



## SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**Mike Katz 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
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	5112.00	5112.00
(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)) .....	5112.00	5112.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	3668.00	3668.00
(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)) .....	3668.00	3668.00
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>	1440.05	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	8450.00	

**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

Mike Katz for Congress

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).....	5000.00	5000.00
(ii) Unitemized.....	112.00	112.00
(iii) TOTAL of contributions from individuals ▶	5112.00	5112.00
(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))..	5112.00	5112.00
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)..... ▶	5112.00	5112.00

**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.....	3668.00	3668.00
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 .....	3.95	3.95
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	3671.95	3671.95

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	5112.00
25. SUBTOTAL (add Line 23 and Line 24).....	5112.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	3671.95
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1440.05

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 OF 10  
(check only one)  
 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)  
**Mike Katz for Congress**

**A.** Full Name (Last, First, Middle Initial)  
Act Blue

Mailing Address PO BOX 441146

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00714725

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
100.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 18 / 2026

Transaction ID : SA11AI.4140

Amount of Each Receipt this Period  
100.00

Memo Item  
Total earmarked through conduit: limit not affected

**B.** Full Name (Last, First, Middle Initial)  
Dutra, Lisa, M., ,

Mailing Address 539 Barcelona Dr

City Fremont State CA Zip Code 94536

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

Name of Employer Occupation  
Retired

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  
03 / 05 / 2026

Transaction ID : SA11AI.4100

Amount of Each Receipt this Period  
2500.00

Memo Item  
financial contribution

**C.** Full Name (Last, First, Middle Initial)  
Grewal, Jaskiran, , ,

Mailing Address 92 Martingale Dr.

City Fremont State CA Zip Code 94539

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

Name of Employer Occupation  
Retired

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  
03 / 05 / 2026

Transaction ID : SA11AI.4102

Amount of Each Receipt this Period  
2500.00

Memo Item  
financial contribution

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

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

5000.00

5000.00

# 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 6 OF 10	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Mike Katz for Congress**

**A.** Full Name (Last, First, Middle Initial)  
Katz, Mike, , ,

Mailing Address 46 Estabrook St.

City San Leandro	State CA	Zip Code 94577
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FEC ID number of contributing federal political committee. **C** H6CA17224

Name of Employer Amazon	Occupation Security Engineer
----------------------------	---------------------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1740.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 04 / 2026

**Transaction ID : SA11D.4108**

Amount of Each Receipt this Period  
1740.00

Memo Item  
Candidate Advance: Filing Fee

**B.** Full Name (Last, First, Middle Initial)  
Katz, Mike, , ,

Mailing Address 46 Estabrook St.

City San Leandro	State CA	Zip Code 94577
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FEC ID number of contributing federal political committee. **C** H6CA17224

Name of Employer Amazon	Occupation Security Engineer
----------------------------	---------------------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 04 / 2026

**Transaction ID : SA11D.4111**

Amount of Each Receipt this Period  
10.00

Memo Item  
Candidate Advance: parking near Alameda Registrar

**C.** Full Name (Last, First, Middle Initial)  
Katz, Mike, , ,

Mailing Address 46 Estabrook St.

City San Leandro	State CA	Zip Code 94577
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FEC ID number of contributing federal political committee. **C** H6CA17224

Name of Employer Amazon	Occupation Security Engineer
----------------------------	---------------------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3641.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 06 / 2026

**Transaction ID : SA11D.4109**

Amount of Each Receipt this Period  
1891.00

Memo Item  
Candidate Advance: Candidate Statement Alameda

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	0.00
<b>TOTAL</b> 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 7 OF 10	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Mike Katz for Congress**

**A.** Full Name (Last, First, Middle Initial)  
Katz, Mike, , ,

Mailing Address 46 Estabrook St.

City San Leandro	State CA	Zip Code 94577
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FEC ID number of contributing federal political committee. **C** H6CA17224

Name of Employer Amazon	Occupation Security Engineer
----------------------------	---------------------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
12091.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 06 / 2026

**Transaction ID : SA11D.4110**

Amount of Each Receipt this Period  
8450.00

Memo Item  
Candidate Advance: Candidate Statement Santa Clara

**B.** Full Name (Last, First, Middle Initial)  
Katz, Mike, , ,

Mailing Address 46 Estabrook St.

City San Leandro	State CA	Zip Code 94577
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FEC ID number of contributing federal political committee. **C** H6CA17224

Name of Employer Amazon	Occupation Security Engineer
----------------------------	---------------------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
12096.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 06 / 2026

**Transaction ID : SA11D.4110**

Amount of Each Receipt this Period  
5.00

Memo Item  
Candidate Advance: parking near Alameda registrar

**C.** Full Name (Last, First, Middle Initial)  
Katz, Mike, , ,

Mailing Address 46 Estabrook St.

City San Leandro	State CA	Zip Code 94577
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FEC ID number of contributing federal political committee. **C** H6CA17224

Name of Employer Amazon	Occupation Security Engineer
----------------------------	---------------------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
12106.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 10 / 2026

**Transaction ID : SA11D.4113**

Amount of Each Receipt this Period  
10.00

Memo Item  
Candidate Advance: parking near bank when opening campaign bank account

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	0.00

**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 8 OF 10			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Mike Katz for Congress**

Full Name (Last, First, Middle Initial)  
**A. Alameda County Registrar of Voters**

Mailing Address 1225 Fallon St  
G-1

City Oakland State CA Zip Code 94612

Purpose of Disbursement  
Ballot Statement Fee

Candidate Name  
Mike Katz for Congress

Office Sought:  House  Senate  President  
State: CA District: 17

Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

Date of Disbursement  
M M / D D / Y Y Y Y  
03 / 06 / 2026

FEC Identification Number  
C C00943076

Amount of Each Disbursement this Period  
1891.00

Transaction ID : SB17.4125

Memo Item

Full Name (Last, First, Middle Initial)  
**B. California Secretary of State**

Mailing Address 1500 11th Street

City Sacramento State CA Zip Code 95814

Purpose of Disbursement  
Candidate Filing Fee

Candidate Name  
Mike Katz for Congress

Office Sought:  House  Senate  President  
State: CA District: 17

Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

Date of Disbursement  
M M / D D / Y Y Y Y  
03 / 04 / 2026

FEC Identification Number  
C C00943076

Amount of Each Disbursement this Period  
1740.00

Transaction ID : SB17.4122

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Katz, Mike, , ,**

Mailing Address 46 Estabrook St.

City San Leandro State CA Zip Code 94577

Purpose of Disbursement  
Reimbursement filing fee, see below

Candidate Name  
Mike Katz for Congress

Office Sought:  House  Senate  President  
State: CA District: 17

Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

Date of Disbursement  
M M / D D / Y Y Y Y  
03 / 31 / 2026

FEC Identification Number  
C C00943076

Amount of Each Disbursement this Period  
1740.00

Transaction ID : SB17.4117

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 1740.00

**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 9 OF 10
	<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)  
**Mike Katz for Congress**

Full Name (Last, First, Middle Initial) <b>A. Katz, Mike, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2026
Mailing Address 46 Estabrook St.		FEC Identification Number C C00943076
City San Leandro	State CA	Zip Code 94577
Purpose of Disbursement Reimbursement Ballot Statement Alameda, see below	Category/ Type 001	Amount of Each Disbursement this Period 1891.00
Candidate Name Mike Katz for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17.4123
State: CA District: 17	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Katz, Mike, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2026
Mailing Address 46 Estabrook St.		FEC Identification Number C C00943076
City San Leandro	State CA	Zip Code 94577
Purpose of Disbursement Reimbursement parking fees	Category/ Type 002	Amount of Each Disbursement this Period 25.00
Candidate Name Mike Katz for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17.4127
State: CA District: 17	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1916.00
<b>TOTAL</b> This Period (last page this line number only).....▶	3656.00

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Mike Katz for Congress**

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

Katz, Mike, , ,

Nature of Debt (Purpose):

Candidate Advance for Ballot Statement, Santa Clara County

Mailing Address 46 Estabrook St.

City

San Leandro

State

CA

Zip Code

94577

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4128

Amount Incurred This Period

8450.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8450.00

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

8450.00

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

8450.00

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

0.00

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

8450.00