDEPENDENT VOTER EDUCATION (TEAMSTERS)

**B.**

Mailing Address 25 Louisiana Ave NW

City  
WashingtonState  
DCZip Code  
20001-2130FEC ID number of contributing  
federal political committee.**C** C00032979

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

**Transaction ID : 13255940**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DISTRICT NO. 1-PCD, MARINE ENGINEERS' BENEFICIAL ASSOC. - POLITICAL ACTION FUND (MEBA-PAF)

**C.**Mailing Address 444 N Capitol St NW  
Ste 800City  
WashingtonState  
DCZip Code  
20001-1508FEC ID number of contributing  
federal political committee.**C** C00279380

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 2 |   | 2 | 0 | 2 | 5 |

**Transaction ID : 13038529**

Amount of Each Receipt this Period

2500.00

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

10500.00

**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 33 OF 83

☐ 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)

**Garamendi for Congress**

Full Name (Last, First, Middle Initial)

**EMPLOYEES OF RTX CORPORATION POLITICAL ACTION COMMITTEE**

**A.**

Mailing Address 1000 Wilson Blvd  
Ste 2300

City  
Arlington

State  
VA

Zip Code  
22209-3914

FEC ID number of contributing  
federal political committee.

**C** C00097568

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 30 2025

**Transaction ID : 13257083**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**

**B.**

Mailing Address 101 Constitution Ave NW  
Ste 500

City  
Washington

State  
DC

Zip Code  
20001-2133

FEC ID number of contributing  
federal political committee.

**C** C00096156

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 30 2025

**Transaction ID : 13192213**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**HUNTINGTON INGALLS INDUSTRIES, INC. EMPLOYEES POLITICAL ACTION COMMITTEE (HIIPAC)**

**C.**

Mailing Address 300 M St SE  
Ste 350

City  
Washington

State  
DC

Zip Code  
20003-3436

FEC ID number of contributing  
federal political committee.

**C** C00325092

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 25 2025

**Transaction ID : 13175843**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

7000.00

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

PAGE 34 OF 83

|                              |                              |   |                              |                             |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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

NAME OF COMMITTEE (In Full)

**Garamendi for Congress**

Full Name (Last, First, Middle Initial)

International Brotherhood of Boilermakers Campaign Assistance Fund

Mailing Address 12200 N Ambassador Dr  
# 301City  
Kansas CityState  
MOZip Code  
64163-1244FEC ID number of contributing  
federal political committee.**C** C00005157

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : 13192217

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES POLITICAL ACTION TOGETHER POLITICAL COMM

Mailing Address 7234 Parkway Dr

City  
HanoverState  
MDZip Code  
21076-1307FEC ID number of contributing  
federal political committee.**C** C00000885

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : 13257082

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MACHINISTS NON PARTISAN POLITICAL LEAGUE OF THE INTERNATIONAL ASSOCIATION OF MACHINISTS &amp;

Mailing Address 9000 Machinists Pl

City  
Upper MarlboroState  
MDZip Code  
20772-2675FEC ID number of contributing  
federal political committee.**C** C00002469

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : 13192221

Amount of Each Receipt this Period

5000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

12500.00

**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 35 OF 83

☐ 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)

**Garamendi for Congress**

Full Name (Last, First, Middle Initial)

**NATIONAL MULTIFAMILY HOUSING COUNCIL POLITICAL ACTION COMMITTEE**

**A.**

Mailing Address 1775 I St NW  
Ste 1100

City  
Washington

State  
DC

Zip Code  
20006-2424

FEC ID number of contributing  
federal political committee.

**C** C00130773

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 16 2025

**Transaction ID : 13066232**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NEA Fund for Children and Public Education**

**B.**

Mailing Address 1201 16th St NW  
Ste 410

City  
Washington

State  
DC

Zip Code  
20036-3201

FEC ID number of contributing  
federal political committee.

**C** C00003251

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 30 2025

**Transaction ID : 13192210**

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Nucor Corporation Political Action Committee**

**C.**

Mailing Address 1915 Rexford Rd

City  
Charlotte

State  
NC

Zip Code  
28211-3465

FEC ID number of contributing  
federal political committee.

**C** C00379628

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 30 2025

**Transaction ID : 13256407**

Amount of Each Receipt this Period

1500.00

☐ Memo Item

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

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

4500.00

# **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 36 OF 83

☐ 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)

**Garamendi for Congress**

Full Name (Last, First, Middle Initial)

PAGE OF CALIFORNIA SCHOOL EMPLOYEES ASSOCIATION - LOCAL, STATE, FEDERAL CANDIDATES

**A.**

Mailing Address 555 Capitol Mall  
Ste 400

City  
Sacramento

State  
CA

Zip Code  
95814-4503

FEC ID number of contributing  
federal political committee.

**C** C00480830

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 12 2025

Transaction ID : 13059196

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SHEET METAL & AIR CONDITIONING CONTRACTORS' NATIONAL ASSOC., INC. POLITICAL ACTION COMMITTEE

**B.**

Mailing Address 4201 Lafayette Center Dr

City  
Chantilly

State  
VA

Zip Code  
20151-1209

FEC ID number of contributing  
federal political committee.

**C** C00013961

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 30 2025

Transaction ID : 13187991

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

UTILITY WORKERS UNION OF AMERICA COPE

**C.**

Mailing Address 815 16th St NW

City  
Washington

State  
DC

Zip Code  
20006-4101

FEC ID number of contributing  
federal political committee.

**C** C00040741

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 12 2025

Transaction ID : 13059215

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

3000.00

# **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 37 OF 83

☐ 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)

**Garamendi for Congress**

Full Name (Last, First, Middle Initial)

V2X, INC. POLITICAL ACTION COMMITTEE

**A.**

Mailing Address 7901 Jones Branch Dr  
Ste 700

City  
McLean

State  
VA

Zip Code  
22102-3385

FEC ID number of contributing  
federal political committee.

**C** C00760710

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 02 2025

**Transaction ID : 13038526**

Amount of Each Receipt this Period

750.00

☐ Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

750.00

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

48750.00

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

PAGE 38 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address PO Box 382110

City  
CambridgeState  
MAZip Code  
02238-2110Purpose of Disbursement  
Credit Card Fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 7 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

61.04

Transaction ID : 501242157

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address PO Box 382110

City  
CambridgeState  
MAZip Code  
02238-2110Purpose of Disbursement  
Credit Card Fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 4 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

198.49

Transaction ID : 501243451

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address PO Box 382110

City  
CambridgeState  
MAZip Code  
02238-2110Purpose of Disbursement  
Credit Card Fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 1 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

20.74

Transaction ID : 501244267

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

280.27

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

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

PAGE 39 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address PO Box 382110

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 8 |   | 2 | 0 | 2 | 5 |

City  
CambridgeState  
MAZip Code  
02238-2110

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

102.70

Transaction ID : 501245133

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address PO Box 382110

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 5 |   | 2 | 0 | 2 | 5 |

City  
CambridgeState  
MAZip Code  
02238-2110

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

420.29

Transaction ID : 501245669

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address PO Box 382110

Date of Disbursement

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

City  
CambridgeState  
MAZip Code  
02238-2110

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

159.19

Transaction ID : 501246547

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

682.18

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

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

PAGE 40 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address PO Box 382110

City  
CambridgeState  
MAZip Code  
02238-2110Purpose of Disbursement  
Credit Card Fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 9 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

19.75

Transaction ID : 501247435

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address PO Box 382110

City  
CambridgeState  
MAZip Code  
02238-2110Purpose of Disbursement  
Credit Card Fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 7 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.20

Transaction ID : 501248330

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address PO Box 382110

City  
CambridgeState  
MAZip Code  
02238-2110Purpose of Disbursement  
Credit Card Fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

43.85

Transaction ID : 501249256

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

63.80

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



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

PAGE 41 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address PO Box 382110

City  
CambridgeState  
MAZip Code  
02238-2110Purpose of Disbursement  
Credit Card Fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.79

Transaction ID : 501250030

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address PO Box 382110

City  
CambridgeState  
MAZip Code  
02238-2110Purpose of Disbursement  
Merchant Fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3.97

Transaction ID : 501251109

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address PO Box 382110

City  
CambridgeState  
MAZip Code  
02238-2110Purpose of Disbursement  
Credit Card Fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

284.60

Transaction ID : 501251634

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

290.36

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

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

PAGE 42 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address PO Box 382110

Date of Disbursement

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

City  
CambridgeState  
MAZip Code  
02238-2110

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

415.15

Transaction ID : 501253054

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Bank of America Commercial Card**

Mailing Address PO Box 15796

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 2 | 5 |

City  
WilmingtonState  
DEZip Code  
19886-5796

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Payment: See Below

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

12119.38

Transaction ID : 501244860

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. AT&T Store Sacramento**Mailing Address 547 L St  
Ste 1066E

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 2 | 5 |

City  
SacramentoState  
CAZip Code  
95814-3318

FEC Identification Number

C

Purpose of Disbursement  
Telephone Service

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

276.10

Transaction ID : 501244933

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

12534.53

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

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

PAGE 43 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. Canva**

Mailing Address 600 California St

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 5 |   |

City  
San FranciscoState  
CAZip Code  
94108-2704

FEC Identification Number

C

Purpose of Disbursement  
Software

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

12.99

Transaction ID : 501244916

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Canva**

Mailing Address 600 California St

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 5 |   |

City  
San FranciscoState  
CAZip Code  
94108-2704

FEC Identification Number

C

Purpose of Disbursement  
Software

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

14.99

Transaction ID : 501244930

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. City of Sacramento Parking Services**Mailing Address 300 Richards Blvd  
FI 2

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 5 |   |

City  
SacramentoState  
CAZip Code  
95811-0218

FEC Identification Number

C

Purpose of Disbursement  
Parking

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

60.00

Transaction ID : 501244924

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

0.00

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

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

PAGE 44 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. Extra Space**

Mailing Address 1240 Mount Olivet Rd NE

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 5 |   |

City  
WashingtonState  
DCZip Code  
20002-7801

FEC Identification Number

C

Purpose of Disbursement  
Storage

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

396.20

Transaction ID : 501244935

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Exxon Mobil**

Mailing Address 5959 Las Colinas Blvd

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 5 |   |

City  
IrvingState  
TXZip Code  
75039-4202

FEC Identification Number

C

Purpose of Disbursement  
Travel Expense

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

45.81

Transaction ID : 501244927

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. House Gift Shop**Mailing Address 217 Longworth House Office Buildin  
# B

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 5 |   |

City  
WashingtonState  
DCZip Code  
20151

FEC Identification Number

C

Purpose of Disbursement  
Constituents Gift

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2.10

Transaction ID : 501244910

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

0.00

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

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

PAGE 45 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. Lansdowne Resort**

Mailing Address 44050 Woodridge Pkwy

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 2 | 5 |

City  
LansdowneState  
VAZip Code  
20176-5103

FEC Identification Number

C

Purpose of Disbursement  
Caucus Retreat Expense

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

35.00

Transaction ID : 501244913

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Lansdowne Resort**

Mailing Address 44050 Woodridge Pkwy

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 2 | 5 |

City  
LansdowneState  
VAZip Code  
20176-5103

FEC Identification Number

C

Purpose of Disbursement  
Caucus Retreat Expense

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

204.06

Transaction ID : 501244914

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Lansdowne Resort**

Mailing Address 44050 Woodridge Pkwy

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 2 | 5 |

City  
LansdowneState  
VAZip Code  
20176-5103

FEC Identification Number

C

Purpose of Disbursement  
Caucus Retreat Expense

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

25.44

Transaction ID : 501244915

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

0.00

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

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

PAGE 46 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. Lyft**Mailing Address 185 Berry St  
Ste 5000City  
San FranciscoState  
CAZip Code  
94107-2503Purpose of Disbursement  
Travel and Meetings

Candidate Name

Office Sought: 

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

61.96

Transaction ID : 501244875

☒ Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Osteria Morini**

Mailing Address 301 Water St SE

City  
WashingtonState  
DCZip Code  
20003-3734Purpose of Disbursement  
Catering

Candidate Name

Office Sought: 

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

600.00

Transaction ID : 501244903

☒ Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Sirius XM**

Mailing Address 1221 Avenue of the Americas

City  
New YorkState  
NYZip Code  
10020-1001Purpose of Disbursement  
Subscription

Candidate Name

Office Sought: 

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

24.98

Transaction ID : 501244923

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

0.00

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

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

PAGE 47 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. Spokeo Software**Mailing Address 1900 S Norfolk St  
Ste 290City  
San MateoState  
CAZip Code  
94403-1166Purpose of Disbursement  
Software

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 5 |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

154.95

Transaction ID : 501244932

☒ Memo Item \***B. Starlink Internet**Mailing Address 320 E Clayton St  
# 501ACity  
AthensState  
GAZip Code  
30601-2765Purpose of Disbursement  
Software

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 5 |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

120.00

Transaction ID : 501244926

☒ Memo Item \***C. The Congressional Club**

Mailing Address 2001 New Hampshire Ave NW

City  
WashingtonState  
DCZip Code  
20009-3414Purpose of Disbursement  
Event Tickets

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 5 |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

239.56

Transaction ID : 501244934

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

0.00

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

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

PAGE 48 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. Uber**Mailing Address 1455 Market St  
FI 11City  
San FranciscoState  
CAZip Code  
94103-1355Purpose of Disbursement  
Travel and Meetings

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 5 |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

5.75

Transaction ID : 501244892

☒ Memo Item \***B. Uber**Mailing Address 1455 Market St  
FI 11City  
San FranciscoState  
CAZip Code  
94103-1355Purpose of Disbursement  
Travel and Meetings

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 5 |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

17.90

Transaction ID : 501244893

☒ Memo Item \***C. Uber**Mailing Address 1455 Market St  
FI 11City  
San FranciscoState  
CAZip Code  
94103-1355Purpose of Disbursement  
Travel and Meetings

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 5 |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

24.74

Transaction ID : 501244899

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

0.00

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



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

PAGE 49 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. Uber**Mailing Address 1455 Market St  
FI 11City  
San FranciscoState  
CAZip Code  
94103-1355Purpose of Disbursement  
Travel and Meetings

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 5 |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

31.96

Transaction ID : 501244901

☒ Memo Item \***B. Uber**Mailing Address 1455 Market St  
FI 11City  
San FranciscoState  
CAZip Code  
94103-1355Purpose of Disbursement  
Travel and Meetings

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 5 |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

10.93

Transaction ID : 501244902

☒ Memo Item \***C. Uber**Mailing Address 1455 Market St  
FI 11City  
San FranciscoState  
CAZip Code  
94103-1355Purpose of Disbursement  
Travel and Meetings

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 5 |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

27.94

Transaction ID : 501244907

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

0.00

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

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

PAGE 50 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. Uber**Mailing Address 1455 Market St  
FI 11City  
San FranciscoState  
CAZip Code  
94103-1355Purpose of Disbursement  
Travel and Meetings

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 5 |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

26.84

Transaction ID : 501244909

☒ Memo Item \***B. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Refund

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 5 |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

- 1113.49

Transaction ID : 501244865

☒ Memo Item \***C. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Refund

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 5 |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

- 973.48

Transaction ID : 501244866

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

0.00

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

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

PAGE 51 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address PO Box 66100

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 2 | 5 |

City  
ChicagoState  
ILZip Code  
60666-0097

FEC Identification Number

C

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

- 1994.48

Transaction ID : 501244868

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address PO Box 66100

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 2 | 5 |

City  
ChicagoState  
ILZip Code  
60666-0097

FEC Identification Number

C

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

- 973.48

Transaction ID : 501244869

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address PO Box 66100

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 2 | 5 |

City  
ChicagoState  
ILZip Code  
60666-0097

FEC Identification Number

C

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

- 903.49

Transaction ID : 501244870

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

0.00

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

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

PAGE 52 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address PO Box 66100

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 2 | 5 |

City  
ChicagoState  
ILZip Code  
60666-0097

FEC Identification Number

C

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

- 1914.48

Transaction ID : 501244871

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address PO Box 66100

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 2 | 5 |

City  
ChicagoState  
ILZip Code  
60666-0097

FEC Identification Number

C

Purpose of Disbursement  
Travel and Meetings

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1113.49

Transaction ID : 501244872

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address PO Box 66100

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 2 | 5 |

City  
ChicagoState  
ILZip Code  
60666-0097

FEC Identification Number

C

Purpose of Disbursement  
Travel and Meetings

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1994.48

Transaction ID : 501244873

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

0.00

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

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

PAGE 53 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Travel and Meetings

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 5 |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

973.48

Transaction ID : 501244876

☒ Memo Item \*

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Travel and Meetings

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 5 |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

1438.48

Transaction ID : 501244878

☒ Memo Item \*

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Travel and Meetings

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 5 |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

903.49

Transaction ID : 501244879

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

0.00

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

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

PAGE 54 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address PO Box 66100

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 5 |   |

City  
ChicagoState  
ILZip Code  
60666-0097

FEC Identification Number

C

Purpose of Disbursement  
Travel and Meetings

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1914.48

Transaction ID : 501244880

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address PO Box 66100

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 5 |   |

City  
ChicagoState  
ILZip Code  
60666-0097

FEC Identification Number

C

Purpose of Disbursement  
Travel and Meetings

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1914.48

Transaction ID : 501244886

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address PO Box 66100

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 5 |   |

City  
ChicagoState  
ILZip Code  
60666-0097

FEC Identification Number

C

Purpose of Disbursement  
Travel and Meetings

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1398.48

Transaction ID : 501244887

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

0.00

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

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

PAGE 55 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address PO Box 66100

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 2 | 5 |

City  
ChicagoState  
ILZip Code  
60666-0097

FEC Identification Number

C

Purpose of Disbursement  
Travel and Meetings

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

903.49

Transaction ID : 501244888

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address PO Box 66100

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 2 | 5 |

City  
ChicagoState  
ILZip Code  
60666-0097

FEC Identification Number

C

Purpose of Disbursement  
Travel and Meetings

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1398.48

Transaction ID : 501244889

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address PO Box 66100

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 2 | 5 |

City  
ChicagoState  
ILZip Code  
60666-0097

FEC Identification Number

C

Purpose of Disbursement  
Travel and Meetings

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1398.48

Transaction ID : 501244890

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

0.00

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

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

PAGE 56 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Travel and Meetings

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1718.49

Transaction ID : 501244912

☒ Memo Item \***B. USPS.com**

Mailing Address 475 Lenfant Plz SW

City  
WashingtonState  
DCZip Code  
20260-0004Purpose of Disbursement  
Mail and Postal Service

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 2 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

93.20

Transaction ID : 501244917

☒ Memo Item \***C. Bank of America Commercial Card**

Mailing Address PO Box 15796

City  
WilmingtonState  
DEZip Code  
19886-5796Purpose of Disbursement  
Credit Card Payment: See Below

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

4907.75

Transaction ID : 501247454

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

4907.75

**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  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 57 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 6928 Airport Blvd

City  
SacramentoState  
CAZip Code  
95837-1109Purpose of Disbursement  
Travel and Meetings

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

394.48

Transaction ID : 501247891

☒ Memo Item \***B. American Airlines**

Mailing Address 6928 Airport Blvd

City  
SacramentoState  
CAZip Code  
95837-1109Purpose of Disbursement  
Travel and Meetings

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

394.48

Transaction ID : 501247893

☒ Memo Item \***C. AT&T Store Sacramento**Mailing Address 547 L St  
Ste 1066ECity  
SacramentoState  
CAZip Code  
95814-3318Purpose of Disbursement  
Telephone Service

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

276.12

Transaction ID : 501247921

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

0.00

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

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

PAGE 58 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. Canva**

Mailing Address 600 California St

City  
San FranciscoState  
CAZip Code  
94108-2704Purpose of Disbursement  
Software

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

12.99

Transaction ID : 501247904

☒ Memo Item \***B. Canva**

Mailing Address 600 California St

City  
San FranciscoState  
CAZip Code  
94108-2704Purpose of Disbursement  
Subscription

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

14.99

Transaction ID : 501247919

☒ Memo Item \***C. City of Sacramento Parking Services**Mailing Address 300 Richards Blvd  
FI 2City  
SacramentoState  
CAZip Code  
95811-0218Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

220.00

Transaction ID : 501247902

☒ Memo Item \*

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

0.00

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

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

PAGE 59 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. City of Sacramento Parking Services**Mailing Address 300 Richards Blvd  
FI 2City  
SacramentoState  
CAZip Code  
95811-0218Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

80.00

Transaction ID : 501247917

☒ Memo Item \***B. City of Sacramento Parking Services**Mailing Address 300 Richards Blvd  
FI 2City  
SacramentoState  
CAZip Code  
95811-0218Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

80.00

Transaction ID : 501247920

☒ Memo Item \***C. Courtyard**

Mailing Address 72 Grove St

City  
WorcesterState  
MAZip Code  
01605-2628Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

525.32

Transaction ID : 501247923

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

0.00

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

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

PAGE 60 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. Extra Space**

Mailing Address 1240 Mount Olivet Rd NE

City  
WashingtonState  
DCZip Code  
20002-7801Purpose of Disbursement  
Storage

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

396.20

Transaction ID : 501247925

☒ Memo Item \***B. Lyft**Mailing Address 185 Berry St  
Ste 5000City  
San FranciscoState  
CAZip Code  
94107-2503Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

10.90

Transaction ID : 501247885

☒ Memo Item \***C. Lyft**Mailing Address 185 Berry St  
Ste 5000City  
San FranciscoState  
CAZip Code  
94107-2503Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

8.10

Transaction ID : 501247894

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

0.00

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

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

PAGE 61 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. Sirius XM**

Mailing Address 1221 Avenue of the Americas

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 20  |   | 2025    |

City  
New YorkState  
NYZip Code  
10020-1001

FEC Identification Number

C

Purpose of Disbursement  
Subscription

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

24.98

Transaction ID : 501247910

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address 3631 Truxel Rd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 20  |   | 2025    |

City  
SacramentoState  
CAZip Code  
95834-3604

FEC Identification Number

C

Purpose of Disbursement  
Office Expense

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

276.85

Transaction ID : 501247903

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Starlink Internet**Mailing Address 320 E Clayton St  
# 501A

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 20  |   | 2025    |

City  
AthensState  
GAZip Code  
30601-2765

FEC Identification Number

C

Purpose of Disbursement  
Subscription

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

120.00

Transaction ID : 501247918

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

0.00

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

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

PAGE 62 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. Uber**Mailing Address 1455 Market St  
FI 11City  
San FranciscoState  
CAZip Code  
94103-1355Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

32.95

Transaction ID : 501247900

☒ Memo Item \***B. Uber**Mailing Address 1455 Market St  
FI 11City  
San FranciscoState  
CAZip Code  
94103-1355Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

24.98

Transaction ID : 501247901

☒ Memo Item \***C. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Refund

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

- 1398.48

Transaction ID : 501247879

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

0.00

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

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

PAGE 63 OF 83

|  |                             |                              |                              |
|--|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Refund

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

- 1718.49

Transaction ID : 501247880

☒ Memo Item \***B. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Refund

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

- 903.49

Transaction ID : 501247881

☒ Memo Item \***C. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Refund

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

- 1398.48

Transaction ID : 501247882

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

0.00

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

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

PAGE 64 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Travel and Meetings

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1398.48

Transaction ID : 501247883

☒ Memo Item \***B. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Travel and Meetings

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1113.49

Transaction ID : 501247884

☒ Memo Item \***C. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

11.20

Transaction ID : 501247888

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

0.00

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



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

PAGE 65 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Travel and Meetings

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1914.48

Transaction ID : 501247897

☒ Memo Item \***B. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Travel and Meetings

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1914.48

Transaction ID : 501247898

☒ Memo Item \***C. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

11.20

Transaction ID : 501247943

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

0.00

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

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

PAGE 66 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. USPS.com**

Mailing Address 475 Lenfant Plz SW

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 20  |   | 2025    |

City  
WashingtonState  
DCZip Code  
20260-0004

FEC Identification Number

C

Purpose of Disbursement  
Postage and Mailing Services

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

94.00

Transaction ID : 501247878

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Bank of America Commercial Card**

Mailing Address PO Box 15796

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 13  |   | 2025    |

City  
WilmingtonState  
DEZip Code  
19886-5796

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Payment: See Below

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

8194.08

Transaction ID : 501250725

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. AT&T Store Sacramento**Mailing Address 547 L St  
Ste 1066E

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 13  |   | 2025    |

City  
SacramentoState  
CAZip Code  
95814-3318

FEC Identification Number

C

Purpose of Disbursement  
Telephone Service

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

285.74

Transaction ID : 501250761

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

8194.08

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

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

PAGE 67 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. Canva**

Mailing Address 600 California St

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

City  
San FranciscoState  
CAZip Code  
94108-2704

FEC Identification Number

C

Purpose of Disbursement  
Software

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

14.99

Transaction ID : 501250752

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Canva**

Mailing Address 600 California St

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

City  
San FranciscoState  
CAZip Code  
94108-2704

FEC Identification Number

C

Purpose of Disbursement  
Software

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

12.99

Transaction ID : 501250753

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. City of Sacramento Parking Services**Mailing Address 300 Richards Blvd  
FI 2

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

City  
SacramentoState  
CAZip Code  
95811-0218

FEC Identification Number

C

Purpose of Disbursement  
Travel Expenses

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

80.00

Transaction ID : 501250759

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

0.00

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

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

PAGE 68 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. Extra Space**

Mailing Address 1240 Mount Olivet Rd NE

City  
WashingtonState  
DCZip Code  
20002-7801Purpose of Disbursement  
Storage

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

396.20

Transaction ID : 501250754

☒ Memo Item \***B. Exxon Mobil**

Mailing Address 5959 Las Colinas Blvd

City  
IrvingState  
TXZip Code  
75039-4202Purpose of Disbursement  
Travel Expenses

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

117.20

Transaction ID : 501250746

☒ Memo Item \***C. Il Pastaio Ristorante**

Mailing Address 400 N Canon Dr

City  
Beverly HillsState  
CAZip Code  
90210-4820Purpose of Disbursement  
Catering

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : 501250735

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

0.00

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

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

PAGE 69 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. Lyft**Mailing Address 185 Berry St  
Ste 5000City  
San FranciscoState  
CAZip Code  
94107-2503Purpose of Disbursement  
Travel Expenses

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

15.90

Transaction ID : 501250758

☒ Memo Item \***B. Osteria Morini**

Mailing Address 301 Water St SE

City  
WashingtonState  
DCZip Code  
20003-3734Purpose of Disbursement  
Catering

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

222.90

Transaction ID : 501250737

☒ Memo Item \***C. Osteria Morini**

Mailing Address 301 Water St SE

City  
WashingtonState  
DCZip Code  
20003-3734Purpose of Disbursement  
Catering

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1032.00

Transaction ID : 501250738

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

0.00

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

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

PAGE 70 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. Osteria Morini**

Mailing Address 301 Water St SE

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

City  
WashingtonState  
DCZip Code  
20003-3734

FEC Identification Number

C

Purpose of Disbursement  
Catering

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

600.00

Transaction ID : 501250741

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Sirius XM**

Mailing Address 1221 Avenue of the Americas

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

City  
New YorkState  
NYZip Code  
10020-1001

FEC Identification Number

C

Purpose of Disbursement  
Software

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

24.98

Transaction ID : 501250763

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Starlink Internet**Mailing Address 320 E Clayton St  
# 501A

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

City  
AthensState  
GAZip Code  
30601-2765

FEC Identification Number

C

Purpose of Disbursement  
Software

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

120.00

Transaction ID : 501250762

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

0.00

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

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

PAGE 71 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Refund

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

- 1398.48

Transaction ID : 501250713

☒ Memo Item \***B. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
refunds

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

- 1914.48

Transaction ID : 501250714

☒ Memo Item \***C. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Travel and Meetings

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2646.18

Transaction ID : 501250715

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

0.00

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

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

PAGE 72 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Refund

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

- 2636.48

Transaction ID : 501250716

☒ Memo Item \***B. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Refund

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

- 2636.48

Transaction ID : 501250717

☒ Memo Item \***C. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Refund

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

- 676.00

Transaction ID : 501250718

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

0.00

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



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

PAGE 73 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Refund

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|   |                                  |
|---|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

- 400.00

Transaction ID : 501250721

☒ Memo Item \*

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Travel and Meetings

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|   |                                  |
|---|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1994.48

Transaction ID : 501250722

☒ Memo Item \*

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Travel and Meetings

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|   |                                  |
|---|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

676.00

Transaction ID : 501250723

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

0.00

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

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

PAGE 74 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address PO Box 66100

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

City  
ChicagoState  
ILZip Code  
60666-0097

FEC Identification Number

C

Purpose of Disbursement  
Travel and Meetings

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1994.48

Transaction ID : 501250724

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address PO Box 66100

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

City  
ChicagoState  
ILZip Code  
60666-0097

FEC Identification Number

C

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

- 340.00

Transaction ID : 501250726

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address PO Box 66100

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

City  
ChicagoState  
ILZip Code  
60666-0097

FEC Identification Number

C

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

- 1222.77

Transaction ID : 501250727

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

0.00

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

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

PAGE 75 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Refund

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

- 1866.99

Transaction ID : 501250728

☒ Memo Item \*

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Travel and Meetings

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1187.88

Transaction ID : 501250729

☒ Memo Item \*

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Travel and Meetings

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2636.48

Transaction ID : 501250730

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

0.00

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

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

PAGE 76 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Travel and Meetings

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2120.00

Transaction ID : 501250732

☒ Memo Item \***B. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Travel and Meetings

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

400.00

Transaction ID : 501250733

☒ Memo Item \***C. United Airlines**

Mailing Address PO Box 66100

City  
ChicagoState  
ILZip Code  
60666-0097Purpose of Disbursement  
Travel and Meetings

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2636.48

Transaction ID : 501250767

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

0.00

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

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

PAGE 77 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address PO Box 66100

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 1 | 3 | / | 2 | 0 | 2 | 5 |

City  
ChicagoState  
ILZip Code  
60666-0097

FEC Identification Number

C

Purpose of Disbursement  
Travel and Meetings

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

636.48

Transaction ID : 501251900

☒ Memo Item \*

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2026

|   |                                  |
|---|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**B. First Data Merchant Services**

Mailing Address 6200 S Quebec St

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 0 | 2 | / | 2 | 0 | 2 | 5 |

City  
Greenwood VillageState  
COZip Code  
80111-4720

FEC Identification Number

C

Purpose of Disbursement  
Merchant Fees

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

74.95

Transaction ID : 501245674

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2026

|   |                                  |
|---|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**C. First Data Merchant Services**

Mailing Address 6200 S Quebec St

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 0 | 2 | / | 2 | 0 | 2 | 5 |

City  
Greenwood VillageState  
COZip Code  
80111-4720

FEC Identification Number

C

Purpose of Disbursement  
Merchant Fees

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

19.95

Transaction ID : 501245675

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2026

|   |                                  |
|---|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

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

94.90

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

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

PAGE 78 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. First Data Merchant Services**

Mailing Address 6200 S Quebec St

City  
Greenwood VillageState  
COZip Code  
80111-4720Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 2 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

74.95

Transaction ID : 501247030

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. First Data Merchant Services**

Mailing Address 6200 S Quebec St

City  
Greenwood VillageState  
COZip Code  
80111-4720Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 2 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

19.95

Transaction ID : 501247031

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. First Data Merchant Services**

Mailing Address 6200 S Quebec St

City  
Greenwood VillageState  
COZip Code  
80111-4720Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 4 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

74.95

Transaction ID : 501251342

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

169.85

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

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

PAGE 79 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. First Data Merchant Services**

Mailing Address 6200 S Quebec St

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 4 |   | 2 | 0 | 2 | 5 |

City  
Greenwood VillageState  
COZip Code  
80111-4720

FEC Identification Number

C

Purpose of Disbursement  
Merchant Fees

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

19.95

Transaction ID : 501251343

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2026

|   |                                  |
|---|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**B. National Democratic Club**

Mailing Address 30 Ivy St SE

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 5 |   | 2 | 0 | 2 | 5 |

City  
WashingtonState  
DCZip Code  
20003-4006

FEC Identification Number

C

Purpose of Disbursement  
Event/Tickets

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

960.00

Transaction ID : 501247032

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2026

|   |                                  |
|---|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**C. NGP VAN, Inc.**

Mailing Address PO Box 392264

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 4 |   | 2 | 0 | 2 | 5 |

City  
PittsburghState  
PAZip Code  
15251-9264

FEC Identification Number

C

Purpose of Disbursement  
Software

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1425.00

Transaction ID : 501245676

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2026

|   |                                  |
|---|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

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

2404.95

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

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

PAGE 80 OF 83

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. Paychex**Mailing Address 3060 Williams Dr  
Ste 200City  
FairfaxState  
VAZip Code  
22031-4642Purpose of Disbursement  
Employee Payroll

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 5 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

30.00

Transaction ID : 501251349

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Paychex**Mailing Address 3060 Williams Dr  
Ste 200City  
FairfaxState  
VAZip Code  
22031-4642Purpose of Disbursement  
Employee Payroll

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

76.00

Transaction ID : 501251350

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Paychex**Mailing Address 3060 Williams Dr  
Ste 200City  
FairfaxState  
VAZip Code  
22031-4642Purpose of Disbursement  
Employee Payroll

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

58.00

Transaction ID : 501251351

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

164.00

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



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

PAGE 81 OF 83

|  |                             |                              |                              |
|--|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. Political Compliance Management Services**Mailing Address 910 17th St NW  
Ste 1050City  
WashingtonState  
DCZip Code  
20006-2623Purpose of Disbursement  
Accounting Services

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 1 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1900.73

Transaction ID : 501247035

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Political Compliance Management Services**Mailing Address 910 17th St NW  
Ste 1050City  
WashingtonState  
DCZip Code  
20006-2623Purpose of Disbursement  
Accounting Services

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1697.67

Transaction ID : 501247036

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Political Compliance Management Services**Mailing Address 910 17th St NW  
Ste 1050City  
WashingtonState  
DCZip Code  
20006-2623Purpose of Disbursement  
Accounting Services

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1863.23

Transaction ID : 501251352

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

5461.63

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

35248.30

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

PAGE 82 OF 83

|                              |                              |                              |  |
|------------------------------|------------------------------|------------------------------|--|
| <input type="checkbox"/> 17  | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b           |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input checked="" type="checkbox"/> 21 |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. ADAM GRAY FOR CONGRESS**

Mailing Address PO Box 1229

City  
MercedState  
CAZip Code  
95341-1229Purpose of Disbursement  
ContributionCandidate Name  
GRAY, ADAM C., , ,Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 13

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 20  |   | 2025    |

FEC Identification Number

☒ C00801431

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Transaction ID : 501253069

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DCCC**Mailing Address 430 S Capitol St SE  
FI 2City  
WashingtonState  
DCZip Code  
20003-4024Purpose of Disbursement  
Unlimited TransferCandidate Name  
DCCCCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 11  |   | 2025    |

FEC Identification Number

☒ C00000935

Amount of Each Disbursement this Period

|          |
|----------|
| 50000.00 |
|----------|

Transaction ID : 501251339

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Democratic Party of Contra Costa County**

Mailing Address PO Box 4112

City  
Walnut CreekState  
CAZip Code  
94596-0112Purpose of Disbursement  
DonationCandidate Name  
Democratic Party of Contra Costa CountyCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 24  |   | 2025    |

FEC Identification Number

☒ C00456764

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Transaction ID : 501251341

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

|          |
|----------|
| 52000.00 |
|----------|

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

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

PAGE 83 OF 83

|                              |                              |                              |  |
|------------------------------|------------------------------|------------------------------|--|
| <input type="checkbox"/> 17  | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b           |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input checked="" type="checkbox"/> 21 |

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)

Garamendi for Congress

Full Name (Last, First, Middle Initial)

**A. DEREK TRAN FOR CONGRESS**Mailing Address 10441 Stanford Ave  
Unit 395City  
Garden GroveState  
CAZip Code  
92842-5222Purpose of Disbursement  
ContributionCandidate Name  
TRAN, DEREK, , ,Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 45

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 11  |   | 2025    |

FEC Identification Number

C C00851790

Amount of Each Disbursement this Period

1000.00

Transaction ID : 501251340

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GEORGE WHITESIDES FOR CONGRESS**

Mailing Address PO Box 221776

City  
NewhallState  
CAZip Code  
91322-1776Purpose of Disbursement  
ContributionCandidate Name  
WHITESIDES, GEORGE, , ,Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 27

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 20  |   | 2025    |

FEC Identification Number

C C00834028

Amount of Each Disbursement this Period

1000.00

Transaction ID : 501253070

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Napa-Solano Counties Central Labor Council**

Mailing Address 2540 N Watney Way

City  
FairfieldState  
CAZip Code  
94533-6724Purpose of Disbursement  
Event Sponsorship

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 30  |   | 2025    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : 501251346

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

3500.00

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

55500.00