

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

DR. KELLY ESTI FOR CONGRESS INC

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))	17655.00	30364.00
(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))	17655.00	30364.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	24002.84	27701.67
(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))	24002.84	27701.67
8. Cash on Hand at Close of Reporting Period (from Line 27)	2662.33	
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

DR. KELLY ESTI FOR CONGRESS INC

Report Covering the Period: From: / / To: / /

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).....	17500.00	19000.00
(ii) Unitemized.....	155.00	2064.00
(iii) TOTAL of contributions from individuals ▶	17655.00	21064.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	9300.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	17655.00	30364.00
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)..... ▶	17655.00	30364.00

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.....	24002.84	27701.67
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	24002.84	27701.67

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	9010.17
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	17655.00
25. SUBTOTAL (add Line 23 and Line 24).....	26665.17
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	24002.84
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2662.33

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 5 OF 9	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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)
DR. KELLY ESTI FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial)
Brotagz Media LLC

Mailing Address PO Box 82056

City Hapeville State GA Zip Code 30354

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4178

Amount of Each Receipt this Period

Memo Item
 In-kind - Campaign Media Suite

B. Full Name (Last, First, Middle Initial)
Esti, Donald, , ,

Mailing Address PO Box 82056

City Hapeville State GA Zip Code 30354

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Delta Flight Crew

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4183

Amount of Each Receipt this Period

Memo Item
 Donation

C. Full Name (Last, First, Middle Initial)
Miller, Tanya, , ,

Mailing Address 1110 Peachtree Rd St 200

City Atlanta State GA Zip Code 30309

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Self Attorney

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4157

Amount of Each Receipt this Period

Memo Item
 Donation

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="17500.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value="17500.00"/>

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 9	
	<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)
DR. KELLY ESTI FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Brotagz Media LLC			Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2026	
Mailing Address PO Box 82056			FEC Identification Number C	
City Hapeville	State GA	Zip Code 30354	Amount of Each Disbursement this Period 15000.00	
Purpose of Disbursement In-kind - Campaign Media Suite		Category/Type	Transaction ID : SB17.4180	
Candidate Name		Memo Item <input type="checkbox"/>		
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. Davis, Patrick, , ,			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2026	
Mailing Address PO Box 82056			FEC Identification Number C	
City Hapeville	State GA	Zip Code 30354	Amount of Each Disbursement this Period 585.00	
Purpose of Disbursement Data Management		Category/Type	Transaction ID : SB17.4225	
Candidate Name		Memo Item <input type="checkbox"/>		
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. Davis, Patrick, , ,			Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2026	
Mailing Address PO Box 82056			FEC Identification Number C	
City Hapeville	State GA	Zip Code 30354	Amount of Each Disbursement this Period 585.00	
Purpose of Disbursement Data Management		Category/Type	Transaction ID : SB17.4240	
Candidate Name		Memo Item <input type="checkbox"/>		
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).....▶	16170.00
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 7 OF 9			
	<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)
DR. KELLY ESTI FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Democratic Party of Georgia			Date of Disbursement MM / DD / YYYY 03 / 02 / 2026		
Mailing Address PO BOX 89202			FEC Identification Number C		
City Atlanta	State GA	Zip Code 30312	Amount of Each Disbursement this Period 5220.00		
Purpose of Disbursement Quailifying Fe		Category/ Type	Transaction ID : SB17.4241		
Candidate Name			<input type="checkbox"/> 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. Expedia			Date of Disbursement MM / DD / YYYY 01 / 27 / 2026		
Mailing Address 1111 Expedia Group			FEC Identification Number C		
City Seattle	State GA	Zip Code 98119	Amount of Each Disbursement this Period 491.52		
Purpose of Disbursement Travel Expenses		Category/ Type	Transaction ID : SB17.4231		
Candidate Name			<input type="checkbox"/> 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. Lux Clothing			Date of Disbursement MM / DD / YYYY 01 / 29 / 2026		
Mailing Address PO Box 82056			FEC Identification Number C		
City Hapeville	State GA	Zip Code 30354	Amount of Each Disbursement this Period 475.00		
Purpose of Disbursement Campaign T-shirts		Category/ Type	Transaction ID : SB17.4234		
Candidate Name			<input type="checkbox"/> 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).....▶	6186.52
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 9			
	<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)
DR. KELLY ESTI FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. Meeks, Perry, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2026
Mailing Address 1930 Monroe St		FEC Identification Number C
City Atlanta	State GA	Zip Code 30324
Purpose of Disbursement Haircut		Amount of Each Disbursement this Period 50.00
Candidate Name	Category/Type	Transaction ID : SB17.4233
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Meeks, Perry, , ,		Date of Disbursement MM / DD / YYYY 02 / 06 / 2026
Mailing Address 1930 Monroe St		FEC Identification Number C
City Atlanta	State GA	Zip Code 30324
Purpose of Disbursement Haircut		Amount of Each Disbursement this Period 50.00
Candidate Name	Category/Type	Transaction ID : SB17.4239
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Prima Atlanta		Date of Disbursement MM / DD / YYYY 01 / 26 / 2026
Mailing Address 191 14th Street		FEC Identification Number C
City Atlanta	State GA	Zip Code 30318
Purpose of Disbursement Campaign Signs		Amount of Each Disbursement this Period 825.35
Candidate Name	Category/Type	Transaction ID : SB17.4229
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	925.35
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 9	
	<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)
DR. KELLY ESTI FOR CONGRESS INC

Full Name (Last, First, Middle Initial) A. VistaPrint		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2026
Mailing Address 95 Hayden Ave		FEC Identification Number C
City Lexington	State MA	Zip Code 02421
Purpose of Disbursement Campaign Materials		Amount of Each Disbursement this Period 283.30
Candidate Name		Transaction ID : SB17.4227
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> Memo Item
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 M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> Memo Item
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).....▶	283.30
TOTAL This Period (last page this line number only).....▶	23565.17