



## SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**We the People for Laura Dunn**

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2025 To: M M / D D / Y Y Y Y 12 / 31 / 2025

	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))....	55123.68	55123.68
(b) Total Contribution Refunds (from Line 20(d)) .....	100.00	100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	55023.68	55023.68
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	35892.07	35892.07
(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)) .....	35892.07	35892.07
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>	<b>19131.61</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<b>3000.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<b>24018.66</b>	

**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

**We the People for Laura Dunn**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	25300.00	25300.00
(ii) Unitemized.....	11942.00	11942.00
(iii) TOTAL of contributions from individuals ▶	37242.00	37242.00
(b) Political Party Committees.....	1000.00	1000.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	16881.68	16881.68
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	55123.68	55123.68
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. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	55123.68	55123.68

**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.....	35892.07	35892.07
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 .....	100.00	100.00
(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)).....	100.00	100.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	35992.07	35992.07

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	55123.68
25. SUBTOTAL (add Line 23 and Line 24).....	55123.68
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	35992.07
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	19131.61

# 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 37  
(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)  
**We the People for Laura Dunn**

**A.** Full Name (Last, First, Middle Initial)  
Abrams, Brian, , ,

Mailing Address 219 E. Lake Shore Dr 7CD

City Chicago	State IL	Zip Code 60611
-----------------	-------------	-------------------

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

Name of Employer Hulabram Partners LLP	Occupation CEO
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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  
10 / 20 / 2025

**Transaction ID : SA11AI.4435**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
Agnes, Melissa, , ,

Mailing Address 45-45 Center Blvd 1010

City Long Island City	State NY	Zip Code 11109
--------------------------	-------------	-------------------

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

Name of Employer Crisis Ready Institute pbc	Occupation Entrepreneur
--	----------------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 30 / 2025

**Transaction ID : SA11AI.4419**

Amount of Each Receipt this Period  
250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Arreaza, Juan, , ,

Mailing Address 6521A 24th Ave NE

City Seattle	State WA	Zip Code 98115
-----------------	-------------	-------------------

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

Name of Employer Oshkosh Corporation	Occupation Lawyer
---	----------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 08 / 2025

**Transaction ID : SA11AI.4423**

Amount of Each Receipt this Period  
250.00

Memo Item

**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 Page

FOR LINE NUMBER: (check only one)		PAGE 6 OF 37	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**We the People for Laura Dunn**

**A.** Full Name (Last, First, Middle Initial)  
Baumstein, Sonya, , ,

Mailing Address 522 McMinn Rd

City Port Townsend	State WA	Zip Code 98368
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FEC ID number of contributing federal political committee.

Name of Employer Decentralized Wireless Foundation	Occupation Accountant
---	--------------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.4461**

Amount of Each Receipt this Period

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
Bogren, Richard, , ,

Mailing Address 300 S Cortez

City New Orleans	State LA	Zip Code 70119
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FEC ID number of contributing federal political committee.

Name of Employer Not Employed	Occupation Not Employed
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Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.4447**

Amount of Each Receipt this Period

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Bourdon, James, , ,

Mailing Address 177 Shore Street

City Falmouth	State MA	Zip Code 02540
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FEC ID number of contributing federal political committee.

Name of Employer Not Employed	Occupation Not Employed
----------------------------------	----------------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.4443**

Amount of Each Receipt this Period

Memo Item

**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)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 37  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**We the People for Laura Dunn**

**A.** Full Name (Last, First, Middle Initial)  
Caruso, Michael, , ,

Mailing Address 3396 Village Circle Dr.

City: Traverse City State: MI Zip Code: 49686-6341

FEC ID number of contributing federal political committee: C

Name of Employer: Nicolet Bank Occupation: Banking

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  
10 / 23 / 2025

Transaction ID : SA11AI.4441

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
Cassubhai, Hozaifa, , ,

Mailing Address 1018 Grandview ave.

City: Westfield State: NJ Zip Code: 07090

FEC ID number of contributing federal political committee: C

Name of Employer: Bailey Duquette PC Occupation: Attorney

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 05 / 2025

Transaction ID : SA11AI.4429

Amount of Each Receipt this Period  
250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Clune, John, , ,

Mailing Address 2594 S Kilmer St

City: Lakewood State: CO Zip Code: 80228

FEC ID number of contributing federal political committee: C

Name of Employer: Hbc Occupation: Atty

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 30 / 2025

Transaction ID : SA11AI.4417

Amount of Each Receipt this Period  
250.00

Memo Item

**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 Page

FOR LINE NUMBER: PAGE 8 OF 37  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**We the People for Laura Dunn**

**A.** Full Name (Last, First, Middle Initial)  
Davis, Erin, , ,

Mailing Address 1621 Bennington Dr

City Mishawaka State IN Zip Code 46544

FEC ID number of contributing federal political committee. C

Name of Employer Airborne Systems Occupation Vice President of Finance

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  
10 / 23 / 2025

Transaction ID : SA11AI.4457

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
Dhami, Sukhman, , ,

Mailing Address 168 MULBERRY ST #B3

City NEW YORK State NY Zip Code 10013

FEC ID number of contributing federal political committee. C

Name of Employer Ensaaf Occupation Lawyer

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 13 / 2025

Transaction ID : SA11AI.4425

Amount of Each Receipt this Period  
250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Dorsey, Cheryl, , ,

Mailing Address 2125 14th Street NW Unit 320W

City Washington State DC Zip Code 20009

FEC ID number of contributing federal political committee. C

Name of Employer Echoing Green Occupation Nonprofit Executive

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  
12 / 08 / 2025

Transaction ID : SA11AI.4453

Amount of Each Receipt this Period  
500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00

**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 9 OF 37	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**We the People for Laura Dunn**

**A.** Full Name (Last, First, Middle Initial)  
Doud, Lucas, , ,

Mailing Address 10758 Topper Rd

City Blue Mounds	State WI	Zip Code 53517
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self employed	Occupation Mechanic
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Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 16 / 2025

**Transaction ID : SA11AI.4433**

Amount of Each Receipt this Period  
250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
DUNN, LAURA L. MS. ESQ., , ,

Mailing Address 610 WEST 42ND STREET  
N42M

City NEW YORK	State NY	Zip Code 10036
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FEC ID number of contributing federal political committee. **C** H6NY12198

Name of Employer Self	Occupation Attorney
--------------------------	------------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3824.98

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 20 / 2025

**Transaction ID : SA11AI.4174**

Amount of Each Receipt this Period  
50.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Feiner, Scott, , ,

Mailing Address 2685 Milwaukee St

City Madison	State WI	Zip Code 53704
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FEC ID number of contributing federal political committee. **C**

Name of Employer Abbvie	Occupation Clinical Trial Disclosure
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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  
12 / 04 / 2025

**Transaction ID : SA11AI.4463**

Amount of Each Receipt this Period  
3500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	3800.00
<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: PAGE 10 OF 37  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**We the People for Laura Dunn**

**A.** Full Name (Last, First, Middle Initial)  
Garrido, Javier, , ,

Mailing Address 8 Cliff Rd

City: Greenwich State: CT Zip Code: 06830

FEC ID number of contributing federal political committee: C

Name of Employer: Montefiore Occupation: Physician

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  
11 / 27 / 2025

Transaction ID : SA11AI.4449

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
Hamill, Katie, , ,

Mailing Address 400 West 43rd Street Apt 41M

City: New York State: NY Zip Code: 10036

FEC ID number of contributing federal political committee: C

Name of Employer: Self Occupation: Consultant

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 20 / 2025

Transaction ID : SA11AI.4411

Amount of Each Receipt this Period  
250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Hanson, Steven, , ,

Mailing Address 101 v st sw Apt 512

City: Washington State: DC Zip Code: 20024

FEC ID number of contributing federal political committee: C

Name of Employer: DOE Occupation: Civil Servant

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  
10 / 23 / 2025

Transaction ID : SA11AI.4439

Amount of Each Receipt this Period  
500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1250.00

**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: PAGE 11 OF 37  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**We the People for Laura Dunn**

**A.** Full Name (Last, First, Middle Initial)  
Hutchings, Colleen, , ,

Mailing Address 2401 Annunciation Street

City New Orleans	State LA	Zip Code 70130
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FEC ID number of contributing federal political committee. **C**

Name of Employer MissionWired	Occupation Digital fundraising
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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  
10 / 29 / 2025

**Transaction ID : SA11AI.4445**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
Krakauer, Jon, , ,

Mailing Address 637 SOUTH BROADWAY ST STE B PMB 15

City Boulder	State CO	Zip Code 80305
-----------------	-------------	-------------------

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

Name of Employer Jon Krakauer	Occupation Author journalist
----------------------------------	---------------------------------

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  
11 / 19 / 2025

**Transaction ID : SA11AI.4459**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Kwan, Ryan, , ,

Mailing Address 4546 Plateau Dr

City Fairfax	State VA	Zip Code 22030
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FEC ID number of contributing federal political committee. **C**

Name of Employer Guidehouse	Occupation Consultant
--------------------------------	--------------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 30 / 2025

**Transaction ID : SA11AI.4421**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	1750.00
<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: PAGE 12 OF 37  
(check only one)  
 11a 12  11b 13a  11c 13b  11d 14  15

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NAME OF COMMITTEE (In Full)  
**We the People for Laura Dunn**

**A.** Full Name (Last, First, Middle Initial)  
Lead Intact

Mailing Address 49 5th Ave #177

City: Brooklyn State: NY Zip Code: 11217

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 12 / 31 / 2025

Transaction ID : SA11AI.4531

Amount of Each Receipt this Period: 1250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
Leibler, Renee, , ,

Mailing Address 25 Cowdray Park Drive

City: Greenwich State: CT Zip Code: 06831

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:  
The Fashion Institute of Technology Professor

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 12 / 28 / 2025

Transaction ID : SA11AI.4455

Amount of Each Receipt this Period: 500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Lewis, Andrew, , ,

Mailing Address 5454 S Shore Dr. Apt. 710

City: Chicago State: IL Zip Code: 60615

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:  
Univ. of Chicago Business Administrator

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 26 / 2025

Transaction ID : SA11AI.4413

Amount of Each Receipt this Period: 250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2000.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 37  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**We the People for Laura Dunn**

**A.** Full Name (Last, First, Middle Initial)  
Lull, Julia, , ,

Mailing Address 300 DELAWARE AVE. SUITE 210 #565

City WILMINGTON	State DE	Zip Code 19801
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FEC ID number of contributing federal political committee.

Name of Employer Self	Occupation Producer, Director
--------------------------	----------------------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.4632**

Amount of Each Receipt this Period

Memo Item  
In-kind - videography

**B.** Full Name (Last, First, Middle Initial)  
Merriman, Ashley, , ,

Mailing Address 500 Grand Street B5C

City NY	State NY	Zip Code 10002
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FEC ID number of contributing federal political committee.

Name of Employer Bindle and Keep	Occupation Tailor
-------------------------------------	----------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.4427**

Amount of Each Receipt this Period

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Palmeiro, Miguel, , ,

Mailing Address 4500 Oak Hill Rd

City Rockville	State MD	Zip Code 20853
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Law Office of Miguel Palmeiro	Occupation Attorney
---	------------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.4415**

Amount of Each Receipt this Period

Memo Item

**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: PAGE 14 OF 37  
(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)  
**We the People for Laura Dunn**

**A.** Full Name (Last, First, Middle Initial)  
Sierra, Patrick, , ,

Mailing Address 6005 Queens Way

City Monona State WI Zip Code 53716

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Self-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 Y  
12 / 04 / 2025

Transaction ID : SA11AI.4451

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
Wilder, Deborah, , ,

Mailing Address 510 Guthrie Street

City Ashland State OR Zip Code 97520

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Therapist

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 14 / 2025

Transaction ID : SA11AI.4431

Amount of Each Receipt this Period  
250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Woods, Jonathan, , ,

Mailing Address 232 YORK ST #2

City Jersey City State NJ Zip Code 07302

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Producer, Videographer

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 01 / 2025

Transaction ID : SA11AI.4566

Amount of Each Receipt this Period  
3200.00

Memo Item  
In-kind - Videographer service

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

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

3950.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 OF 37  
(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)  
**We the People for Laura Dunn**

**A.** Full Name (Last, First, Middle Initial)  
Yang, Evelyn, , ,

Mailing Address 393 W. 49 St

City New York State NY Zip Code 10019

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 Y Y  
10 / 21 / 2025

Transaction ID : SA11AI.4437

Amount of Each Receipt this Period  
500.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	25300.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 OF 37  
(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)  
**We the People for Laura Dunn**

**A.** Full Name (Last, First, Middle Initial)  
LEE PAC

Mailing Address 800 N KING STREET  
SUITE 304 - 4181

City WILMINGTON State DE Zip Code 19801

FEC ID number of contributing federal political committee. **C** C00571091

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  
12 / 08 / 2025

Transaction ID : SA11B.4494

Amount of Each Receipt this Period  
1000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 37	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" 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)  
**We the People for Laura Dunn**

**A.** Full Name (Last, First, Middle Initial)  
DUNN, LAURA L. MS. ESQ., , ,

Mailing Address 610 WEST 42ND STREET  
N42M

City NEW YORK State NY Zip Code 10036

FEC ID number of contributing federal political committee. **C** H6NY12198

Name of Employer Self 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 Y Y  
10 / 05 / 2025

Transaction ID : SA11D.4473

Amount of Each Receipt this Period  
1000.00

Memo Item  
Legal Retainer

**B.** Full Name (Last, First, Middle Initial)  
DUNN, LAURA L. MS. ESQ., , ,

Mailing Address 610 WEST 42ND STREET  
N42M

City NEW YORK State NY Zip Code 10036

FEC ID number of contributing federal political committee. **C** H6NY12198

Name of Employer Self Occupation Attorney

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  
10 / 06 / 2025

Transaction ID : SA11D.4474

Amount of Each Receipt this Period  
1000.00

Memo Item  
Campaign Consultant Payment

**C.** Full Name (Last, First, Middle Initial)  
DUNN, LAURA L. MS. ESQ., , ,

Mailing Address 610 WEST 42ND STREET  
N42M

City NEW YORK State NY Zip Code 10036

FEC ID number of contributing federal political committee. **C** H6NY12198

Name of Employer Self Occupation Attorney

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 06 / 2025

Transaction ID : SA11D.4475

Amount of Each Receipt this Period  
1000.00

Memo Item  
Campaign Consultant Payment

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3000.00
<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 18 OF 37	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" 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)  
**We the People for Laura Dunn**

**A.** Full Name (Last, First, Middle Initial)  
DUNN, LAURA L. MS. ESQ., , ,

Mailing Address 610 WEST 42ND STREET  
N42M

City NEW YORK State NY Zip Code 10036

FEC ID number of contributing federal political committee. **C** H6NY12198

Name of Employer Self Occupation 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 Y Y  
10 / 07 / 2025

Transaction ID : SA11D.4476

Amount of Each Receipt this Period  
500.00

Memo Item  
Event Ticket

**B.** Full Name (Last, First, Middle Initial)  
DUNN, LAURA L. MS. ESQ., , ,

Mailing Address 610 WEST 42ND STREET  
N42M

City NEW YORK State NY Zip Code 10036

FEC ID number of contributing federal political committee. **C** H6NY12198

Name of Employer Self Occupation Attorney

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3599.98

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 08 / 2025

Transaction ID : SA11D.4477

Amount of Each Receipt this Period  
99.98

Memo Item  
Office Space Monthly Fee

**C.** Full Name (Last, First, Middle Initial)  
DUNN, LAURA L. MS. ESQ., , ,

Mailing Address 610 WEST 42ND STREET  
N42M

City NEW YORK State NY Zip Code 10036

FEC ID number of contributing federal political committee. **C** H6NY12198

Name of Employer Self Occupation Attorney

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3674.98

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 10 / 2025

Transaction ID : SA11D.4478

Amount of Each Receipt this Period  
75.00

Memo Item  
Event Ticket

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	674.98
<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 19 OF 37
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 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)  
**We the People for Laura Dunn**

**A.** Full Name (Last, First, Middle Initial)  
DUNN, LAURA L. MS. ESQ., , ,

Mailing Address 610 WEST 42ND STREET  
N42M

City NEW YORK State NY Zip Code 10036

FEC ID number of contributing federal political committee. **C** H6NY12198

Name of Employer Self Occupation Attorney

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3774.98

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 14 / 2025

Transaction ID : SA11D.4479

Amount of Each Receipt this Period  
100.00

Memo Item  
Initial Bank Deposit

**B.** Full Name (Last, First, Middle Initial)  
DUNN, LAURA L. MS. ESQ., , ,

Mailing Address 610 WEST 42ND STREET  
N42M

City NEW YORK State NY Zip Code 10036

FEC ID number of contributing federal political committee. **C** H6NY12198

Name of Employer Self Occupation Attorney

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3869.73

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 25 / 2025

Transaction ID : SA11D.4480

Amount of Each Receipt this Period  
44.75

Memo Item  
Website Domains

**C.** Full Name (Last, First, Middle Initial)  
DUNN, LAURA L. MS. ESQ., , ,

Mailing Address 610 WEST 42ND STREET  
N42M

City NEW YORK State NY Zip Code 10036

FEC ID number of contributing federal political committee. **C** H6NY12198

Name of Employer Self Occupation Attorney

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3971.68

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 01 / 2025

Transaction ID : SA11D.4481

Amount of Each Receipt this Period  
101.95

Memo Item  
Office Space Monthly Fee

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	246.70
<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 20 OF 37	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" 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)  
**We the People for Laura Dunn**

Full Name (Last, First, Middle Initial) DUNN, LAURA L. MS. ESQ., , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 01 / 2025	
Mailing Address 610 WEST 42ND STREET N42M			Transaction ID : SA11D.4482	
City NEW YORK	State NY	Zip Code 10036	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C H6NY12198			<input type="checkbox"/> Memo Item Campaign Consultant Payment	
Name of Employer Self		Occupation Attorney		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 6471.68		

Full Name (Last, First, Middle Initial) DUNN, LAURA L. MS. ESQ., , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 01 / 2025	
Mailing Address 610 WEST 42ND STREET N42M			Transaction ID : SA11D.4483	
City NEW YORK	State NY	Zip Code 10036	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C H6NY12198			<input type="checkbox"/> Memo Item Campaign Consultant Payment	
Name of Employer Self		Occupation Attorney		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 8971.68		

Full Name (Last, First, Middle Initial) DUNN, LAURA L. MS. ESQ., , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 08 / 2025	
Mailing Address 610 WEST 42ND STREET N42M			Transaction ID : SA11D.4484	
City NEW YORK	State NY	Zip Code 10036	Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. C H6NY12198			<input type="checkbox"/> Memo Item Event Ticket	
Name of Employer Self		Occupation Attorney		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 9096.68		

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	5125.00
<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 21 OF 37
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**We the People for Laura Dunn**

Full Name (Last, First, Middle Initial) DUNN, LAURA L. MS. ESQ., , ,		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 09 / 2025
Mailing Address 610 WEST 42ND STREET N42M		Transaction ID : SA11D.4485
City NEW YORK	State NY	
FEC ID number of contributing federal political committee. C H6NY12198		Amount of Each Receipt this Period 20.00
Name of Employer Self	Occupation Attorney	<input type="checkbox"/> Memo Item <input type="checkbox"/> Event Ticket
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 9116.68	

Full Name (Last, First, Middle Initial) DUNN, LAURA L. MS. ESQ., , ,		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 09 / 2025
Mailing Address 610 WEST 42ND STREET N42M		Transaction ID : SA11D.4486
City NEW YORK	State NY	
FEC ID number of contributing federal political committee. C H6NY12198		Amount of Each Receipt this Period 2290.00
Name of Employer Self	Occupation Attorney	<input type="checkbox"/> Memo Item <input type="checkbox"/> Accounting Services
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 11406.68	

Full Name (Last, First, Middle Initial) DUNN, LAURA L. MS. ESQ., , ,		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 12 / 2025
Mailing Address 610 WEST 42ND STREET N42M		Transaction ID : SA11D.4487
City NEW YORK	State NY	
FEC ID number of contributing federal political committee. C H6NY12198		Amount of Each Receipt this Period 2500.00
Name of Employer Self	Occupation Attorney	<input type="checkbox"/> Memo Item <input type="checkbox"/> Campaign Consultant Payment
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 13906.68	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4810.00
<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: PAGE 22 OF 37  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**We the People for Laura Dunn**

**A.** Full Name (Last, First, Middle Initial)  
DUNN, LAURA L. MS. ESQ., , ,

Mailing Address 610 WEST 42ND STREET  
N42M

City NEW YORK State NY Zip Code 10036

FEC ID number of contributing federal political committee. **C** H6NY12198

Name of Employer Self Occupation Attorney

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
16931.68

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 28 / 2025

Transaction ID : SA11D.4488

Amount of Each Receipt this Period  
3025.00

Memo Item  
Campaign Consultant Payment

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3025.00
<b>TOTAL</b> This Period (last page this line number only).....▶	16881.68

# 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 23 OF 37	
	<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)  
**We the People for Laura Dunn**

Full Name (Last, First, Middle Initial) <b>A. ActBlue LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2025
Mailing Address P.O. Box 441146		FEC Identification Number C
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement payment processing fee	Category/ Type 003	
Candidate Name	Amount of Each Disbursement this Period 249.97	
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) ▼	Transaction ID : SB17.4608
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ActBlue LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2025
Mailing Address P.O. Box 441146		FEC Identification Number C
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement payment processing fee	Category/ Type 003	
Candidate Name	Amount of Each Disbursement this Period 215.35	
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) ▼	Transaction ID : SB17.4609
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. ActBlue LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2025
Mailing Address P.O. Box 441146		FEC Identification Number C
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement payment processing fee	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 33.09	
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) ▼	Transaction ID : SB17.4610
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	498.41
<b>TOTAL</b> 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 24 OF 37			
	<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)  
**We the People for Laura Dunn**

Full Name (Last, First, Middle Initial) <b>A. ActBlue LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2025
Mailing Address P.O. Box 441146			FEC Identification Number C
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period 66.40
Purpose of Disbursement payment processing fee		003	Transaction ID : SB17.4611
Candidate Name		Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2025 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. ActBlue LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2025
Mailing Address P.O. Box 441146			FEC Identification Number C
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period 202.86
Purpose of Disbursement payment processing fee		003	Transaction ID : SB17.4612
Candidate Name		Category/ Type	<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>C. ActBlue LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2025
Mailing Address P.O. Box 441146			FEC Identification Number C
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period 43.05
Purpose of Disbursement payment processing fee		003	Transaction ID : SB17.4614
Candidate Name		Category/ Type	<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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	312.31
<b>TOTAL</b> 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 25 OF 37			
	<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)  
**We the People for Laura Dunn**

Full Name (Last, First, Middle Initial) <b>A. ActBlue LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2025
Mailing Address P.O. Box 441146			FEC Identification Number C
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period 189.03
Purpose of Disbursement payment processing fee		Category/ Type 003	Transaction ID : SB17.4616
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>B. ActBlue LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2025
Mailing Address P.O. Box 441146			FEC Identification Number C
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period 48.37
Purpose of Disbursement payment processing fee		Category/ Type 003	Transaction ID : SB17.4617
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>C. ActBlue LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2025
Mailing Address P.O. Box 441146			FEC Identification Number C
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period 6.27
Purpose of Disbursement payment processing fee		Category/ Type 003	Transaction ID : SB17.4619
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	243.67
<b>TOTAL</b> 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 26 OF 37	
	<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)  
**We the People for Laura Dunn**

Full Name (Last, First, Middle Initial) <b>A. ActBlue LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2025
Mailing Address P.O. Box 441146		FEC Identification Number C
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement payment processing fee	Category/ Type 003	
Candidate Name		Amount of Each Disbursement this Period 47.39
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) ▼	Transaction ID : SB17.4621
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ActBlue LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2025
Mailing Address P.O. Box 441146		FEC Identification Number C
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement payment processing fee	Category/ Type 003	
Candidate Name		Amount of Each Disbursement this Period 32.88
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) ▼	Transaction ID : SB17.4622
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. ActBlue LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2025
Mailing Address P.O. Box 441146		FEC Identification Number C
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement payment processing fee	Category/ Type 003	
Candidate Name		Amount of Each Disbursement this Period 19.77
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) ▼	Transaction ID : SB17.4623
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	100.04
<b>TOTAL</b> 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 27 OF 37	
	<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)  
**We the People for Laura Dunn**

Full Name (Last, First, Middle Initial) <b>A. Azul Public Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2025
Mailing Address 61-15 97 St Apt LE		FEC Identification Number C
City Rego Park	State NY	Zip Code 11374
Purpose of Disbursement	Category/ Type 003	
Candidate Name	Amount of Each Disbursement this Period 3000.00	
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) ▼	Transaction ID : SB17.4594
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Felt Marketing Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2025
Mailing Address 64 Ocean Ave		FEC Identification Number C
City Bayshore	State NY	Zip Code 11706
Purpose of Disbursement	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 5000.00	
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) ▼	Transaction ID : SB17.4591
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Felt Marketing Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2025
Mailing Address 64 Ocean Ave		FEC Identification Number C
City Bayshore	State NY	Zip Code 11706
Purpose of Disbursement	Category/ Type 002	
Candidate Name	Amount of Each Disbursement this Period 2500.00	
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) ▼	Transaction ID : SB17.4593
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10500.00
<b>TOTAL</b> 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 28 OF 37	
	<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)  
**We the People for Laura Dunn**

Full Name (Last, First, Middle Initial) <b>A. Goldberg Tax Law, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2025	
Mailing Address 30 Wall Street, Fl 8			FEC Identification Number C	
City New York	State NY	Zip Code 10005	Amount of Each Disbursement this Period 2290.00	
Purpose of Disbursement		Category/ Type 001	Transaction ID : SB17.4595	
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>B. Goldberg Tax Law, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2025	
Mailing Address 30 Wall Street, Fl 8			FEC Identification Number C	
City New York	State NY	Zip Code 10005	Amount of Each Disbursement this Period 1440.00	
Purpose of Disbursement		Category/ Type 001	Transaction ID : SB17.4597	
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>C. Graubard, Howard, , , Esq.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2025	
Mailing Address 462 Degraw St			FEC Identification Number C	
City New York	State NY	Zip Code 11217	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Legal services		Category/ Type 004	Transaction ID : SB17.4546	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4730.00
<b>TOTAL</b> 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 29 OF 37			
	<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)  
**We the People for Laura Dunn**

Full Name (Last, First, Middle Initial) <b>A. Graubard, Howard, , , Esq.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2025		
Mailing Address 462 Degraw St			FEC Identification Number <b>C</b>		
City New York	State NY	Zip Code 11217	Amount of Each Disbursement this Period 550.00		
Purpose of Disbursement		Category/Type 001	Transaction ID : <b>SB17.4548</b>		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2025 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Graubard, Howard, , , Esq.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2025		
Mailing Address 462 Degraw St			FEC Identification Number <b>C</b>		
City New York	State NY	Zip Code 11217	Amount of Each Disbursement this Period 450.00		
Purpose of Disbursement Legal		Category/Type 001	Transaction ID : <b>SB17.4549</b>		
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>C. Hamill, Katie, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2025		
Mailing Address 400 West 43rd Street Apt 41M			FEC Identification Number <b>C</b>		
City New York	State NY	Zip Code 10036	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement		Category/Type 001	Transaction ID : <b>SB17.4585</b>		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2000.00
<b>TOTAL</b> 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 30 OF 37	
	<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)  
**We the People for Laura Dunn**

**A. Hamill, Katie, , ,**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 West 43rd Street Apt 41M

City New York State NY Zip Code 10036

Purpose of Disbursement  001 Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2026  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 01 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 2500.00

Transaction ID : SB17.4588

Memo Item

**B. Lead Intact**  
Full Name (Last, First, Middle Initial)

Mailing Address 49 5th Ave #177

City Brooklyn State NY Zip Code 11217

Purpose of Disbursement  001 Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2026  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 1250.00

Transaction ID : SB17.4533

Memo Item

**C. Lull, Julia, , ,**  
Full Name (Last, First, Middle Initial)

Mailing Address 300 DELAWARE AVE. SUITE 210 #565

City WILMINGTON State DE Zip Code 19801

Purpose of Disbursement In-kind - videography  Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2026  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 01 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 3300.00

Transaction ID : SB17.4633

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 7050.00

**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 31 OF 37	
	<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)  
**We the People for Laura Dunn**

Full Name (Last, First, Middle Initial) <b>A. Manhattan Young Democrats</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2025
Mailing Address 21 Astor Place		FEC Identification Number C
City New York	State NY	Zip Code 10003
Purpose of Disbursement	Category/Type 003	
Candidate Name	Amount of Each Disbursement this Period 500.00	
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) ▼	Transaction ID : SB17.4512
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Preferred Offices Properties II LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2025
Mailing Address 745 Fifth Avenue Suite 500		FEC Identification Number C
City New York	State NY	Zip Code 10151
Purpose of Disbursement	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 101.95	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2025 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4603
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Preferred Offices Properties II LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2025
Mailing Address 745 Fifth Avenue Suite 500		FEC Identification Number C
City New York	State NY	Zip Code 10151
Purpose of Disbursement	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 99.98	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2025 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4604
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	701.93
<b>TOTAL</b> 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 32 OF 37	
	<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)  
**We the People for Laura Dunn**

Full Name (Last, First, Middle Initial) <b>A. Wojcik, Alexandra, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2025	
Mailing Address 4 Southside Ave Apt 4F			FEC Identification Number <b>C</b>	
City New York	State NY	Zip Code 12561	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement		Category/ Type 001	Transaction ID : <b>SB17.4586</b>	
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>B. Wojcik, Alexandra, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2025	
Mailing Address 4 Southside Ave Apt 4F			FEC Identification Number <b>C</b>	
City New York	State NY	Zip Code 12561	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement		Category/ Type 001	Transaction ID : <b>SB17.4587</b>	
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Wojcik, Alexandra, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2025	
Mailing Address 4 Southside Ave Apt 4F			FEC Identification Number <b>C</b>	
City New York	State NY	Zip Code 12561	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement		Category/ Type 001	Transaction ID : <b>SB17.4589</b>	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6000.00
<b>TOTAL</b> 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 33 OF 37	
	<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)  
**We the People for Laura Dunn**

Full Name (Last, First, Middle Initial) <b>A. Woods, Jonathan, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2025	
Mailing Address 232 YORK ST #2			FEC Identification Number C	
City Jersey City	State NJ	Zip Code 07302	Amount of Each Disbursement this Period 3200.00	
Purpose of Disbursement In-kind - Videographer service		Category/ Type	Transaction ID : SB17.4567	
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>B.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item	
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) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	35336.36

**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)

**We the People for Laura Dunn**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Azul Public Solutions</b>			Nature of Debt (Purpose): Return of unearned upfront payment
Mailing Address 61-15 97 St Apt LE			
City Rego Park	State NY	Zip Code 11374	

Outstanding Balance Beginning This Period		<b>Transaction ID : SD9.4528</b>	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
3000.00	0.00	3000.00	

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) <b>SUBTOTALS</b> This Period This Page (optional) .....	3000.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	3000.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	3000.00

**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)

**We the People for Laura Dunn**

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

Dalzell, Margaret, , ,

Nature of Debt (Purpose):

accounts payable

Mailing Address 9210 Ashworth Ave N

City  
Seattle

State  
WA

Zip Code  
98013

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4571

Amount Incurred This Period

765.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

765.00

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

Hamill, Katie, , ,

Nature of Debt (Purpose):

Committee disputes this invoice and does not acknowledge this liability

Mailing Address 400 West 43rd Street Apt 41M

City  
New York

State  
NY

Zip Code  
10036

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4524

Amount Incurred This Period

5000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

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

Hamill, Katie, , ,

Nature of Debt (Purpose):

Committee disputes this invoice and does not acknowledge this liability

Mailing Address 400 West 43rd Street Apt 41M

City  
New York

State  
NY

Zip Code  
10036

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4525

Amount Incurred This Period

7500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7500.00

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

13265.00

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

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

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

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 36 OF 37
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**We the People for Laura Dunn**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Lee Inc.</b>			Nature of Debt (Purpose): Accounts payable
Mailing Address 800 N King Street Suite 304 - 4181			
City Wilmington	State DE	Zip Code 19801	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : SD10.4580</b>	
Amount Incurred This Period <input type="text" value="500.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="500.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Wojcik, Alexandra, , ,</b>			Nature of Debt (Purpose): Committee disputes this invoice and does not acknowledge this liability
Mailing Address 4 Southside Ave Apt 4F			
City New York	State NY	Zip Code 12561	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : SD10.4521</b>	
Amount Incurred This Period <input type="text" value="2500.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Wojcik, Alexandra, , ,</b>			Nature of Debt (Purpose): Committee disputes this invoice and does not acknowledge this liability
Mailing Address 4 Southside Ave Apt 4F			
City New York	State NY	Zip Code 12561	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : SD10.4523</b>	
Amount Incurred This Period <input type="text" value="7500.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="7500.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="10500.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

NAME OF COMMITTEE (In Full)

**We the People for Laura Dunn**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Woods, Jonathan, , ,</b>			Nature of Debt (Purpose): accounts payable
Mailing Address 232 YORK ST #2			
City Jersey City	State NJ	Zip Code 07302	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : SD10.4544</b>	
Amount Incurred This Period <input type="text" value="253.66"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="253.66"/>

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 <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	

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 <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="253.66"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="24018.66"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text" value="24018.66"/>