

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

FRIENDS OF JERLILIA RYANS FOR CONGRESS

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2026 To: M M / D D / Y Y Y Y 03 / 31 / 2026

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	0.00	0.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	8477.26	8477.26
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	8477.26	8477.26
8. Cash on Hand at Close of Reporting Period (from Line 27)	- 13672.57	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

FRIENDS OF JERLILIA RYANS FOR CONGRESS

Report Covering the Period: From: MM / DD / YYYY 01 / 01 / 2026 To: MM / DD / YYYY 03 / 31 / 2026

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	0.00
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	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	0.00	0.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	8477.26	8477.26
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	5195.31	5195.31
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	13672.57	13672.57

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	0.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	13672.57
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	- 13672.57

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 5 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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)
FRIENDS OF JERLILIA RYANS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement MM / DD / YYYY 01 / 13 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 235.00
Purpose of Disbursement ACTIVE CAMPAIGN		Category/ Type 001	Transaction ID : SB17.4108
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		<input type="checkbox"/> Memo Item	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

Full Name (Last, First, Middle Initial) B. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement MM / DD / YYYY 01 / 13 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 3500.00
Purpose of Disbursement APOLLO ARTISITRY WEB DESIGNER		Category/ Type 001	Transaction ID : SB17.4110
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		<input type="checkbox"/> Memo Item	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

Full Name (Last, First, Middle Initial) C. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement MM / DD / YYYY 01 / 14 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 17.54
Purpose of Disbursement SUBWAY-STAFF INTERVIEW		Category/ Type 001	Transaction ID : SB17.4111
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		<input type="checkbox"/> Memo Item	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

SUBTOTAL of Disbursements This Page (optional).....▶	3752.54
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF JERLILIA RYANS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 100.00
Purpose of Disbursement NYLA SANDERS CONTRACT WORK-DIGITAL		Category/ Type	Transaction ID : SB17.4112
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS			<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

Full Name (Last, First, Middle Initial) B. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 79.74
Purpose of Disbursement UCSD-INTERVIEW STAFF LUNCH		Category/ Type 001	Transaction ID : SB17.4113
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS			<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

Full Name (Last, First, Middle Initial) C. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 123.16
Purpose of Disbursement WALMART=OFFICE SUPPLIES,TONER		Category/ Type 001	Transaction ID : SB17.4114
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS			<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

SUBTOTAL of Disbursements This Page (optional).....▶	302.90
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 Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF JERLILIA RYANS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 140.00
Purpose of Disbursement NYLA SANDERS CONTRACT WORK DIGITAL		Category/ Type 001	Transaction ID : SB17.4116
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		<input type="checkbox"/> Memo Item	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

Full Name (Last, First, Middle Initial) B. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 159.00
Purpose of Disbursement YEARLY SUBSCRIPTION TO ZOOM		Category/ Type 001	Transaction ID : SB17.4115
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		<input type="checkbox"/> Memo Item	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

Full Name (Last, First, Middle Initial) C. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 103.00
Purpose of Disbursement T-MOBILE CELL		Category/ Type	Transaction ID : SB17.4118
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		<input type="checkbox"/> Memo Item	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

SUBTOTAL of Disbursements This Page (optional).....▶	402.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 21			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
FRIENDS OF JERLILIA RYANS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2026	
Mailing Address P O BOX 261506			FEC Identification Number C C00726323	
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 137.00	
Purpose of Disbursement VOICE AND VIEWPOINT ADVERTISEMENT		Category/ Type 004	Transaction ID : SB17.4120	
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: CA District: 48				

Full Name (Last, First, Middle Initial) B. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2026	
Mailing Address P O BOX 261506			FEC Identification Number C C00726323	
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 115.74	
Purpose of Disbursement RALPHS LUNCH PREP FOR STAFF MEETING		Category/ Type 001	Transaction ID : SB17.4121	
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: CA District: 48				

Full Name (Last, First, Middle Initial) C. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2026	
Mailing Address P O BOX 261506			FEC Identification Number C C00726323	
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 186.11	
Purpose of Disbursement COSTCO SUPPLIES/EQUIPMENT		Category/ Type 001	Transaction ID : SB17.4126	
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: CA District: 48				

SUBTOTAL of Disbursements This Page (optional).....▶	438.85
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 Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF JERLILIA RYANS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement MM / DD / YYYY 02 / 03 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 132.32
Purpose of Disbursement INDEED HIRING		Category/Type 001	Transaction ID : SB17.4127
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		<input type="checkbox"/> Memo Item	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

Full Name (Last, First, Middle Initial) B. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement MM / DD / YYYY 02 / 08 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 100.00
Purpose of Disbursement DONATION TO CHARITY BIG TEN		Category/Type 001	Transaction ID : SB17.4132
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		<input type="checkbox"/> Memo Item	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

Full Name (Last, First, Middle Initial) C. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement MM / DD / YYYY 02 / 09 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 100.00
Purpose of Disbursement APOLLO ARTISTRY-HOISTING		Category/Type 001	Transaction ID : SB17.4129
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		<input type="checkbox"/> Memo Item	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

SUBTOTAL of Disbursements This Page (optional).....▶	332.32
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF JERLILIA RYANS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement MM / DD / YYYY 02 / 09 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 327.29
Purpose of Disbursement T-MOBILE CELL		Category/ Type 001	Transaction ID : SB17.4130
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		Memo Item <input type="checkbox"/>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

Full Name (Last, First, Middle Initial) B. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement MM / DD / YYYY 02 / 10 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 15.00
Purpose of Disbursement BANK SERVICE CHARGE		Category/ Type 001	Transaction ID : SB17.4131
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		Memo Item <input type="checkbox"/>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

Full Name (Last, First, Middle Initial) C. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement MM / DD / YYYY 02 / 11 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 235.00
Purpose of Disbursement ACTIVE CAMPAIGN		Category/ Type 001	Transaction ID : SB17.4133
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		Memo Item <input type="checkbox"/>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

SUBTOTAL of Disbursements This Page (optional).....▶	577.29
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF JERLILIA RYANS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement MM / DD / YYYY 02 / 17 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 161.74
Purpose of Disbursement WALMART OFFICE SUPPLIES-TONER		Category/Type 001	Transaction ID : SB17.4134
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS			<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

Full Name (Last, First, Middle Initial) B. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement MM / DD / YYYY 02 / 18 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 21.23
Purpose of Disbursement WEB NETWORK		Category/Type 001	Transaction ID : SB17.4135
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS			<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

Full Name (Last, First, Middle Initial) C. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement MM / DD / YYYY 02 / 19 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 91.53
Purpose of Disbursement COSTCO-EQUIPMENT-SUPPLIES		Category/Type 001	Transaction ID : SB17.4136
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS			<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

SUBTOTAL of Disbursements This Page (optional).....▶	274.50
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF JERLILIA RYANS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRIENDS OF JERLILIA RYANS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 09 / 2026
Mailing Address P O BOX 261506		FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126
Purpose of Disbursement BANK SERVICE CHARGE	Category/ Type 001	Amount of Each Disbursement this Period 15.00
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: CA District: 48	Transaction ID : SB17.4153 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. FRIENDS OF JERLILIA RYANS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 11 / 2026
Mailing Address P O BOX 261506		FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126
Purpose of Disbursement ACTIVE CAMPAIGN	Category/ Type 001	Amount of Each Disbursement this Period 235.00
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: CA District: 48	Transaction ID : SB17.4154 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FRIENDS OF JERLILIA RYANS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 12 / 2026
Mailing Address P O BOX 261506		FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126
Purpose of Disbursement NYLA SANDERS CONTRACT DIGITAL	Category/ Type 001	Amount of Each Disbursement this Period 225.00
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: CA District: 48	Transaction ID : SB17.4155 <input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	475.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF JERLILIA RYANS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRIENDS OF JERLILIA RYANS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 13 / 2026
Mailing Address P O BOX 261506		FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126
Purpose of Disbursement NYLA SANDERS CONTRACT WORK		Category/ Type 001
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		Amount of Each Disbursement this Period 10.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4164
State: CA District: 48		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. FRIENDS OF JERLILIA RYANS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 16 / 2026
Mailing Address P O BOX 261506		FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126
Purpose of Disbursement VONS LUNCH PREPE FOR STAFF MEETING		Category/ Type 001
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		Amount of Each Disbursement this Period 66.24
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4165
State: CA District: 48		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. FRIENDS OF JERLILIA RYANS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 18 / 2026
Mailing Address P O BOX 261506		FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126
Purpose of Disbursement WEB NETWORK		Category/ Type 001
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		Amount of Each Disbursement this Period 22.97
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4170
State: CA District: 48		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	99.21
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF JERLILIA RYANS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement MM / DD / YYYY 03 / 18 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 102.50
Purpose of Disbursement NYLA CONTRACT DIGITAL		Category/ Type 001	Transaction ID : SB17.4171
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		<input type="checkbox"/> Memo Item	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

Full Name (Last, First, Middle Initial) B. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement MM / DD / YYYY 03 / 30 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 29.00
Purpose of Disbursement TELEPROMPTER		Category/ Type 001	Transaction ID : SB17.4138
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		<input type="checkbox"/> Memo Item	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

Full Name (Last, First, Middle Initial) C. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement MM / DD / YYYY 03 / 30 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 150.00
Purpose of Disbursement ROBOCENT		Category/ Type	Transaction ID : SB17.4139
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		<input type="checkbox"/> Memo Item	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

SUBTOTAL of Disbursements This Page (optional).....▶	281.50
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF JERLILIA RYANS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 250.00
Purpose of Disbursement APOLLO ARTISTRY WEB DESIGNER		Category/ Type 001	Transaction ID : SB17.4140
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS			<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

Full Name (Last, First, Middle Initial) B. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 850.00
Purpose of Disbursement CAR REPAIR AUTO SHOP		Category/ Type	Transaction ID : SB17.4141
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS			<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

Full Name (Last, First, Middle Initial) C. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 29.00
Purpose of Disbursement Q R CODE SUBSCRIPTION		Category/ Type 001	Transaction ID : SB17.4142
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS			<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

SUBTOTAL of Disbursements This Page (optional).....▶	1129.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF JERLILIA RYANS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement MM / DD / YYYY 03 / 31 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 9.99
Purpose of Disbursement CHATGPT		Category/ Type 001	Transaction ID : SB17.4143
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		Memo Item <input type="checkbox"/>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	9.99
TOTAL This Period (last page this line number only).....▶	8075.10

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF JERLILIA RYANS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRIENDS OF JERLILIA RYANS FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2026
Mailing Address P O BOX 261506		FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126
Purpose of Disbursement PAYCHEX EMPLOYEE PAYROLL	Category/ Type 001	Amount of Each Disbursement this Period 455.26
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB21.4124
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 48	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. FRIENDS OF JERLILIA RYANS FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2026
Mailing Address P O BOX 261506		FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126
Purpose of Disbursement APOLLO ARTISTRY HOSITING	Category/ Type 001	Amount of Each Disbursement this Period 100.00
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB21.4147
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 48	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. FRIENDS OF JERLILIA RYANS FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2026
Mailing Address P O BOX 261506		FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126
Purpose of Disbursement PAYCHEX EIB INVOICE	Category/ Type 001	Amount of Each Disbursement this Period 37.91
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB21.4122
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 48	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	593.17
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF JERLILIA RYANS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement NYLA SANDERS CONTRACT WORK		Category/ Type 001	Transaction ID : SB21.4144
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		<input type="checkbox"/> Memo Item	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

Full Name (Last, First, Middle Initial) B. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 86.00
Purpose of Disbursement AMTRUST WORKMAN COMP INSURANCE		Category/ Type 001	Transaction ID : SB21.4145
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		<input type="checkbox"/> Memo Item	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

Full Name (Last, First, Middle Initial) C. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 164.86
Purpose of Disbursement WALMART OFFICE SUPPLIES		Category/ Type 001	Transaction ID : SB21.4146
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		<input type="checkbox"/> Memo Item	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

SUBTOTAL of Disbursements This Page (optional).....▶	2250.86
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF JERLILIA RYANS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRIENDS OF JERLILIA RYANS FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2026
Mailing Address P O BOX 261506		FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126
Purpose of Disbursement POLO LOCO STAFF LUNCH MEEATING	Category/ Type 001	Amount of Each Disbursement this Period 57.28
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: CA District: 48	Transaction ID : SB21.4148 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. FRIENDS OF JERLILIA RYANS FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2026
Mailing Address P O BOX 261506		FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126
Purpose of Disbursement SUBWAY STAFF EVENING MEETING	Category/ Type 001	Amount of Each Disbursement this Period 12.59
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: CA District: 48	Transaction ID : SB21.4149 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FRIENDS OF JERLILIA RYANS FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2026
Mailing Address P O BOX 261506		FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126
Purpose of Disbursement PAYCHEX EMPLOYEE PAYROLL	Category/ Type 001	Amount of Each Disbursement this Period 1444.62
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: CA District: 48	Transaction ID : SB21.4150 <input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1514.49
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF JERLILIA RYANS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRIENDS OF JERLILIA RYANS FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2026
Mailing Address P O BOX 261506		FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126
Purpose of Disbursement PAYCHEX EMPLOYEE TAXES	Category/ Type 001	Amount of Each Disbursement this Period 248.63
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB21.4151
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 48	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. FRIENDS OF JERLILIA RYANS FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2026
Mailing Address P O BOX 261506		FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126
Purpose of Disbursement PAYCHEX EMPLOYEE PAYROLL	Category/ Type 001	Amount of Each Disbursement this Period 455.25
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB21.4161
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 48	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. FRIENDS OF JERLILIA RYANS FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2026
Mailing Address P O BOX 261506		FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126
Purpose of Disbursement PAYCHEX EMPLOYEE TAXES	Category/ Type 001	Amount of Each Disbursement this Period 76.50
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB21.4163
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 48	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	780.38
TOTAL This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF JERLILIA RYANS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement MM / DD / YYYY 03 / 16 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 37.91
Purpose of Disbursement PAYCHECK INVOICE		Category/ Type 001	Transaction ID : SB21.4167
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		Memo Item <input type="checkbox"/>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

Full Name (Last, First, Middle Initial) B. FRIENDS OF JERLILIA RYANS FOR CONGRESS			Date of Disbursement MM / DD / YYYY 03 / 16 / 2026
Mailing Address P O BOX 261506			FEC Identification Number C C00726323
City SAN DIEGO	State CA	Zip Code 92126	Amount of Each Disbursement this Period 18.50
Purpose of Disbursement DONUT TOUCH-FOR STAFF		Category/ Type 001	Transaction ID : SB21.4168
Candidate Name FRIENDS OF JERLILIA RYANS FOR CONGRESS		Memo Item <input type="checkbox"/>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 48			

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

SUBTOTAL of Disbursements This Page (optional).....▶	56.41
TOTAL This Period (last page this line number only).....▶	5195.31