



## SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**Salazar for Congress**

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)) ....	97595.59	630301.32
(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)) .....	97595.59	630301.32
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	166872.15	931733.33
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	126.17
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	166872.15	931607.16
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>		
	1714102.22	
<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>		
	14300.00	

**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

**Salazar for Congress**

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>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	45665.00	299921.95
(ii) Unitemized.....	2430.59	18458.05
(iii) TOTAL of contributions from individuals ▶	48095.59	318380.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	49500.00	309428.55
(d) The Candidate.....	0.00	2492.77
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	97595.59	630301.32
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	<b>133727.25</b>	<b>297084.74</b>
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	<b>0.00</b>	<b>126.17</b>
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	<b>9393.15</b>	<b>28124.20</b>
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	<b>240715.99</b>	<b>955636.43</b>

**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.....	166872.15	931733.33
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	23000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	166872.15	954733.33

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1640258.38
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	240715.99
25. SUBTOTAL (add Line 23 and Line 24).....	1880974.37
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	166872.15
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1714102.22

**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 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
CODINA, ARMANDO, , ,

Mailing Address 2020 SALZEDO STREET  
5TH FL

City CORAL GABLES State FL Zip Code 33134-4358

FEC ID number of contributing federal political committee. C

Name of Employer CODINA PARTNERS Occupation EXECUTIVE CHAIRMAN

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 19 / 2025

Transaction ID : SA11A.221140

Amount of Each Receipt this Period  
3500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
CODINA, ARMANDO, , ,

Mailing Address 2020 SALZEDO STREET  
5TH FL

City CORAL GABLES State FL Zip Code 33134-4358

FEC ID number of contributing federal political committee. C

Name of Employer CODINA PARTNERS Occupation EXECUTIVE CHAIRMAN

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 19 / 2025

Transaction ID : SA11A.221141

Amount of Each Receipt this Period  
3500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
HUNT, WOODY, L., MR.,

Mailing Address PO BOX 12667

City EL PASO State TX Zip Code 79913-0667

FEC ID number of contributing federal political committee. C

Name of Employer THE HUNT COMPANIES Occupation EXECUTIVE CHAIRMAN

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 / 19 / 2025

Transaction ID : SA11A.221131

Amount of Each Receipt this Period  
3500.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 10500.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
LOPEZ, LUCILA, , DR.,

Mailing Address 60 EDGEWATER DRIVE

City: CORAL GABLES      State: FL      Zip Code: 33133-

FEC ID number of contributing federal political committee: C

Name of Employer: SELF-EMPLOYED      Occupation: PHYSICIAN

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 12 / 2025

Transaction ID : SA11A.219865

Amount of Each Receipt this Period  
7000.00

Memo Item  
CONTRIBUTION  
SEE REDESIGNATION

**B.** Full Name (Last, First, Middle Initial)  
LOPEZ, LUCILA, , DR.,

Mailing Address 60 EDGEWATER DRIVE

City: CORAL GABLES      State: FL      Zip Code: 33133-

FEC ID number of contributing federal political committee: C

Name of Employer: SELF-EMPLOYED      Occupation: PHYSICIAN

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 12 / 2025

Transaction ID : SA11A.219866

Amount of Each Receipt this Period  
3500.00

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
LOPEZ, LUCILA, , DR.,

Mailing Address 60 EDGEWATER DRIVE

City: CORAL GABLES      State: FL      Zip Code: 33133-

FEC ID number of contributing federal political committee: C

Name of Employer: SELF-EMPLOYED      Occupation: PHYSICIAN

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 12 / 2025

Transaction ID : SA11A.219867

Amount of Each Receipt this Period  
- 3500.00

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7000.00

**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 7 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
MOORE, WILLIAM, H., ,

Mailing Address 117 HILLCREST ROAD

City RALEIGH State NC Zip Code 27605-1717

FEC ID number of contributing federal political committee. C

Name of Employer ELEANOR CROOK FOUNDATION Occupation CEO

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

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

Transaction ID : SA11A.220024

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
SAWITZ, ROSS, , ,

Mailing Address 11 WASHINGTON AVENUE

City MIAMI BEACH State FL Zip Code 33139-

FEC ID number of contributing federal political committee. C

Name of Employer JOE'S STONE CRAB Occupation RESTAURANT MANAGER

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
937.50

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 12 / 2025

Transaction ID : SA11A.219852

Amount of Each Receipt this Period  
937.50

Memo Item  
CONTRIBUTION  
EVENT CATERING

**C.** Full Name (Last, First, Middle Initial)  
SAWITZ, STEPHEN, , ,

Mailing Address 11 WASHINGTON AVENUE

City MIAMI BEACH State FL Zip Code 33139-

FEC ID number of contributing federal political committee. C

Name of Employer JOE'S STONE CRAB Occupation RESTAURANTEUR

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
937.50

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 12 / 2025

Transaction ID : SA11A.219853

Amount of Each Receipt this Period  
937.50

Memo Item  
CONTRIBUTION  
EVENT CATERING

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

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

2875.00

# 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 184  
(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)  
**Salazar for Congress**

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

Mailing Address P.O. BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
228306.12

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 03 / 2025

**Transaction ID : SA11C.219583**

Amount of Each Receipt this Period  
124.05

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

**B.** Full Name (Last, First, Middle Initial)  
MORGAN, DAVID, , ,

Mailing Address 4412 ISLAND PLACE, 104

City ANNANDALE State VA Zip Code 22003-4885

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
325.50

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 01 / 2025

**Transaction ID : SA11A.219599**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
YOUNG, MING, , ,

Mailing Address 7600 SW 124 STREET

City MIAMI State FL Zip Code 33156-6008

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
545.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 03 / 2025

**Transaction ID : SA11A.219584**

Amount of Each Receipt this Period  
5.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 30.00

**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 9 OF 184  
(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)  
**Salazar for Congress**

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

Mailing Address P.O. BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
228306.12

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

**Transaction ID : SA11C.219636**

Amount of Each Receipt this Period  
1419.53

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

**B.** Full Name (Last, First, Middle Initial)  
BAYARD, JOHN, , ,

Mailing Address 2708 ION AVE

City SULLIVANS ISLAND State SC Zip Code 29482-9698

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 07 / 2025

**Transaction ID : SA11A.219640**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
CALI, JOANNE, , ,

Mailing Address 5419 HOLLYWOOD BLVD

City LOS ANGELES State CA Zip Code 90027-3480

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
210.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 07 / 2025

**Transaction ID : SA11A.219643**

Amount of Each Receipt this Period  
15.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 40.00

**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 10 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
CHIN, EDWIN, , ,  
Mailing Address 145 N. 10TH ST.  
City PHILADELPHIA State PA Zip Code 19107-2414  
FEC ID number of contributing federal political committee. C  
Name of Employer RETIRED Occupation RETIRED  
Receipt For: 2026  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 06 / 2025  
Transaction ID : SA11A.219655  
Amount of Each Receipt this Period  
25.00  
 Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**B.** Full Name (Last, First, Middle Initial)  
HELMER, JACE, , ,  
Mailing Address 7046 VIA OSTIONES  
City CARLSBAD State CA Zip Code 92009-6614  
FEC ID number of contributing federal political committee. C  
Name of Employer RETIRED Occupation RETIRED  
Receipt For: 2026  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 201.50

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 05 / 2025  
Transaction ID : SA11A.219652  
Amount of Each Receipt this Period  
15.50  
 Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
HESSERT, WILLIAM, , ,  
Mailing Address 1000 SOUTH POINTE DR  
City MIAMI BEACH State FL Zip Code 33139-7319  
FEC ID number of contributing federal political committee. C  
Name of Employer SELF-EMPLOYED Occupation STATISTICIAN  
Receipt For: 2026  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 1100.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 08 / 2025  
Transaction ID : SA11A.219653  
Amount of Each Receipt this Period  
1100.00  
 Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1140.50  
**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 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
MOLEIRO, ISRAEL, , ,

Mailing Address 1646 SOUTHWEST 8TH STREET

City MIAMI State FL Zip Code 33135-5220

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

Name of Employer LATIN ART CORE GALLERY Occupation PRESIDENT

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1216.53

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

**Transaction ID : SA11A.219661**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

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

Mailing Address P.O. BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
228306.12

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2025

**Transaction ID : SA11C.219680**

Amount of Each Receipt this Period  
4546.31

Memo Item  
CONTRIBUTION  
SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

**C.** Full Name (Last, First, Middle Initial)  
GLAZIER, MITCH, , ,

Mailing Address 1601 KIRBY ROAD

City BETHESDA State MD Zip Code 20817-

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

Name of Employer RECORDING IND. ASSN. OF AM. 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 / 11 / 2025

**Transaction ID : SA11A.219710**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶ 1050.00

**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 12 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
KASTELER, RICHARDS, , ,

Mailing Address 4516 SOUTH 700 EAST

City MURRAY State UT Zip Code 84107-4192

FEC ID number of contributing federal political committee. C

Name of Employer INSURE-RITE, INC. Occupation PRESIDENT, CEO

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 16 2025

Transaction ID : SA11A.219686

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**B.** Full Name (Last, First, Middle Initial)  
PRESTON, HENRY, B., ,

Mailing Address 800 N TAMIAMI TR  
UNIT 610

City SARASOTA State FL Zip Code 34236-4007

FEC ID number of contributing federal political committee. C

Name of Employer PRESTON GIULIANO CAPITAL PARTNERS LI Occupation REAL ESTATE AGENT

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date 4333.06

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 13 2025

Transaction ID : SA11A.219698

Amount of Each Receipt this Period  
3300.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
ROGER, STEFAN, , ,

Mailing Address 19108 NE 140TH PL

City WOODINVILLE State WA Zip Code 98077-7823

FEC ID number of contributing federal political committee. C

Name of Employer NONE Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date 693.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 15 2025

Transaction ID : SA11A.219695

Amount of Each Receipt this Period  
49.50

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3399.50

**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 13 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
TRASK, DANNY, , ,

Mailing Address 144 LAKE POINT DR

City QUITMAN State AR Zip Code 72131-9101

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
210.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 13 / 2025

Transaction ID : SA11A.219700

Amount of Each Receipt this Period  
15.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

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

Mailing Address P.O. BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
228306.12

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 24 / 2025

Transaction ID : SA11C.219712

Amount of Each Receipt this Period  
218.97

Memo Item  
CONTRIBUTION  
SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**C.** Full Name (Last, First, Middle Initial)  
AHLBUM, JONATHAN, , ,

Mailing Address 660 NORTHWEST 49TH AVENUE

City COCONUT CREEK State FL Zip Code 33063-4629

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

Name of Employer SELF-EMPLOYED Occupation INSURANCE AGENCY

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 22 / 2025

Transaction ID : SA11A.219713

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 40.00

**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 14 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
HILL, ROSALIE, , ,

Mailing Address 8924 33RD ST. EAST

City PUYALLUP State WA Zip Code 98371-2054

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2025

Transaction ID : SA11A.219729

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**B.** Full Name (Last, First, Middle Initial)  
HILLERBY, KAY, , ,

Mailing Address 2200 PIONEER DR

City RENO State NV Zip Code 89509-5154

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
415.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 21 / 2025

Transaction ID : SA11A.219730

Amount of Each Receipt this Period  
10.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
LLULL, MARGARITA, , ,

Mailing Address 7241 S W CT 12

City MIAMI State FL Zip Code 33144-5301

FEC ID number of contributing federal political committee. C

Name of Employer NONE Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2025

Transaction ID : SA11A.219738

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00

**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 15 OF 184  
(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)  
**Salazar for Congress**

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

Mailing Address P.O. BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
228306.12

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 31 2025

**Transaction ID : SA11C.219759**

Amount of Each Receipt this Period  
497.35

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

**B.** Full Name (Last, First, Middle Initial)  
EGIDI, DENNIS, , ,

Mailing Address 246 SPRINGLINE DRIVE

City NAPLES State FL Zip Code 34102-5053

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

Name of Employer Occupation  
DRE INC. DEVELOPER

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 30 2025

**Transaction ID : SA11A.219767**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
EVANS, STEVEN, , ,

Mailing Address 2828 MAJOR RIDGE TRAIL

City DULUTH State GA Zip Code 30097-4987

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

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

**Transaction ID : SA11A.219766**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300.00

**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 16 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
FOWLER, STEPHEN, , ,

Mailing Address 332 PALMER DRIVE

City LEXINGTON State SC Zip Code 29072-7476

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
210.00

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

Transaction ID : SA11A.219786

Amount of Each Receipt this Period  
15.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**B.** Full Name (Last, First, Middle Initial)  
SANCHEZ SUAREZ, ANTONIO, , ,

Mailing Address 17186 SOUTHWEST 139TH PLACE

City MIAMI State FL Zip Code 33177-2721

FEC ID number of contributing federal political committee. C

Name of Employer FMCNA Occupation R.N.

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

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

Transaction ID : SA11A.219785

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

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

Mailing Address P.O. BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. C C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
228306.12

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 07 2025

Transaction ID : SA11C.219798

Amount of Each Receipt this Period  
14782.17

Memo Item  
CONTRIBUTION  
SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 40.00

**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 17 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
CALI, JOANNE, , ,

Mailing Address 5419 HOLLYWOOD BLVD

City LOS ANGELES State CA Zip Code 90027-3480

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 210.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 07 / 2025

Transaction ID : SA11A.219805

Amount of Each Receipt this Period  
15.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**B.** Full Name (Last, First, Middle Initial)  
CHIN, EDWIN, , ,

Mailing Address 145 N. 10TH ST.

City PHILADELPHIA State PA Zip Code 19107-2414

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 06 / 2025

Transaction ID : SA11A.219815

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
HELMER, JACE, , ,

Mailing Address 7046 VIA OSTIONES

City CARLSBAD State CA Zip Code 92009-6614

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 201.50

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2025

Transaction ID : SA11A.219813

Amount of Each Receipt this Period  
15.50

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

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

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

55.50

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
LIPPMAN, ADAM, , ,

Mailing Address 334 JEFFERSON AVE

City MIAMI BEACH State FL Zip Code 33139-

FEC ID number of contributing federal political committee. C

Name of Employer G10 Occupation BUSINESS DEVELOPMENT

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 / 05 / 2025

Transaction ID : SA11A.219817

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**B.** Full Name (Last, First, Middle Initial)  
MILLER, JASON, , ,

Mailing Address 2305 N LINCOLN ST

City ARLINGTON State VA Zip Code 22207-

FEC ID number of contributing federal political committee. C

Name of Employer SHW PARTNERS LLC Occupation CONSULTANT

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 7000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 07 / 2025

Transaction ID : SA11A.219819

Amount of Each Receipt this Period  
7000.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED; SEE REDESIGNATION

**C.** Full Name (Last, First, Middle Initial)  
MILLER, JASON, , ,

Mailing Address 2305 N LINCOLN ST

City ARLINGTON State VA Zip Code 22207-

FEC ID number of contributing federal political committee. C

Name of Employer SHW PARTNERS LLC Occupation CONSULTANT

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 7000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 07 / 2025

Transaction ID : SA11A.219843

Amount of Each Receipt this Period  
- 3500.00

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7500.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
MILLER, JASON, , ,

Mailing Address 2305 N LINCOLN ST

City ARLINGTON State VA Zip Code 22207-

FEC ID number of contributing federal political committee. C

Name of Employer SHW PARTNERS LLC Occupation CONSULTANT

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 07 / 2025

Transaction ID : SA11A.219844

Amount of Each Receipt this Period  
3500.00

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
MILLER, KELLY, , ,

Mailing Address 2305 N LINCOLN ST

City ARLINGTON State VA Zip Code 22207-

FEC ID number of contributing federal political committee. C

Name of Employer CBRE Occupation DIRECTOR, DIGITAL COMMUNICATIONS

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 07 / 2025

Transaction ID : SA11A.219820

Amount of Each Receipt this Period  
7000.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED; SEE  
REDESIGNATION

**C.** Full Name (Last, First, Middle Initial)  
MILLER, KELLY, , ,

Mailing Address 2305 N LINCOLN ST

City ARLINGTON State VA Zip Code 22207-

FEC ID number of contributing federal political committee. C

Name of Employer CBRE Occupation DIRECTOR, DIGITAL COMMUNICATIONS

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 07 / 2025

Transaction ID : SA11A.219841

Amount of Each Receipt this Period  
- 3500.00

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7000.00

**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 20 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
MILLER, KELLY, , ,

Mailing Address 2305 N LINCOLN ST

City ARLINGTON State VA Zip Code 22207-

FEC ID number of contributing federal political committee. C

Name of Employer CBRE Occupation DIRECTOR, DIGITAL COMMUNICATIONS

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date 7000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 07 / 2025

Transaction ID : SA11A.219842

Amount of Each Receipt this Period  
3500.00

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
MORGAN, DAVID, , ,

Mailing Address 4412 ISLAND PLACE, 104

City ANNANDALE State VA Zip Code 22003-4885

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date 325.50

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

Transaction ID : SA11A.219822

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

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

Mailing Address P.O. BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. C C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date 228306.12

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 14 / 2025

Transaction ID : SA11C.219868

Amount of Each Receipt this Period  
886.84

Memo Item  
CONTRIBUTION  
SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 25.00

**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 21 OF 184	
<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"/> 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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
HILL, ROSALIE, , ,

Mailing Address 8924 33RD ST. EAST

City PUYALLUP	State WA	Zip Code 98371-2054
------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11A.219880**

Amount of Each Receipt this Period

Memo Item  
 CONTRIBUTION  
 EARMARKED FROM WINRED

**B.** Full Name (Last, First, Middle Initial)  
MANEVAL, CHRIS, , ,

Mailing Address 4348 26TH ST N

City ARLINGTON	State VA	Zip Code 22207-
-------------------	-------------	--------------------

FEC ID number of contributing federal political committee.

Name of Employer PFS	Occupation CONSULTANT
-------------------------	--------------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11A.219888**

Amount of Each Receipt this Period

Memo Item  
 CONTRIBUTION  
 EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
MOLEIRO, ISRAEL, , ,

Mailing Address 1646 SOUTHWEST 8TH STREET

City MIAMI	State FL	Zip Code 33135-5220
---------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer LATIN ART CORE GALLERY	Occupation PRESIDENT
--	-------------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11A.219893**

Amount of Each Receipt this Period

Memo Item  
 CONTRIBUTION  
 EARMARKED FROM WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	<input type="text" value="575.00"/>
<b>TOTAL</b> This Period (last page this line number only)..... ▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 184	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
ROGER, STEFAN, , ,

Mailing Address 19108 NE 140TH PL

City: WOODINVILLE State: WA Zip Code: 98077-7823

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 693.00

Date of Receipt: 11 / 14 / 2025

Transaction ID : SA11A.219901

Amount of Each Receipt this Period: 49.50

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.** Full Name (Last, First, Middle Initial)  
TRASK, DANNY, , ,

Mailing Address 144 LAKE POINT DR

City: QUITMAN State: AR Zip Code: 72131-9101

FEC ID number of contributing federal political committee: C

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 210.00

Date of Receipt: 11 / 13 / 2025

Transaction ID : SA11A.219911

Amount of Each Receipt this Period: 15.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

Mailing Address P.O. BOX 9891

City: ARLINGTON State: VA Zip Code: 22219-1891

FEC ID number of contributing federal political committee: C C00694323

Name of Employer: Occupation:

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 228306.12

Date of Receipt: 11 / 21 / 2025

Transaction ID : SA11C.219930

Amount of Each Receipt this Period: 200.04

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	64.50
<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 23 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
HILLERBY, KAY, , ,  
Mailing Address 2200 PIONEER DR  
City RENO State NV Zip Code 89509-5154  
FEC ID number of contributing federal political committee. C  
Name of Employer RETIRED Occupation RETIRED  
Receipt For: 2026  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 415.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 21 / 2025  
Transaction ID : SA11A.219953  
Amount of Each Receipt this Period  
10.00  
 Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**B.** Full Name (Last, First, Middle Initial)  
KASTELER, RICHARDS, , ,  
Mailing Address 4516 SOUTH 700 EAST  
City MURRAY State UT Zip Code 84107-4192  
FEC ID number of contributing federal political committee. C  
Name of Employer INSURE-RITE, INC. Occupation PRESIDENT, CEO  
Receipt For: 2026  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 16 / 2025  
Transaction ID : SA11A.219956  
Amount of Each Receipt this Period  
50.00  
 Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
WINRED  
Mailing Address P.O. BOX 9891  
City ARLINGTON State VA Zip Code 22219-1891  
FEC ID number of contributing federal political committee. C C00694323  
Name of Employer Occupation  
Receipt For: 2026  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 228306.12

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 28 / 2025  
Transaction ID : SA11C.219986  
Amount of Each Receipt this Period  
224.62  
 Memo Item  
CONTRIBUTION  
SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

60.00

# 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 24 OF 184
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
<input type="checkbox"/> 11c 13b	<input 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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
AHLBUM, JONATHAN, , ,

Mailing Address 660 NORTHWEST 49TH AVENUE

City COCONUT CREEK	State FL	Zip Code 33063-4629
-----------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation INSURANCE AGENCY
-----------------------------------	--------------------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 22 / 2025

**Transaction ID : SA11A.219988**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**B.** Full Name (Last, First, Middle Initial)  
FOWLER, STEPHEN, , ,

Mailing Address 332 PALMER DRIVE

City LEXINGTON	State SC	Zip Code 29072-7476
-------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 25 / 2025

**Transaction ID : SA11A.219996**

Amount of Each Receipt this Period  
15.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
LLULL, MARGARITA, , ,

Mailing Address 7241 S W CT 12

City MIAMI	State FL	Zip Code 33144-5301
---------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 22 / 2025

**Transaction ID : SA11A.220005**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

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

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

65.00

**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 25 OF 184
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input 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)  
**Salazar for Congress**

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

Mailing Address P.O. BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
228306.12

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

**Transaction ID : SA11C.220029**

Amount of Each Receipt this Period  
403.48

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B.** Full Name (Last, First, Middle Initial)  
EGIDI, DENNIS, , ,

Mailing Address 246 SPRINGLINE DRIVE

City NAPLES State FL Zip Code 34102-5053

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

Name of Employer Occupation  
DRE INC. DEVELOPER

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  
11 / 30 / 2025

**Transaction ID : SA11A.220053**

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
HELMER, JACE, , ,

Mailing Address 7046 VIA OSTIONES

City CARLSBAD State CA Zip Code 92009-6614

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
201.50

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

**Transaction ID : SA11A.220031**

Amount of Each Receipt this Period  
15.50

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	265.48
<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 26 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
MORGAN, DAVID, , ,

Mailing Address 4412 ISLAND PLACE, 104

City ANNANDALE State VA Zip Code 22003-4885

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
325.50

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

Transaction ID : SA11A.220052

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

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

Mailing Address P.O. BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. C C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
228306.12

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

Transaction ID : SA11C.221067

Amount of Each Receipt this Period  
6255.93

Memo Item  
CONTRIBUTION  
SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

**C.** Full Name (Last, First, Middle Initial)  
CALI, JOANNE, , ,

Mailing Address 5419 HOLLYWOOD BLVD

City LOS ANGELES State CA Zip Code 90027-3480

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
210.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 07 / 2025

Transaction ID : SA11A.221085

Amount of Each Receipt this Period  
15.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

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

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

40.00

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

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

FOR LINE NUMBER: PAGE 27 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
CHIN, EDWIN, , ,  
Mailing Address 145 N. 10TH ST.  
City PHILADELPHIA State PA Zip Code 19107-2414  
FEC ID number of contributing federal political committee. C  
Name of Employer RETIRED Occupation RETIRED  
Receipt For: 2026  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 06 2025  
Transaction ID : SA11A.221092  
Amount of Each Receipt this Period  
25.00  
 Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**B.** Full Name (Last, First, Middle Initial)  
MOLEIRO, ISRAEL, , ,  
Mailing Address 1646 SOUTHWEST 8TH STREET  
City MIAMI State FL Zip Code 33135-5220  
FEC ID number of contributing federal political committee. C  
Name of Employer LATIN ART CORE GALLERY Occupation PRESIDENT  
Receipt For: 2026  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 1216.53

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 10 2025  
Transaction ID : SA11A.221073  
Amount of Each Receipt this Period  
50.00  
 Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
WOLFSON, LEN, , ,  
Mailing Address 2125 14TH STREET NW  
City WASHINGTON State DC Zip Code 20009-4464  
FEC ID number of contributing federal political committee. C  
Name of Employer BREAKAWAY LLC Occupation CONSULTANT  
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 09 2025  
Transaction ID : SA11A.221080  
Amount of Each Receipt this Period  
1000.00  
 Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1075.00  
**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 28 OF 184  
(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)  
**Salazar for Congress**

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

Mailing Address P.O. BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
228306.12

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 19 / 2025

**Transaction ID : SA11C.221098**

Amount of Each Receipt this Period  
2255.25

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

**B.** Full Name (Last, First, Middle Initial)  
HILL, ROSALIE, , ,

Mailing Address 8924 33RD ST. EAST

City PUYALLUP State WA Zip Code 98371-2054

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 17 / 2025

**Transaction ID : SA11A.221108**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
KASTELER, RICHARDS, , ,

Mailing Address 4516 SOUTH 700 EAST

City MURRAY State UT Zip Code 84107-4192

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

Name of Employer Occupation  
INSURE-RITE, INC. PRESIDENT, CEO

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

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

**Transaction ID : SA11A.221117**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 75.00

**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 29 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
ROGER, STEFAN, , ,

Mailing Address 19108 NE 140TH PL

City: WOODINVILLE State: WA Zip Code: 98077-7823

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 693.00

Date of Receipt: 12 / 14 / 2025

Transaction ID : SA11A.221121

Amount of Each Receipt this Period: 49.50

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**B.** Full Name (Last, First, Middle Initial)  
ROMANO, JAMES, , ,

Mailing Address 5805 TELLURIDE LANE

City: SPOTSYLVANIA State: VA Zip Code: 22553-4476

FEC ID number of contributing federal political committee: C

Name of Employer: SELF-EMPLOYED Occupation: CONSULTANT

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 2000.00

Date of Receipt: 12 / 16 / 2025

Transaction ID : SA11A.221119

Amount of Each Receipt this Period: 1000.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
STURGILL, SCOTT, , ,

Mailing Address P.O. BOX 470849

City: LAKE MONROE State: FL Zip Code: 32747-0849

FEC ID number of contributing federal political committee: C

Name of Employer: CHURCHILL STRATEGY GROUP Occupation: PARTNER

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 500.00

Date of Receipt: 12 / 16 / 2025

Transaction ID : SA11A.221118

Amount of Each Receipt this Period: 500.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1549.50

**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 30 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
TRASK, DANNY, , ,

Mailing Address 144 LAKE POINT DR

City QUITMAN State AR Zip Code 72131-9101

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
210.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 13 2025

Transaction ID : SA11A.221128

Amount of Each Receipt this Period  
15.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**B.** Full Name (Last, First, Middle Initial)  
WILLENS, MORNA, , ,

Mailing Address 7711 BROOKVILLE RD

City CHEVY CHASE State MD Zip Code 20815-3933

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

Name of Employer RECORDING INDUSTRY ASSOCIATION OF A Occupation CHIEF POLICY OFFICER

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

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

Transaction ID : SA11A.221116

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

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

Mailing Address P.O. BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
228306.12

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 26 2025

Transaction ID : SA11C.221144

Amount of Each Receipt this Period  
392.88

Memo Item  
CONTRIBUTION  
SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 515.00

**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 32 OF 184	
<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"/> 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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
LLULL, MARGARITA, , ,

Mailing Address 7241 S W CT 12

City MIAMI	State FL	Zip Code 33144-5301
---------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 22 / 2025

**Transaction ID : SA11A.221165**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

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

Mailing Address P.O. BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
228306.12

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2025

**Transaction ID : SA11C.221200**

Amount of Each Receipt this Period  
363.59

Memo Item  
CONTRIBUTION  
SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**C.** Full Name (Last, First, Middle Initial)  
EGIDI, DENNIS, , ,

Mailing Address 246 SPRINGLINE DRIVE

City NAPLES	State FL	Zip Code 34102-5053
----------------	-------------	------------------------

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

Name of Employer DRE INC.	Occupation DEVELOPER
------------------------------	-------------------------

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 / 30 / 2025

**Transaction ID : SA11A.221205**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	275.00
<b>TOTAL</b> This Period (last page this line number only).....▶	45665.00

# 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 33 OF 184	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN SOCIETY OF TRAVEL ADVISORS, INC. PAC

Mailing Address 123 NORTH PITT STREET  
STE. 400

City ALEXANDRIA State VA Zip Code 22314-3133

FEC ID number of contributing federal political committee. **C** C00114108

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 10 / 2025

Transaction ID : SA11C.221076

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PAC)

Mailing Address 1015 15TH STREET NW  
SUITE 800

City WASHINGTON State DC Zip Code 20005-2605

FEC ID number of contributing federal political committee. **C** C00010868

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
7000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 19 / 2025

Transaction ID : SA11C.221130

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN PROPERTY CASUALTY INSURANCE ASSOCIATION POLITICAL A

Mailing Address 8700 WEST BRYN MAWR  
SUITE 1200S

City CHICAGO State IL Zip Code 60631-3512

FEC ID number of contributing federal political committee. **C** C00066472

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2025

Transaction ID : SA11C.221245

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	8000.00
<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 34 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN SENIORS HOUSING ASSOCIATION (SENIORS HOUSING PAC)**

Mailing Address 5225 WISCONSIN AVE., NW  
SUITE 500

City WASHINGTON State DC Zip Code 20015-2034

FEC ID number of contributing federal political committee. **C** C00325332

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

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

**Transaction ID : SA11C.220062**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**AMERICANS FOR THE ARTS ACTION FUND PAC**

Mailing Address 1275 K ST NW  
SUITE 1200

City WASHINGTON State DC Zip Code 20005-4069

FEC ID number of contributing federal political committee. **C** C00410126

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 / 05 / 2025

**Transaction ID : SA11C.220065**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BUILDING OWNERS AND MANAGERS ASSOCIATION INTERNATIONAL POLIT**

Mailing Address 1101 15TH ST., NW  
SUITE 800

City WASHINGTON State DC Zip Code 20005-5021

FEC ID number of contributing federal political committee. **C** C00106435

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 / 19 / 2025

**Transaction ID : SA11C.221139**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3500.00

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

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

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

FOR LINE NUMBER: PAGE 35 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
ELEVANCE HEALTH, INC. POLITICAL ACTION COMMITTEE (ELEVANCE H  
 Mailing Address 1001 PENNSYLVANIA AVENUE, NW  
 SUITE 710  
 City WASHINGTON State DC Zip Code 20004-2513  
 FEC ID number of contributing federal political committee. **C** C00197228  
 Name of Employer Occupation  
 Receipt For: 2026  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 19 / 2025  
**Transaction ID : SA11C.221136**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
FOREVER YOUTH ORGANIZATION UTILIZING A NEW GENERATION PAC  
 Mailing Address 9460 TEGNER ROAD  
 City HILMAR State CA Zip Code 95324-9320  
 FEC ID number of contributing federal political committee. **C** C00683508  
 Name of Employer Occupation  
 Receipt For: 2026  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 14 / 2025  
**Transaction ID : SA11C.219918**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
GRAYROBINSON P.A. POLITICAL ACTION COMMITTEE  
 Mailing Address 301 E PINE ST. SUITE 1400  
 City ORLANDO State FL Zip Code 32801-2741  
 FEC ID number of contributing federal political committee. **C** C00224790  
 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  
 11 / 21 / 2025  
**Transaction ID : SA11C.219980**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 8500.00  
**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 36 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
HSBC TECHNOLOGY AND SERVICES USA INC. FEDERAL PAC (HSBC FEDE

Mailing Address 325 7TH STREET, NW, SUITE 600

City WASHINGTON State DC Zip Code 20004-2805

FEC ID number of contributing federal political committee. **C** C00681437

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 / 19 / 2025

Transaction ID : SA11C.221138

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
IHG SIX CONTINENTS HOTELS INC. POLITICAL ACTION COMMITTEE (I

Mailing Address 3 RAVINIA DRIVE  
SUITE 100

City ATLANTA State GA Zip Code 30346-2121

FEC ID number of contributing federal political committee. **C** C00836692

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  
11 / 21 / 2025

Transaction ID : SA11C.219981

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
IN THE ARENA PAC

Mailing Address PO BOX 7244

City LITTLE ROCK State AR Zip Code 72217-7244

FEC ID number of contributing federal political committee. **C** C00623512

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

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

Transaction ID : SA11C.219679

Amount of Each Receipt this Period  
- 5000.00

Memo Item  
CONTRIBUTION  
CHARGED BACK

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

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

- 3000.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 184	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL ACTION CO**

Mailing Address 1615 L STREET, NW  
SUITE 900

City WASHINGTON State DC Zip Code 20036-

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 14 / 2025

**Transaction ID : SA11C.219854**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLI**

Mailing Address 20 F STREET, NW SUITE 610

City WASHINGTON State DC Zip Code 20001-6707

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 19 / 2025

**Transaction ID : SA11C.221132**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**INTERNATIONAL COUNCIL OF SHOPPING CENTERS INC POLITICAL ACTI**

Mailing Address 975 F STREET, NW  
SUITE 560

City WASHINGTON State DC Zip Code 20004-1516

FEC ID number of contributing federal political committee. **C** C00217638

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 / 31 / 2025

**Transaction ID : SA11C.221248**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4500.00
<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 38 OF 184	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input 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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
JPMORGAN CHASE & CO. FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 875 15TH STREET, NW  
9TH FLOOR

City WASHINGTON	State DC	Zip Code 20005-2221
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00104299

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 14 / 2025

**Transaction ID : SA11C.219925**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
JPMORGAN CHASE & CO. FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 875 15TH STREET, NW  
9TH FLOOR

City WASHINGTON	State DC	Zip Code 20005-2221
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00104299

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2025

**Transaction ID : SA11C.221246**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
LSTA, INC. PAC

Mailing Address 366 MADISON AVENUE  
15TH FLOOR

City NEW YORK	State NY	Zip Code 10017-3193
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00699140

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 / 19 / 2025

**Transaction ID : SA11C.221137**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

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

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

5000.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 OF 184  
(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)  
**Salazar for Congress**

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

Mailing Address PO BOX 60405

City WORCESTER State MA Zip Code 01606-0405

FEC ID number of contributing federal political committee. **C** C00461251

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

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

**Transaction ID : SA11C.220063**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MARRIOTT INTERNATIONAL, INC. POLITICAL ACTION COMMITTEE

Mailing Address 10400 FERNWOOD ROAD

City BETHESDA State MD Zip Code 20817-1102

FEC ID number of contributing federal political committee. **C** C00284810

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 / 19 / 2025

**Transaction ID : SA11C.221133**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MARSH & MCLENNAN COMPANIES, INC. POLITICAL ACTION COMMITTEE

Mailing Address 1166 AVENUE OF THE AMERICAS

City NEW YORK State NY Zip Code 10036-2708

FEC ID number of contributing federal political committee. **C** C00457234

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  
11 / 14 / 2025

**Transaction ID : SA11C.219924**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3500.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
MASTERCARD INTERNATIONAL INC. EMPLOYEE PAC (MASTERCARD PAC)

Mailing Address 1401 I STREET NW  
STE. 1030

City WASHINGTON State DC Zip Code 20005-2225

FEC ID number of contributing federal political committee. **C** C00410274

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 / 05 / 2025

Transaction ID : SA11C.220066

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE (MOR)

Mailing Address 1919 M STREET, NW  
5TH FLOOR

City WASHINGTON State DC Zip Code 20036-3572

FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

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

Transaction ID : SA11C.220067

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
NATIONAL ELEVATOR CONSTRUCTORS PAC/ INTN'L UNION OF ELEVATO

Mailing Address 7154 COLUMBIA GATEWAY DRIVE

City COLUMBIA State MD Zip Code 21046-2132

FEC ID number of contributing federal political committee. **C** C00383950

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

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

Transaction ID : SA11C.221095

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4500.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL FEDERATION OF INDEPENDENT BUSINESS FEDERAL POLITICA**

Mailing Address 555 12TH ST NW  
SUITE 1001

City WASHINGTON State DC Zip Code 20004-1267

FEC ID number of contributing federal political committee. **C** C00101105

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  
11 / 14 / 2025

**Transaction ID : SA11C.219917**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL RURAL LETTER CARRIERS' ASSOCIATION POLITICAL ACTION**

Mailing Address 1630 DUKE STREET  
2ND FLOOR

City ALEXANDRIA State VA Zip Code 22314-

FEC ID number of contributing federal political committee. **C** C00072025

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 23 / 2025

**Transaction ID : SA11C.219755**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE I**

Mailing Address 600 13TH STREET, NW  
SUITE 1000

City WASHINGTON State DC Zip Code 20005-

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 23 / 2025

**Transaction ID : SA11C.219753**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 3500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 184
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input 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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE I**

Mailing Address 600 13TH STREET, NW  
SUITE 1000

City WASHINGTON State DC Zip Code 20005-

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 23 / 2025

**Transaction ID : SA11C.219754**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ROCKET PAC**

Mailing Address 101 S. WASHINGTON SQ.  
SUITE 300

City LANSING State MI Zip Code 48933-1732

FEC ID number of contributing federal political committee. **C** C00388827

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2025

**Transaction ID : SA11C.221247**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ROYAL CARIBBEAN GROUP USA INC. PAC**

Mailing Address 2350 KERNER BLVD., SUITE 250

City SAN RAFAEL State CA Zip Code 94901-5596

FEC ID number of contributing federal political committee. **C** C00869230

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

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

**Transaction ID : SA11C.220064**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	6000.00
<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 43 OF 184	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input 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)  
**Salazar for Congress**

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

Mailing Address 24950 COUNTRY CLUB BLVD, STE 340

City NORTH OLMSTED	State OH	Zip Code 44070-5333
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00001636

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 / 05 / 2025

**Transaction ID : SA11C.220061**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
THE COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION C

Mailing Address 701 PENNSYLVANIA AVENUE, NW  
SUITE 750

City WASHINGTON	State DC	Zip Code 20004-2661
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00039578

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 19 / 2025

**Transaction ID : SA11C.221129**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
U.S. TRAVEL ASSOCIATION PAC

Mailing Address 1100 NEW YORK AVENUE  
SUITE 450W

City WASHINGTON	State DC	Zip Code 20005-3934
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00457754

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 / 31 / 2025

**Transaction ID : SA11C.221244**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

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

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

3000.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
ZILLOW GROUP, INC. POLITICAL ACTION COMMITTEE (ZG PAC)

Mailing Address 1301 SECOND AVENUE  
FLOOR 31

City SEATTLE State WA Zip Code 98101-0003

FEC ID number of contributing federal political committee. **C** C00699439

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

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

Transaction ID : SA11C.220027

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**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).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	49500.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN BATTLEGROUND FUND**

Mailing Address PO BOX 30844

City: **BETHESDA** State: **MD** Zip Code: **20824-0844**

FEC ID number of contributing federal political committee: **C C00857649**

Name of Employer: Occupation:

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**8303.90**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**12 / 19 / 2025**

**Transaction ID : SA12.221134**

Amount of Each Receipt this Period  
**6598.33**

Memo Item  
**TRANSFER**  
**TRANSFER OF JOINT FUNDRAISING PROCEEDS**

**B.** Full Name (Last, First, Middle Initial)  
**ARRINGTON, DAVID, , ,**

Mailing Address 500 W WALL ST  
SUITE 300

City: **MIDLAND** State: **TX** Zip Code: **79701-5093**

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

Name of Employer: Occupation:  
**INFORMATION REQUESTED PER BEST EFFC** **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**1000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**04 / 07 / 2025**

**Transaction ID : SA12.221187**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**TRANSFER**  
**JFC ATTRIB: AMERICAN BATTLEGROUND FUND**

**C.** Full Name (Last, First, Middle Initial)  
**MABEE, GAYLA, , ,**

Mailing Address 6 DESTA DRIVE  
STE. 5500

City: **MIDLAND** State: **TX** Zip Code: **79705-5580**

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

Name of Employer: Occupation:  
**HOMEMAKER** **HOMEMAKER**

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**1875.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**04 / 30 / 2025**

**Transaction ID : SA12.221186**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**TRANSFER**  
**JFC ATTRIB: AMERICAN BATTLEGROUND FUND**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **6598.33**

**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 46 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
MABEE, JOHN, , ,

Mailing Address 6 DESTA DRIVE  
STE. 5500

City MIDLAND State TX Zip Code 79705-5580

FEC ID number of contributing federal political committee.

Name of Employer MABEE RANCH Occupation MANAGER

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 30 / 2025

Transaction ID : SA12.221185

Amount of Each Receipt this Period

Memo Item  
TRANSFER  
JFC ATTRIB: AMERICAN BATTLEGROUND FUND

**B.** Full Name (Last, First, Middle Initial)  
SCHARBAUER, DOUGLAS, , ,

Mailing Address 2411 STUTZ PL

City MIDLAND State TX Zip Code 79705-4931

FEC ID number of contributing federal political committee.

Name of Employer SELF-EMPLOYED Occupation INVESTOR

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 18 / 2025

Transaction ID : SA12.221189

Amount of Each Receipt this Period

Memo Item  
TRANSFER  
JFC ATTRIB: AMERICAN BATTLEGROUND FUND

**C.** Full Name (Last, First, Middle Initial)  
SINCLAIR, DONALD, , ,

Mailing Address 3512 ALBANS RD

City HOUSTON State TX Zip Code 77005-2108

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 24 / 2025

Transaction ID : SA12.221188

Amount of Each Receipt this Period

Memo Item  
TRANSFER  
JFC ATTRIB: AMERICAN BATTLEGROUND FUND

**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 47 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN BATTLEGROUND FUND**

Mailing Address PO BOX 30844

City: **BETHESDA** State: **MD** Zip Code: **20824-0844**

FEC ID number of contributing federal political committee: **C C00857649**

Name of Employer: Occupation:

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: **8303.90**

Date of Receipt: **12 / 19 / 2025**

**Transaction ID : SA12.221135**

Amount of Each Receipt this Period: **71.91**

Memo Item  
**TRANSFER**  
**TRANSFER OF JOINT FUNDRAISING PROCEEDS**

**B.** Full Name (Last, First, Middle Initial)  
**SCHARBAUER, DOUGLAS, , ,**

Mailing Address 2411 STUTZ PL

City: **MIDLAND** State: **TX** Zip Code: **79705-4931**

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

Name of Employer: Occupation:  
**SELF-EMPLOYED** **INVESTOR**

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: **3578.62**

Date of Receipt: **07 / 18 / 2025**

**Transaction ID : SA12.221184**

Amount of Each Receipt this Period: **78.62**

Memo Item  
**TRANSFER**  
**JFC ATTRIB: AMERICAN BATTLEGROUND FUND**

**C.** Full Name (Last, First, Middle Initial)  
**GOP WINNING WOMEN 2026**

Mailing Address 228 S WASHINGTON ST STE 115

City: **ALEXANDRIA** State: **VA** Zip Code: **22314-5404**

FEC ID number of contributing federal political committee: **C C00899633**

Name of Employer: Occupation:

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: **19508.80**

Date of Receipt: **12 / 31 / 2025**

**Transaction ID : SA12.221231**

Amount of Each Receipt this Period: **6426.00**

Memo Item  
**TRANSFER**  
**TRANSFER OF JOINT FUNDRAISING PROCEEDS**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **6497.91**

**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 48 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
ASNESS, CLIFF, , ,

Mailing Address 730 THIRD AVE  
11TH FL

City NEW YORK State NY Zip Code 10017-3216

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

Name of Employer AQR CAPITAL Occupation FINANCE

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

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

Transaction ID : SA12.221234

Amount of Each Receipt this Period  
3500.00

Memo Item  
TRANSFER  
JFC ATTRIB: GOP WINNING WOMEN 2026

**B.** Full Name (Last, First, Middle Initial)  
ASNESS, LAUREL, , ,

Mailing Address 730 THIRD AVE  
11TH FL

City NEW YORK State NY Zip Code 10017-3216

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

Name of Employer SELF-EMPLOYED Occupation HOME MANAGER

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

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

Transaction ID : SA12.221233

Amount of Each Receipt this Period  
3500.00

Memo Item  
TRANSFER  
JFC ATTRIB: GOP WINNING WOMEN 2026

**C.** Full Name (Last, First, Middle Initial)  
GOP WINNING WOMEN 2026

Mailing Address 228 S WASHINGTON ST STE 115

City ALEXANDRIA State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00899633

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
19508.80

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2025

Transaction ID : SA12.221232

Amount of Each Receipt this Period  
6426.00

Memo Item  
TRANSFER  
TRANSFER OF JOINT FUNDRAISING PROCEEDS

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6426.00

**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 49 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
ASNESS, CLIFF, , ,

Mailing Address 730 THIRD AVE  
11TH FL

City NEW YORK State NY Zip Code 10017-3216

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

Name of Employer AQR CAPITAL Occupation FINANCE

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

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

Transaction ID : SA12.221236

Amount of Each Receipt this Period  
3500.00

Memo Item  
TRANSFER  
JFC ATTRIB: GOP WINNING WOMEN 2026

**B.** Full Name (Last, First, Middle Initial)  
ASNESS, LAUREL, , ,

Mailing Address 730 THIRD AVE  
11TH FL

City NEW YORK State NY Zip Code 10017-3216

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

Name of Employer SELF-EMPLOYED Occupation HOME MANAGER

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

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

Transaction ID : SA12.221235

Amount of Each Receipt this Period  
3500.00

Memo Item  
TRANSFER  
JFC ATTRIB: GOP WINNING WOMEN 2026

**C.** Full Name (Last, First, Middle Initial)  
HISPANIC LEADERSHIP TRUST PARTNERSHIP

Mailing Address PO BOX 341027

City AUSTIN State TX Zip Code 78734-0018

FEC ID number of contributing federal political committee. **C** C00816108

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 29 / 2025

Transaction ID : SA12.221190

Amount of Each Receipt this Period  
2600.00

Memo Item  
TRANSFER  
TRANSFER OF JOINT FUNDRAISING PROCEEDS

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2600.00

**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 50 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
JENKINS, WILLIAM, , ,

Mailing Address 2121 KIRBY DRIVE  
UNIT 58

City HOUSTON State TX Zip Code 77019-6066

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2990.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 29 / 2025

Transaction ID : SA12.221312

Amount of Each Receipt this Period  
2990.00

Memo Item  
TRANSFER

JFC ATTRIB: HISPANIC LEADERSHIP TRUST PARTNERSHIP

**B.** Full Name (Last, First, Middle Initial)  
SEWELL, CARL, , ,

Mailing Address 8111 DOUGLAS AVENUE  
STE. 800

City DALLAS State TX Zip Code 75225-

FEC ID number of contributing federal political committee. C

Name of Employer SEWELL AUTOMOTIVE COMPANIES Occupation CHAIRMAN

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 02 / 2025

Transaction ID : SA12.221310

Amount of Each Receipt this Period  
1400.00

Memo Item  
TRANSFER

JFC ATTRIB: HISPANIC LEADERSHIP TRUST PARTNERSHIP

**C.** Full Name (Last, First, Middle Initial)  
THOMAS, RALPH, B., ,

Mailing Address 909 FANNIN STREET  
SUITE 2907

City HOUSTON State TX Zip Code 77010-1024

FEC ID number of contributing federal political committee. C

Name of Employer FAYEZ SAROFIM & CO. Occupation SR. VICE PRESIDENT

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 29 / 2025

Transaction ID : SA12.221311

Amount of Each Receipt this Period  
400.00

Memo Item  
TRANSFER

JFC ATTRIB: HISPANIC LEADERSHIP TRUST PARTNERSHIP

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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 51 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SALAZAR VICTORY COMMITTEE**

Mailing Address 3725 WEST FLAGLER STREET  
#281

City MIAMI State FL Zip Code 33134-1601

FEC ID number of contributing federal political committee. **C** C00769711

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
239786.26

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 30 / 2025

**Transaction ID : SA12.221198**

Amount of Each Receipt this Period  
71502.49

Memo Item  
TRANSFER

**B.** Full Name (Last, First, Middle Initial)  
**ALBAREDA, NELSON, J., ,**

Mailing Address 2301 NORTHWEST 87TH AVENUE  
STE 600

City DORAL State FL Zip Code 33172-2412

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

Name of Employer Occupation  
ENGAGE LIVE, LLC PRESIDENT

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

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

**Transaction ID : SA.219631.11.Q425**

Amount of Each Receipt this Period  
3500.00

Memo Item  
TRANSFER  
PARTNERSHIP ATTRIB: ENGAGE LIVE LLC

**C.** Full Name (Last, First, Middle Initial)  
**ALVAREZ, JORGE, L., ,**

Mailing Address 13419 SOUTHWEST 56TH STREET

City MIAMI State FL Zip Code 33175-6117

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

Name of Employer Occupation  
DENTAL GROUP OF SOUTH FLORIDA MILLE DENTIST

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 26 / 2025

**Transaction ID : SA.221195.11.Q425**

Amount of Each Receipt this Period  
3500.00

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 71502.49

**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 52 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
BLUMBERG, PHILIP, F., ,

Mailing Address 465 BRICKELL AVENUE  
APT. 1018

City MIAMI State FL Zip Code 33131-

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
BLUMBERG CAPITAL PARTNERS CHAIRMAN

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 14 / 2025

Transaction ID : SA.219919.11.Q425

Amount of Each Receipt this Period  
3500.00

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**B.** Full Name (Last, First, Middle Initial)  
BOTI, REGINO, , ,

Mailing Address 3880 HARDIE AVENUE

City MIAMI State FL Zip Code 33133-

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
ACM, LLC OWNER

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
516.53

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 14 / 2025

Transaction ID : SA.219861.11.Q425

Amount of Each Receipt this Period  
516.53

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**C.** Full Name (Last, First, Middle Initial)  
BURSTYN, SEAN, , ,

Mailing Address 1000 BRICKELL PLZ  
PH 5204

City MIAMI State FL Zip Code 33131-

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
BURSTYN LAW LAWYER

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3747.66

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2025

Transaction ID : SA.219795.11.Q425

Amount of Each Receipt this Period  
3500.00

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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 53 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
CABRERIZO, ANIA, , ,

Mailing Address 13195 BISCAYNE BAY DRIVE

City NORTH MIAMI State FL Zip Code 33181-2204

FEC ID number of contributing federal political committee. C

Name of Employer SELF-EMPLOYED Occupation DENTIST

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2025

Transaction ID : SA.219601.11.Q425

Amount of Each Receipt this Period  
3500.00

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**B.** Full Name (Last, First, Middle Initial)  
CASTRO, VICENTE, , ,

Mailing Address 9705 SOUTHWEST 108TH TERRACE

City MIAMI State FL Zip Code 33176-2805

FEC ID number of contributing federal political committee. C

Name of Employer AKHMEN INSURANCE Occupation PRESIDENT & CEO

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 26 / 2025

Transaction ID : SA.221193.11.Q425

Amount of Each Receipt this Period  
3500.00

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**C.** Full Name (Last, First, Middle Initial)  
DE LA GUARDIA, CLAUDIA, , ,

Mailing Address 9001 SW 10TH TERRACE

City MIAMI State FL Zip Code 33174-

FEC ID number of contributing federal political committee. C

Name of Employer ACA HOME HEALTH, LLC Occupation OWNER

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
516.53

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

Transaction ID : SA.219846.11.Q425

Amount of Each Receipt this Period  
516.53

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

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

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

0.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
DEWEY, KEITH, CARTER, ,

Mailing Address 17842 SOUTHWEST 77TH COURT

City PALMETTO BAY	State FL	Zip Code 33157-
----------------------	-------------	--------------------

FEC ID number of contributing federal political committee.

Name of Employer DATAREMOTE	Occupation SVP
--------------------------------	-------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA.219920.11.Q425**

Amount of Each Receipt this Period

Memo Item  
 TRANSFER  
 TRANSFER FROM SALAZAR VICTORY

**B.** Full Name (Last, First, Middle Initial)  
DIAZ, ANTONIO, , ,

Mailing Address 2800 ALHAMBRA CIR

City CORAL GABLES	State FL	Zip Code 33134-
----------------------	-------------	--------------------

FEC ID number of contributing federal political committee.

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA.219958.11.Q425**

Amount of Each Receipt this Period

Memo Item  
 TRANSFER  
 TRANSFER FROM SALAZAR VICTORY

**C.** Full Name (Last, First, Middle Initial)  
DORTICOS, ALEXANDER, , ,

Mailing Address 445 NW FOURTH ST

City MIAMI	State FL	Zip Code 33128-
---------------	-------------	--------------------

FEC ID number of contributing federal political committee.

Name of Employer RUSO Y RUFIN	Occupation PRESIDENT
----------------------------------	-------------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA.219859.11.Q425**

Amount of Each Receipt this Period

Memo Item  
 TRANSFER  
 TRANSFER FROM SALAZAR VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="0.00"/>

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
EIROA, ENA, V., ,

Mailing Address 1130 ANDORA AVENUE

City: CORAL GABLES      State: FL      Zip Code: 33146-3215

FEC ID number of contributing federal political committee: C

Name of Employer: MATCON      Occupation: EXECUTIVE

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 26 / 2025

Transaction ID : SA.221197.11.Q425

Amount of Each Receipt this Period  
3500.00

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**B.** Full Name (Last, First, Middle Initial)  
GARCIA, JOSE, A., ,

Mailing Address 5390 SOUTHWEST 84TH STREET

City: MIAMI      State: FL      Zip Code: 33143-8435

FEC ID number of contributing federal political committee: C

Name of Employer: RETIRED      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  
09 / 30 / 2025

Transaction ID : SA.219635.11.Q425

Amount of Each Receipt this Period  
2500.00

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**C.** Full Name (Last, First, Middle Initial)  
GARCIA, WIMER, , ,

Mailing Address 5001 COLLINS AVENUE  
PH 4

City: MIAMI      State: FL      Zip Code: 33140-

FEC ID number of contributing federal political committee: C

Name of Employer: SELF-EMPLOYED      Occupation: REAL ESTATE DEVELOPMENT

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 / 14 / 2025

Transaction ID : SA.219921.11.Q425

Amount of Each Receipt this Period  
500.00

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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 56 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
GOMEZ, BEATRIZ, , ,

Mailing Address 18600 SW 157 AVE

City MIAMI State FL Zip Code 33187-

FEC ID number of contributing federal political committee. C

Name of Employer EVENTS BY BEA CORP Occupation BUSINESS OWNER

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
516.53

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 14 / 2025

Transaction ID : SA.219864.11.Q425

Amount of Each Receipt this Period  
516.53

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**B.** Full Name (Last, First, Middle Initial)  
GONZALEZ, RAUL, , ,

Mailing Address 7895 SW 79TH TERRACE

City MIAMI State FL Zip Code 33143-4033

FEC ID number of contributing federal political committee. C

Name of Employer NUFRONT Occupation REAL ESTATE AGENT

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 / 14 / 2025

Transaction ID : SA.219856.11.Q425

Amount of Each Receipt this Period  
500.00

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**C.** Full Name (Last, First, Middle Initial)  
HANONO, FANNY, , ,

Mailing Address 1452 PRESIDENTIAL WAY

City MIAMI State FL Zip Code 33179-6421

FEC ID number of contributing federal political committee. C

Name of Employer GFX INC Occupation PRESIDENT

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
260.25

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

Transaction ID : SA.219848.11.Q425

Amount of Each Receipt this Period  
260.25

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

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

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

0.00

**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 57 OF 184
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
HERRERA, IVAN, A., MR.,

Mailing Address 13010 MAR ST

City CORAL GABLES	State FL	Zip Code 33156-6428
----------------------	-------------	------------------------

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

Name of Employer UNIVISTA INSURANCE	Occupation CEO
--	-------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 25 / 2025

**Transaction ID : SA.219979.11.Q425**

Amount of Each Receipt this Period  
3500.00

Memo Item  
TRANSFER  
PARTNERSHIP ATTRIB: UNIVISTA INSURANCE

**B.** Full Name (Last, First, Middle Initial)  
IGLESIAS, JESUS, A., ,

Mailing Address 1130 ANDORA AVENUE

City CORAL GABLES	State FL	Zip Code 33146-3215
----------------------	-------------	------------------------

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

Name of Employer MATCON	Occupation CEO
----------------------------	-------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 26 / 2025

**Transaction ID : SA.221191.11.Q425**

Amount of Each Receipt this Period  
3500.00

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**C.** Full Name (Last, First, Middle Initial)  
JACOBS, DON, , ,

Mailing Address 2569 LAKE

City MIAMI BEACH	State FL	Zip Code 33140-4228
---------------------	-------------	------------------------

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

Name of Employer DON JACOBS IMPORTS, INC.	Occupation PRESIDENT
--	-------------------------

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  
 09 / 30 / 2025

**Transaction ID : SA.219582.11.Q425**

Amount of Each Receipt this Period  
1000.00

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

<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: PAGE 58 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
LEIVA, RACIEL, , ,

Mailing Address 301 NORTHWEST 127TH AVENUE

City MIAMI	State FL	Zip Code 33182-1117
---------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer RTECH ENGINEERING LLC	Occupation ELECTRICAL CONTRACTOR
---	-------------------------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA.219923.11.Q425**

Amount of Each Receipt this Period

Memo Item  
 TRANSFER  
 PARTNERSHIP ATTRIB: RTECH ENGINEERING LLC

**B.** Full Name (Last, First, Middle Initial)  
LEON, DAYNE, , ,

Mailing Address 12284 SW 82ND TER

City MIAMI	State FL	Zip Code 33183-
---------------	-------------	--------------------

FEC ID number of contributing federal political committee.

Name of Employer SELF-EMPLOYED	Occupation BUSINESS OWNER
-----------------------------------	------------------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA.219849.11.Q425**

Amount of Each Receipt this Period

Memo Item  
 TRANSFER  
 TRANSFER FROM SALAZAR VICTORY

**C.** Full Name (Last, First, Middle Initial)  
LIPPMAN, HARLEY, , MR.,

Mailing Address 334 JEFFERSON AVE

City MIAMI BEACH	State FL	Zip Code 33139-6803
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer GENESIS10	Occupation CEO
-------------------------------	-------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA.219929.11.Q425**

Amount of Each Receipt this Period

Memo Item  
 TRANSFER  
 TRANSFER FROM SALAZAR VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
LOPEZ, SANDRITA, , ,

Mailing Address 3031 SW 121 AVE

City MIAMI State FL Zip Code 33175-

FEC ID number of contributing federal political committee.

Name of Employer SELF-EMPLOYED Occupation CEO

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

Transaction ID : SA.219797.11.Q425

Amount of Each Receipt this Period

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**B.** Full Name (Last, First, Middle Initial)  
MALCOM, RANDY, , ,

Mailing Address 13640 OLD CUTLER RD

City MIAMI State FL Zip Code 33158-

FEC ID number of contributing federal political committee.

Name of Employer MASICA DOY Occupation MISICIAN

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

Transaction ID : SA.219863.11.Q425

Amount of Each Receipt this Period

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**C.** Full Name (Last, First, Middle Initial)  
MAZZA, FRANK, , ,

Mailing Address 4700 SOUTHWEST 87TH AVENUE

City MIAMI State FL Zip Code 33165-

FEC ID number of contributing federal political committee.

Name of Employer GRAZIANOS Occupation CFO

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

Transaction ID : SA.219860.11.Q425

Amount of Each Receipt this Period

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**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 60 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
MORGAN, MARABEL, , ,

Mailing Address 4565 SABAL PALM ROAD

City MIAMI	State FL	Zip Code 33137-
---------------	-------------	--------------------

FEC ID number of contributing federal political committee.

Name of Employer SELF-EMPLOYED	Occupation ARTIST
-----------------------------------	----------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA.219756.11.Q425**

Amount of Each Receipt this Period

Memo Item  
 TRANSFER  
 TRANSFER FROM SALAZAR VICTORY

**B.** Full Name (Last, First, Middle Initial)  
MURGADO, MARIO, , MR.,

Mailing Address 665 SW 8TH STREET

City MIAMI	State FL	Zip Code 33130-3308
---------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer MURGADO AUTOMOTIVE GROUP	Occupation PRESIDENT & CEO
--	-------------------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA.219604.11.Q425**

Amount of Each Receipt this Period

Memo Item  
 TRANSFER  
 TRANSFER FROM SALAZAR VICTORY

**C.** Full Name (Last, First, Middle Initial)  
NUNEZ BAEZA, BRUNILDA, , ,

Mailing Address 1581 BRICKELL AVENUE  
APT. 301

City MIAMI	State FL	Zip Code 33129-1233
---------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA.219847.11.Q425**

Amount of Each Receipt this Period

Memo Item  
 TRANSFER  
 TRANSFER FROM SALAZAR VICTORY

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 184
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
PEREZ, RAYSSA, E., ,

Mailing Address 18441 SOUTHWEST 210TH STREET

City MIAMI	State FL	Zip Code 33187-4115
---------------	-------------	------------------------

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

Name of Employer DENTAL GROUP OF SOUTH FLORIDA	Occupation OFFICE MANAGER
---	------------------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 26 / 2025

**Transaction ID : SA.221194.11.Q425**

Amount of Each Receipt this Period  
3500.00

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**B.** Full Name (Last, First, Middle Initial)  
PRESTON, HENRY, B., ,

Mailing Address 800 N TAMIAMI TR  
UNIT 610

City SARASOTA	State FL	Zip Code 34236-4007
------------------	-------------	------------------------

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

Name of Employer PRESTON GIULIANO CAPITAL PARTNERS LI	Occupation REAL ESTATE AGENT
--	---------------------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4333.06

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

**Transaction ID : SA.217771.11.Q425**

Amount of Each Receipt this Period  
- 833.06

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**C.** Full Name (Last, First, Middle Initial)  
RODRIGUEZ, DIANA, , ,

Mailing Address 2423 SW 147 AVE

City MIAMI	State FL	Zip Code 33185-
---------------	-------------	--------------------

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

Name of Employer SELF-EMPLOYED	Occupation MEDICAL DOCTOR
-----------------------------------	------------------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1549.59

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 14 / 2025

**Transaction ID : SA.219857.11.Q425**

Amount of Each Receipt this Period  
1549.59

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

<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: PAGE 62 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
SANABRIA, ORELVYS, , ,

Mailing Address 12591 SW 97 ST

City MIAMI State FL Zip Code 33186-

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

Name of Employer MIAMI PRO AGENTS LLC Occupation REALTOR

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1033.06

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 14 / 2025

Transaction ID : SA.219862.11.Q425

Amount of Each Receipt this Period  
1033.06

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**B.** Full Name (Last, First, Middle Initial)  
SHERMAN, BRUCE, S. , ,

Mailing Address 7134 MELROSE CASTLE LANE

City BOCA RATON State FL Zip Code 33496-1424

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

Name of Employer MIAMI MARLINS Occupation CHAIRMAN

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

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

Transaction ID : SA.220028.11.Q425

Amount of Each Receipt this Period  
3500.00

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**C.** Full Name (Last, First, Middle Initial)  
SPIZALE, LYNETTE, M. , ,

Mailing Address 7491 SOUTHWEST 59TH STREET

City MIAMI State FL Zip Code 33143-1748

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 26 / 2025

Transaction ID : SA.221196.11.Q425

Amount of Each Receipt this Period  
3500.00

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

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

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

0.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
TAGHER, CHARBEL, , ,

Mailing Address 10 EDGEWATER DR  
APT 8E

City CORAL GABLES State FL Zip Code 33133-6965

FEC ID number of contributing federal political committee.

Name of Employer SPECIFIED TECHNOLOGIES INC Occupation BUSINESS OWNER

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Transaction ID : SA.219850.11.Q425

Amount of Each Receipt this Period

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**B.** Full Name (Last, First, Middle Initial)  
ZARCO, ROBERT, , MR.,

Mailing Address 2 S. BISCAYNE BLVD  
SUITE 3400

City MIAMI State FL Zip Code 33131-1807

FEC ID number of contributing federal political committee.

Name of Employer ZARCO EINHORN SALKOWSKI BRITO PA Occupation ATTORNEY

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 19 / 2025

Transaction ID : SA.221097.11.Q425

Amount of Each Receipt this Period

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**C.** Full Name (Last, First, Middle Initial)  
ENGAGE LIVE LLC

Mailing Address 2301 NORTHWEST 87TH AVENUE  
6 FLOOR

City DORAL State FL Zip Code 33172-2403

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Transaction ID : SA.219630.11.Q425

Amount of Each Receipt this Period

Memo Item  
TRANSFER  
SEE PARTNERSHIP ATTRIB

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

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 184
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
RTECH ENGINEERING LLC

Mailing Address 301 NORTHWEST 127TH AVENUE

City MIAMI	State FL	Zip Code 33182-
---------------	-------------	--------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 14 / 2025

**Transaction ID : SA.219922.11.Q425**

Amount of Each Receipt this Period  
3500.00

Memo Item  
TRANSFER  
SEE PARTNERSHIP ATTRIB

**B.** Full Name (Last, First, Middle Initial)  
UNIVISTA INSURANCE

Mailing Address 5195 NORTHWEST 77TH AVENUE

City MIAMI	State FL	Zip Code 33166-5524
---------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 25 / 2025

**Transaction ID : SA.219978.11.Q425**

Amount of Each Receipt this Period  
3500.00

Memo Item  
TRANSFER  
SEE PARTNERSHIP ATTRIB

**C.** Full Name (Last, First, Middle Initial)  
SALAZAR VICTORY COMMITTEE

Mailing Address 3725 WEST FLAGLER STREET #281

City MIAMI	State FL	Zip Code 33134-1601
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00769711

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
239786.26

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2025

**Transaction ID : SA12.221199**

Amount of Each Receipt this Period  
40102.52

Memo Item  
TRANSFER

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	40102.52
<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 65 OF 184
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
ALBAREDA, NELSON, J., ,

Mailing Address 2301 NORTHWEST 87TH AVENUE  
STE 600

City DORAL      State FL      Zip Code 33172-2412

FEC ID number of contributing federal political committee.

Name of Employer ENGAGE LIVE, LLC      Occupation PRESIDENT

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

**Transaction ID : SA.219631.12.Q425**

Amount of Each Receipt this Period

Memo Item  
TRANSFER  
PARTNERSHIP ATTRIB: ENGAGE LIVE LLC

**B.** Full Name (Last, First, Middle Initial)  
ALVAREZ, JORGE, L., ,

Mailing Address 13419 SOUTHWEST 56TH STREET

City MIAMI      State FL      Zip Code 33175-6117

FEC ID number of contributing federal political committee.

Name of Employer DENTAL GROUP OF SOUTH FLORIDA MILLEI      Occupation DENTIST

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 26 / 2025

**Transaction ID : SA.221195.12.Q425**

Amount of Each Receipt this Period

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**C.** Full Name (Last, First, Middle Initial)  
BLUMBERG, PHILIP, F., ,

Mailing Address 465 BRICKELL AVENUE  
APT. 1018

City MIAMI      State FL      Zip Code 33131-

FEC ID number of contributing federal political committee.

Name of Employer BLUMBERG CAPITAL PARTNERS      Occupation CHAIRMAN

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 14 / 2025

**Transaction ID : SA.219919.12.Q425**

Amount of Each Receipt this Period

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="0.00"/>

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 66 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
BURSTYN, SEAN, , ,

Mailing Address 1000 BRICKELL PLZ  
PH 5204

City MIAMI State FL Zip Code 33131-

FEC ID number of contributing federal political committee.

Name of Employer BURSTYN LAW Occupation LAWYER

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2025

Transaction ID : SA.219795.12.Q425

Amount of Each Receipt this Period

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**B.** Full Name (Last, First, Middle Initial)  
CABRERIZO, ANIA, , ,

Mailing Address 13195 BISCAYNE BAY DRIVE

City NORTH MIAMI State FL Zip Code 33181-2204

FEC ID number of contributing federal political committee.

Name of Employer SELF-EMPLOYED Occupation DENTIST

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 17 / 2025

Transaction ID : SA.219601.12.Q425

Amount of Each Receipt this Period

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**C.** Full Name (Last, First, Middle Initial)  
CASTRO, VICENTE, , ,

Mailing Address 9705 SOUTHWEST 108TH TERRACE

City MIAMI State FL Zip Code 33176-2805

FEC ID number of contributing federal political committee.

Name of Employer AKHMEN INSURANCE Occupation PRESIDENT & CEO

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 26 / 2025

Transaction ID : SA.221193.12.Q425

Amount of Each Receipt this Period

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**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 67 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
CRUZ, CARLOS, , ,

Mailing Address 4945 ORDUNA DR.

City: CORAL GABLES      State: FL      Zip Code: 33146-2035

FEC ID number of contributing federal political committee: C

Name of Employer: AMBR      Occupation: OWNER

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date: 7000.00

Date of Receipt: 11 / 19 / 2025

Transaction ID : SA.219982.12.Q425

Amount of Each Receipt this Period: 1834.71

Memo Item  
TRANSFER  
PARTNERSHIP ATTRIB: CRUZ HOSPITALITY GROUP LLC

**B.** Full Name (Last, First, Middle Initial)  
DORTICOS, ALEXANDER, , ,

Mailing Address 445 NW FOURTH ST

City: MIAMI      State: FL      Zip Code: 33128-

FEC ID number of contributing federal political committee: C

Name of Employer: RUSO Y RUFIN      Occupation: PRESIDENT

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date: 3615.70

Date of Receipt: 11 / 14 / 2025

Transaction ID : SA.219859.12.Q425

Amount of Each Receipt this Period: 115.70

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**C.** Full Name (Last, First, Middle Initial)  
EIROA, ENA, V., ,

Mailing Address 1130 ANDORA AVENUE

City: CORAL GABLES      State: FL      Zip Code: 33146-3215

FEC ID number of contributing federal political committee: C

Name of Employer: MATCON      Occupation: EXECUTIVE

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date: 5000.00

Date of Receipt: 12 / 26 / 2025

Transaction ID : SA.221197.12.Q425

Amount of Each Receipt this Period: 1500.00

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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 68 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
HERRERA, IVAN, A., MR.,

Mailing Address 13010 MAR ST

City: CORAL GABLES      State: FL      Zip Code: 33156-6428

FEC ID number of contributing federal political committee: C

Name of Employer: UNIVISTA INSURANCE      Occupation: CEO

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date: 7000.00

Date of Receipt: 11 / 25 / 2025

Transaction ID : SA.219979.12.Q425

Amount of Each Receipt this Period: 3500.00

Memo Item  
TRANSFER  
PARTNERSHIP ATTRIB: UNIVISTA INSURANCE

**B.** Full Name (Last, First, Middle Initial)  
IGLESIAS, JESUS, A., ,

Mailing Address 1130 ANDORA AVENUE

City: CORAL GABLES      State: FL      Zip Code: 33146-3215

FEC ID number of contributing federal political committee: C

Name of Employer: MATCON      Occupation: CEO

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date: 7000.00

Date of Receipt: 12 / 26 / 2025

Transaction ID : SA.221191.12.Q425

Amount of Each Receipt this Period: 1500.00

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**C.** Full Name (Last, First, Middle Initial)  
IGLESIAS, JESUS, A., ,

Mailing Address 1130 ANDORA AVENUE

City: CORAL GABLES      State: FL      Zip Code: 33146-3215

FEC ID number of contributing federal political committee: C

Name of Employer: MATCON      Occupation: CEO

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date: 7000.00

Date of Receipt: 12 / 26 / 2025

Transaction ID : SA.221192.12.Q425

Amount of Each Receipt this Period: 2000.00

Memo Item  
TRANSFER  
TRANSFER FROM SALAZAR VICTORY

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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 69 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
LIPPMAN, HARLEY, , MR.,

Mailing Address 334 JEFFERSON AVE

City MIAMI BEACH	State FL	Zip Code 33139-6803
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer GENESIS10	Occupation CEO
-------------------------------	-------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA.219929.12.Q425**

Amount of Each Receipt this Period

Memo Item  
 TRANSFER  
 TRANSFER FROM SALAZAR VICTORY

**B.** Full Name (Last, First, Middle Initial)  
MELLADO, JOSE, R., DR.,

Mailing Address 13195 BISCAYNE BAY DRIVE

City NORTH MIAMI	State FL	Zip Code 33181-2204
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer SELF-EMPLOYED	Occupation DENTIST
-----------------------------------	-----------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA.219602.12.Q425**

Amount of Each Receipt this Period

Memo Item  
 TRANSFER  
 TRANSFER FROM SALAZAR VICTORY

**C.** Full Name (Last, First, Middle Initial)  
MURGADO, MARIO, , MR.,

Mailing Address 665 SW 8TH STREET

City MIAMI	State FL	Zip Code 33130-3308
---------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer MURGADO AUTOMOTIVE GROUP	Occupation PRESIDENT & CEO
--	-------------------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA.219604.12.Q425**

Amount of Each Receipt this Period

Memo Item  
 TRANSFER  
 TRANSFER FROM SALAZAR VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only)..... ▶	<input type="text" value=""/>

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
PEREZ, RAYSSA, E., ,

Mailing Address 18441 SOUTHWEST 210TH STREET

City MIAMI	State FL	Zip Code 33187-4115
---------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer DENTAL GROUP OF SOUTH FLORIDA	Occupation OFFICE MANAGER
---	------------------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA.221194.12.Q425**

Amount of Each Receipt this Period

Memo Item  
 TRANSFER  
 TRANSFER FROM SALAZAR VICTORY

**B.** Full Name (Last, First, Middle Initial)  
PRESTON, HENRY, B., ,

Mailing Address 800 N TAMIAMI TR  
UNIT 610

City SARASOTA	State FL	Zip Code 34236-4007
------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer PRESTON GIULIANO CAPITAL PARTNERS LI	Occupation REAL ESTATE AGENT
--	---------------------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA.217771.12.Q425**

Amount of Each Receipt this Period

Memo Item  
 TRANSFER  
 TRANSFER FROM SALAZAR VICTORY

**C.** Full Name (Last, First, Middle Initial)  
SHERMAN, BRUCE, S., ,

Mailing Address 7134 MELROSE CASTLE LANE

City BOCA RATON	State FL	Zip Code 33496-1424
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer MIAMI MARLINS	Occupation CHAIRMAN
-----------------------------------	------------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA.220028.12.Q425**

Amount of Each Receipt this Period

Memo Item  
 TRANSFER  
 TRANSFER FROM SALAZAR VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only)..... ▶	<input type="text" value="0.00"/>

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 71 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
SPIZALE, LYNETTE, M., ,

Mailing Address 7491 SOUTHWEST 59TH STREET

City MIAMI	State FL	Zip Code 33143-1748
---------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA.221196.12.Q425**

Amount of Each Receipt this Period

Memo Item  
 TRANSFER  
 TRANSFER FROM SALAZAR VICTORY

**B.** Full Name (Last, First, Middle Initial)  
ZARCO, ROBERT, , MR.,

Mailing Address 2 S. BISCAYNE BLVD  
SUITE 3400

City MIAMI	State FL	Zip Code 33131-1807
---------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer ZARCO EINHORN SALKOWSKI BRITO PA	Occupation ATTORNEY
--	------------------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA.221097.12.Q425**

Amount of Each Receipt this Period

Memo Item  
 TRANSFER  
 TRANSFER FROM SALAZAR VICTORY

**C.** Full Name (Last, First, Middle Initial)  
CRUZ HOSPITALITY GROUP LLC

Mailing Address 11337 SOUTHWEST 74TH STREET

City MIAMI	State FL	Zip Code 33173-2648
---------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA.219977.12.Q425**

Amount of Each Receipt this Period

Memo Item  
 TRANSFER  
 SEE PARTNERSHIP ATTRIB

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 72 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
ENGAGE LIVE LLC

Mailing Address 2301 NORTHWEST 87TH AVENUE  
6 FLOOR

City DORAL State FL Zip Code 33172-2403

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Transaction ID : SA.219630.12.Q425

Amount of Each Receipt this Period

Memo Item  
TRANSFER  
SEE PARTNERSHIP ATTRIB

**B.** Full Name (Last, First, Middle Initial)  
UNIVISTA INSURANCE

Mailing Address 5195 NORTHWEST 77TH AVENUE

City MIAMI State FL Zip Code 33166-5524

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 25 / 2025

Transaction ID : SA.219978.12.Q425

Amount of Each Receipt this Period

Memo Item  
TRANSFER  
SEE PARTNERSHIP ATTRIB

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

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).....▶	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="133727.25"/>

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 OF 184  
(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)  
**Salazar for Congress**

**A.** Full Name (Last, First, Middle Initial)  
FIRST AMERICAN BANK

Mailing Address PO BOX 0794

City ELK GROVE VILLAGE State IL Zip Code 60009

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

Transaction ID : SA15.29196

Amount of Each Receipt this Period

Memo Item  
INTEREST EARNED

**B.** Full Name (Last, First, Middle Initial)  
FIRST AMERICAN BANK

Mailing Address PO BOX 0794

City ELK GROVE VILLAGE State IL Zip Code 60009

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

Transaction ID : SA15.30301

Amount of Each Receipt this Period

Memo Item  
INTEREST EARNED

**C.** Full Name (Last, First, Middle Initial)  
FIRST AMERICAN BANK

Mailing Address PO BOX 0794

City ELK GROVE VILLAGE State IL Zip Code 60009

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

Transaction ID : SA15.30324

Amount of Each Receipt this Period

Memo Item  
INTEREST EARNED

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="9393.15"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="9393.15"/>

# 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 74 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. SALAZAR, MARIA, ELVIRA, ,</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2025
Mailing Address 3725 WEST FLAGLER STREET #281		FEC Identification Number C C00714261
City MIAMI	State FL	Zip Code 33134-8033
Purpose of Disbursement REIMBURSEMENT	Category/Type 001	
Candidate Name SALAZAR, MARIA, ELVIRA, ,		Amount of Each Disbursement this Period 70.39
Office Sought: <input checked="" 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: FL District: 27	Transaction ID : SB17.I29173 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2025
Mailing Address PO BOX 6463		FEC Identification Number C
City CAROL STREAM	State IL	Zip Code 60197-6463
Purpose of Disbursement PHONE SVC	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 70.39
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:	Transaction ID : SB17.I29174 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. SALAZAR, MARIA, ELVIRA, ,</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2025
Mailing Address 3725 WEST FLAGLER STREET #281		FEC Identification Number C C00714261
City MIAMI	State FL	Zip Code 33134-8033
Purpose of Disbursement REIMBURSEMENT	Category/Type 001	
Candidate Name SALAZAR, MARIA, ELVIRA, ,		Amount of Each Disbursement this Period 65.70
Office Sought: <input checked="" 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: FL District: 27	Transaction ID : SB17.I30212 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	136.09
<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 75 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement MM / DD / YYYY 11 / 03 / 2025
Mailing Address PO BOX 6463		FEC Identification Number C
City CAROL STREAM	State IL	Zip Code 60197-6463
Purpose of Disbursement PHONE SVC	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 65.70
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:	Transaction ID : SB17.I30213 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. SALAZAR, MARIA, ELVIRA, ,</b>		Date of Disbursement MM / DD / YYYY 12 / 17 / 2025
Mailing Address 3725 WEST FLAGLER STREET #281		FEC Identification Number C C00714261
City MIAMI	State FL	Zip Code 33134-8033
Purpose of Disbursement REIMBURSEMENT	Category/ Type 001	
Candidate Name SALAZAR, MARIA, ELVIRA, ,		Amount of Each Disbursement this Period 43.30
Office Sought: <input checked="" 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: FL District: 27	Transaction ID : SB17.I30315 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. HARRIS TEETER</b>		Date of Disbursement MM / DD / YYYY 12 / 10 / 2025
Mailing Address 401 M STREET SOUTHEAST		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-3469
Purpose of Disbursement FOOD/BEVERAGE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 43.30
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:	Transaction ID : SB17.I30316 <input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	43.30
<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 76 OF 184			
	<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	

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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. SALAZAR, MARIA, ELVIRA, ,</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2025
Mailing Address 3725 WEST FLAGLER STREET #281		FEC Identification Number C C00714261
City MIAMI	State FL	Zip Code 33134-8033
Purpose of Disbursement REIMBURSEMENT	Category/Type 001	
Candidate Name SALAZAR, MARIA, ELVIRA, ,		Amount of Each Disbursement this Period 65.29
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	
<input type="checkbox"/> President		
State: FL	District: 27	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2025
Mailing Address PO BOX 6463		FEC Identification Number C
City CAROL STREAM	State IL	Zip Code 60197-6463
Purpose of Disbursement PHONE SVC	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 65.29
Office Sought: <input type="checkbox"/> House	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	
<input type="checkbox"/> President		
State:	District:	
		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. BENGOCHEA, EYVANA, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2025
Mailing Address 280 RADA COURT		FEC Identification Number C
City CORAL GABLES	State FL	Zip Code 33143
Purpose of Disbursement COMMUNICATIONS CONSULTING	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	
<input type="checkbox"/> President		
State:	District:	
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1065.29
<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 77 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. BENGOCHEA, EYVANA, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2025
Mailing Address 280 RADA COURT		FEC Identification Number C
City CORAL GABLES	State FL	Zip Code 33143
Purpose of Disbursement COMMUNICATIONS CONSULTING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1000.00
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:	Transaction ID : SB17.I29207 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. BENGOCHEA, EYVANA, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2025
Mailing Address 280 RADA COURT		FEC Identification Number C
City CORAL GABLES	State FL	Zip Code 33143
Purpose of Disbursement COMMUNICATIONS CONSULTING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1000.00
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:	Transaction ID : SB17.I30311 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. GARCIA, ANDRES, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2025
Mailing Address 3201 SOUTHWEST 64TH TERRACE		FEC Identification Number C
City MIRAMAR	State FL	Zip Code 33023
Purpose of Disbursement DIGITAL COMMUNICATIONS CONSULTING	Category/ Type 001	
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.I29147 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4500.00
<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 78 OF 184			
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. GARCIA, ANDRES, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2025
Mailing Address 3201 SOUTHWEST 64TH TERRACE		FEC Identification Number C
City MIRAMAR	State FL	Zip Code 33023
Purpose of Disbursement DIGITAL COMMUNICATIONS CONSULTING	Category/ Type 001	
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I29191
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. GARCIA, ANDRES, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2025
Mailing Address 3201 SOUTHWEST 64TH TERRACE		FEC Identification Number C
City MIRAMAR	State FL	Zip Code 33023
Purpose of Disbursement DIGITAL COMMUNICATIONS CONSULTING	Category/ Type 001	
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I30309
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. MENDEZ, ISABELLA, C., ,</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2025
Mailing Address 10236 COMFORT CIRCLE		FEC Identification Number C
City ORLANDO	State FL	Zip Code 32825-8828
Purpose of Disbursement OPERATIONS/LOGISTICS CONSULTING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1000.00
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) ▼	Transaction ID : SB17.I30298
State: District:	<input type="checkbox"/> Memo Item	

<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: PAGE 79 OF 184  
(check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)  
**A. MORAN, TOM, , ,**

Mailing Address 1000 FIRST STREET SOUTHEAST  
APT. 914

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement POLITICAL STRATEGY CONSULTING Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
12 / 08 / 2025

FEC Identification Number  
C

Amount of Each Disbursement this Period  
10000.00

Transaction ID : SB17.I30308

Memo Item

Full Name (Last, First, Middle Initial)  
**B. SAWITZ, STEPHEN, , ,**

Mailing Address 11 WASHINGTON AVENUE

City MIAMI BEACH State FL Zip Code 33139-

Purpose of Disbursement IN-KIND CONTRIBUTION Category/Type

Candidate Name

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

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
11 / 12 / 2025

FEC Identification Number  
C

Amount of Each Disbursement this Period  
1875.00

Transaction ID : SB17.219851

Memo Item EVENT CATERING

Full Name (Last, First, Middle Initial)  
**C. SENIOR, HOWARD, S., ,**

Mailing Address 801 15TH STREET SOUTH  
APT. 417

City ARLINGTON State VA Zip Code 22202-5008

Purpose of Disbursement OPERATIONS/IT CONSULTING Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
11 / 26 / 2025

FEC Identification Number  
C

Amount of Each Disbursement this Period  
2000.00

Transaction ID : SB17.I30299

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 13875.00

**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 80 OF 184			
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2025		
Mailing Address PO BOX 650448			FEC Identification Number C		
City DALLAS	State TX	Zip Code 75265	Amount of Each Disbursement this Period 10715.47		
Purpose of Disbursement CREDIT CARD PAYMENT		Category/ Type 001	Transaction ID : SB17.I29156		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2025		
Mailing Address 4255 AMON CARTER BLVD			FEC Identification Number C		
City FORT WORTH	State TX	Zip Code 76155-2603	Amount of Each Disbursement this Period 790.48		
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : SB17.I30222		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2025		
Mailing Address 4255 AMON CARTER BLVD			FEC Identification Number C		
City FORT WORTH	State TX	Zip Code 76155-2603	Amount of Each Disbursement this Period 604.96		
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : SB17.I30249		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10715.47
<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 81 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2025
Mailing Address 4255 AMON CARTER BLVD		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155-2603
Purpose of Disbursement AIRFARE	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 328.18
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2025
Mailing Address 4255 AMON CARTER BLVD		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155-2603
Purpose of Disbursement AIRFARE	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 183.48
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2025
Mailing Address 4255 AMON CARTER BLVD		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155-2603
Purpose of Disbursement AIRFARE	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period - 328.18
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:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 82 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>		Date of Disbursement MM / DD / YYYY 09 / 01 / 2025
Mailing Address 4255 AMON CARTER BLVD		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155-2603
Purpose of Disbursement AIRFARE	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period - 183.48
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:	Transaction ID : SB17.I30290 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. AMTRAK</b>		Date of Disbursement MM / DD / YYYY 09 / 02 / 2025
Mailing Address 400 NORTH CAPITOL STREET NORTHWEST		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20001
Purpose of Disbursement GROUND TRANSPORTATION	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 1056.00
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:	Transaction ID : SB17.I30264 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. AMTRAK</b>		Date of Disbursement MM / DD / YYYY 09 / 03 / 2025
Mailing Address 400 NORTH CAPITOL STREET NORTHWEST		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20001
Purpose of Disbursement GROUND TRANSPORTATION	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 488.00
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:	Transaction ID : SB17.I30268 <input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 83 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. AMTRAK</b>		M M / D D / Y Y Y Y 09 / 04 / 2025
Mailing Address 400 NORTH CAPITOL STREET NORTHWEST		FEC Identification Number
City WASHINGTON	State DC	Zip Code 20001
Purpose of Disbursement FOOD/BEVERAGE	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period	
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) ▼	20.50
State: District:	Transaction ID : SB17.I30269	
		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. AMTRAK</b>		M M / D D / Y Y Y Y 09 / 05 / 2025
Mailing Address 400 NORTH CAPITOL STREET NORTHWEST		FEC Identification Number
City WASHINGTON	State DC	Zip Code 20001
Purpose of Disbursement GROUND TRANSPORTATION	Category/ Type 002	
Candidate Name	Amount of Each Disbursement this Period	
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) ▼	185.00
State: District:	Transaction ID : SB17.I30275	
		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. AMTRAK</b>		M M / D D / Y Y Y Y 09 / 06 / 2025
Mailing Address 400 NORTH CAPITOL STREET NORTHWEST		FEC Identification Number
City WASHINGTON	State DC	Zip Code 20001
Purpose of Disbursement GROUND TRANSPORTATION	Category/ Type 002	
Candidate Name	Amount of Each Disbursement this Period	
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) ▼	338.00
State: District:	Transaction ID : SB17.I30280	
		<input checked="" type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 84 OF 184			
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. ARTMEDIA PRINT</b>			Date of Disbursement MM / DD / YYYY 08 / 27 / 2025
Mailing Address 5881 NORTHWEST 151ST STREET #104			FEC Identification Number C
City MIAMI LAKES	State FL	Zip Code 33014	Amount of Each Disbursement this Period 798.76
Purpose of Disbursement PRINTING SERVICES		Category/Type 001	Transaction ID : SB17.I30241
Candidate Name			<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>			Date of Disbursement MM / DD / YYYY 08 / 22 / 2025
Mailing Address PO BOX 6463			FEC Identification Number C
City CAROL STREAM	State IL	Zip Code 60197-6463	Amount of Each Disbursement this Period 297.81
Purpose of Disbursement PHONE SERVICES		Category/Type 001	Transaction ID : SB17.I30224
Candidate Name			<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. CANVA US, INC</b>			Date of Disbursement MM / DD / YYYY 08 / 19 / 2025
Mailing Address 200 EAST 6TH STREET			FEC Identification Number C
City AUSTIN	State TX	Zip Code 78701	Amount of Each Disbursement this Period 30.00
Purpose of Disbursement SUBSCRIPTION		Category/Type 001	Transaction ID : SB17.I30221
Candidate Name			<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 85 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. CECCONI NED NOMAD</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2025	
Mailing Address 1170 BROADWAY			FEC Identification Number C	
City NEW YORK	State NY	Zip Code 10001	Amount of Each Disbursement this Period 147.64	
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type 001	Transaction ID : SB17.I30230	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. CECCONI NED NOMAD</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2025	
Mailing Address 1170 BROADWAY			FEC Identification Number C	
City NEW YORK	State NY	Zip Code 10001	Amount of Each Disbursement this Period 39.19	
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type 001	Transaction ID : SB17.I30274	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. CHEVRON</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2025	
Mailing Address 720 SOUTHWEST 2ND AVENUE			FEC Identification Number C	
City MIAMI	State FL	Zip Code 33130	Amount of Each Disbursement this Period 46.35	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 002	Transaction ID : SB17.I30267	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 86 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. CROWNE PLAZA HQ</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2025
Mailing Address 15500 EAST 40TH AVENUE		FEC Identification Number C
City DENVER	State CO	Zip Code 80239-5701
Purpose of Disbursement TRAVEL: LODGING	Category/ Type 002	
Candidate Name	Amount of Each Disbursement this Period 1116.09	
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) ▼	Transaction ID : SB17.I30239
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CROWNE PLAZA HQ</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2025
Mailing Address 15500 EAST 40TH AVENUE		FEC Identification Number C
City DENVER	State CO	Zip Code 80239-5701
Purpose of Disbursement TRAVEL: LODGING	Category/ Type 002	
Candidate Name	Amount of Each Disbursement this Period 92.50	
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) ▼	Transaction ID : SB17.I30240
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CROWNE PLAZA HQ</b>		Date of Disbursement MM / DD / YYYY 09 / 05 / 2025
Mailing Address 15500 EAST 40TH AVENUE		FEC Identification Number C
City DENVER	State CO	Zip Code 80239-5701
Purpose of Disbursement TRAVEL: LODGING	Category/ Type 002	
Candidate Name	Amount of Each Disbursement this Period 302.28	
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) ▼	Transaction ID : SB17.I30273
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 87 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. CROWNE PLAZA HQ</b>		Date of Disbursement MM / DD / YYYY 09 / 06 / 2025
Mailing Address 15500 EAST 40TH AVENUE		FEC Identification Number C
City DENVER	State CO	Zip Code 80239-5701
Purpose of Disbursement TRAVEL: LODGING		Amount of Each Disbursement this Period 644.11
Candidate Name		Transaction ID : SB17.I30279
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type 002	

Full Name (Last, First, Middle Initial) <b>B. FACEBOOK</b>		Date of Disbursement MM / DD / YYYY 09 / 03 / 2025
Mailing Address 1601 WILLOW ROAD		FEC Identification Number C
City MENLO PARK	State CA	Zip Code 94025
Purpose of Disbursement ADVERTISING & MARKETING		Amount of Each Disbursement this Period 14.67
Candidate Name		Transaction ID : SB17.I30265
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>C. FACEBOOK</b>		Date of Disbursement MM / DD / YYYY 09 / 03 / 2025
Mailing Address 1601 WILLOW ROAD		FEC Identification Number C
City MENLO PARK	State CA	Zip Code 94025
Purpose of Disbursement ADVERTISING & MARKETING		Amount of Each Disbursement this Period 396.03
Candidate Name		Transaction ID : SB17.I30266
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type 004	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 88 OF 184			
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. GOOGLE</b>		M M / D D / Y Y Y Y 09 / 01 / 2025
Mailing Address 1600 AMPHITHEATRE PARKWAY		FEC Identification Number
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement SUBSCRIPTION	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	13.35	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I30260	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. GOOGLE</b>		M M / D D / Y Y Y Y 09 / 01 / 2025
Mailing Address 1600 AMPHITHEATRE PARKWAY		FEC Identification Number
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement SUBSCRIPTION	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	184.80	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I30261	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. GOOGLE</b>		M M / D D / Y Y Y Y 09 / 01 / 2025
Mailing Address 1600 AMPHITHEATRE PARKWAY		FEC Identification Number
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement ADVERTISING	Category/Type 004	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	452.04	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I30262	
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 89 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)  
**A. HP.COM**

Mailing Address 3000 HANOVER STREET

City PALO ALTO State CA Zip Code 94304

Purpose of Disbursement SOFTWARE Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 08 / 24 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 25.67

Transaction ID : SB17.I30227

Memo Item

Full Name (Last, First, Middle Initial)  
**B. LA BOULANGERIE BOUL'MICH**

Mailing Address 328 CRANDON BOULEVARD #125

City KEY BISCAYNE State FL Zip Code 33149

Purpose of Disbursement FOOD/BEVERAGE Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 08 / 28 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 53.75

Transaction ID : SB17.I30243

Memo Item

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

Mailing Address 185 BERRY ST

City SAN FRANCISCO State CA Zip Code 94107-5705

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement 08 / 26 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 50.43

Transaction ID : SB17.I30233

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 184			
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. LYFT		M M / D D / Y Y Y Y 08 / 30 / 2025	
Mailing Address 185 BERRY ST		FEC Identification Number	
City SAN FRANCISCO	State CA	Zip Code 94107-5705	C
Purpose of Disbursement GROUND TRANSPORTATION		002	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	47.46
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) ▼		Transaction ID : SB17.I30255
State: District:			<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. LYFT		M M / D D / Y Y Y Y 09 / 06 / 2025	
Mailing Address 185 BERRY ST		FEC Identification Number	
City SAN FRANCISCO	State CA	Zip Code 94107-5705	C
Purpose of Disbursement GROUND TRANSPORTATION		002	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	14.78
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) ▼		Transaction ID : SB17.I30278
State: District:			<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. LYFT		M M / D D / Y Y Y Y 09 / 07 / 2025	
Mailing Address 185 BERRY ST		FEC Identification Number	
City SAN FRANCISCO	State CA	Zip Code 94107-5705	C
Purpose of Disbursement GROUND TRANSPORTATION		002	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	14.17
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) ▼		Transaction ID : SB17.I30283
State: District:			<input checked="" type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 91 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. MAJOR FOOD GROUP LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2025
Mailing Address 99 EAST 52ND STREET		FEC Identification Number C
City NEW YORK	State NY	Zip Code 10022
Purpose of Disbursement FOOD/BEVERAGE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 327.68
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) ▼	Transaction ID : SB17.I30251
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. METRICOOL</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2025
Mailing Address 12 ENTREPLANTA H C		FEC Identification Number C
City TELLEZ, MADRID	State ZZ	Zip Code 00000
Purpose of Disbursement SUBSCRIPTION	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 59.00
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) ▼	Transaction ID : SB17.I30218
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. PURA VIDA MIAMI</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2025
Mailing Address 460 SOUTH ROSEMARY AVENUE		FEC Identification Number C
City WEST PALM BEACH	State FL	Zip Code 33401
Purpose of Disbursement FOOD/BEVERAGE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 104.36
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) ▼	Transaction ID : SB17.I30281
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 92 OF 184			
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. SB TAVERN</b>			Date of Disbursement MM / DD / YYYY 09 / 05 / 2025
Mailing Address 496 9TH AVENUE			FEC Identification Number C
City NEW YORK	State NY	Zip Code 10018-4131	Amount of Each Disbursement this Period 186.87
Purpose of Disbursement FOOD/BEVERAGE		Category/Type 001	Transaction ID : SB17.I30271
Candidate Name			<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. SB TAVERN</b>			Date of Disbursement MM / DD / YYYY 09 / 06 / 2025
Mailing Address 496 9TH AVENUE			FEC Identification Number C
City NEW YORK	State NY	Zip Code 10018-4131	Amount of Each Disbursement this Period 240.98
Purpose of Disbursement FOOD/BEVERAGE		Category/Type 001	Transaction ID : SB17.I30276
Candidate Name			<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. SHELL OIL</b>			Date of Disbursement MM / DD / YYYY 08 / 15 / 2025
Mailing Address 1201 NORTHWEST 7TH STREET			FEC Identification Number C
City MIAMI	State FL	Zip Code 33125	Amount of Each Disbursement this Period 45.92
Purpose of Disbursement TRAVEL EXPENSE		Category/Type 002	Transaction ID : SB17.I30215
Candidate Name			<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 93 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)

**A. SHELL OIL**

Mailing Address 1201 NORTHWEST 7TH STREET

City MIAMI State FL Zip Code 33125

Purpose of Disbursement TRAVEL EXPENSE Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement 08 / 28 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 49.18

Transaction ID : SB17.I30246

Memo Item

Full Name (Last, First, Middle Initial)

**B. SIRIUS XM RADIO INC**

Mailing Address 1500 ECKINGTON PLACE NORTHEAST

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement SUBSCRIPTION Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 08 / 19 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 28.27

Transaction ID : SB17.I30219

Memo Item

Full Name (Last, First, Middle Initial)

**C. SUNPASS**

Mailing Address 9405 WEST COLONIAL DRIVE

City OCOEE State FL Zip Code 34761

Purpose of Disbursement TOLL EXPENSE Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement 08 / 29 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 25.00

Transaction ID : SB17.I30247

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 94 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. THE GOLDEN HOG</b>			Date of Disbursement MM / DD / YYYY 08 / 29 / 2025	
Mailing Address 91 HARBOR DRIVE			FEC Identification Number C	
City KEY BISCAVNE	State FL	Zip Code 33149	Amount of Each Disbursement this Period 50.74	
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type 001	Transaction ID : SB17.I30244	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. THE GOLDEN HOG</b>			Date of Disbursement MM / DD / YYYY 08 / 29 / 2025	
Mailing Address 91 HARBOR DRIVE			FEC Identification Number C	
City KEY BISCAVNE	State FL	Zip Code 33149	Amount of Each Disbursement this Period 6.36	
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type 001	Transaction ID : SB17.I30245	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. THE GOLDEN HOG</b>			Date of Disbursement MM / DD / YYYY 08 / 30 / 2025	
Mailing Address 91 HARBOR DRIVE			FEC Identification Number C	
City KEY BISCAVNE	State FL	Zip Code 33149	Amount of Each Disbursement this Period 32.42	
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type 001	Transaction ID : SB17.I30252	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 95 OF 184			
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. THE GOLDEN HOG</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2025
Mailing Address 91 HARBOR DRIVE		FEC Identification Number C
City KEY BISCAYNE	State FL	Zip Code 33149
Purpose of Disbursement FOOD/BEVERAGE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 23.45
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:	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.I30253	

Full Name (Last, First, Middle Initial) <b>B. THE GOLDEN HOG</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2025
Mailing Address 91 HARBOR DRIVE		FEC Identification Number C
City KEY BISCAYNE	State FL	Zip Code 33149
Purpose of Disbursement FOOD/BEVERAGE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 13.60
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:	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.I30254	

Full Name (Last, First, Middle Initial) <b>C. THE GOLDEN HOG</b>		Date of Disbursement MM / DD / YYYY 08 / 31 / 2025
Mailing Address 91 HARBOR DRIVE		FEC Identification Number C
City KEY BISCAYNE	State FL	Zip Code 33149
Purpose of Disbursement FOOD/BEVERAGE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 32.08
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:	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.I30257	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 96 OF 184	
	<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)  
**Salazar for Congress**

**A. THE GOLDEN HOG**

Full Name (Last, First, Middle Initial)  
Mailing Address 91 HARBOR DRIVE

City KEY BISCAYNE State FL Zip Code 33149

Purpose of Disbursement FOOD/BEVERAGE Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 08 / 31 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 27.39

Transaction ID : SB17.I30258

Memo Item

**B. UBER**

Full Name (Last, First, Middle Initial)  
Mailing Address 1455 MARKET STREET SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 08 / 16 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 47.74

Transaction ID : SB17.I30216

Memo Item

**C. UBER**

Full Name (Last, First, Middle Initial)  
Mailing Address 1455 MARKET STREET SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 08 / 17 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 31.62

Transaction ID : SB17.I30217

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 184			
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. UBER</b>		Date of Disbursement MM / DD / YYYY 08 / 23 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		Amount of Each Disbursement this Period 99.72
Candidate Name		Transaction ID : SB17.I30225
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type 002	

Full Name (Last, First, Middle Initial) <b>B. UBER</b>		Date of Disbursement MM / DD / YYYY 08 / 25 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		Amount of Each Disbursement this Period 33.72
Candidate Name		Transaction ID : SB17.I30228
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type 002	

Full Name (Last, First, Middle Initial) <b>C. UBER</b>		Date of Disbursement MM / DD / YYYY 08 / 25 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		Amount of Each Disbursement this Period 3.00
Candidate Name		Transaction ID : SB17.I30229
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type 002	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 98 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. UBER</b>		Date of Disbursement MM / DD / YYYY 08 / 26 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		Amount of Each Disbursement this Period 3.37
Candidate Name		Transaction ID : SB17.I30231
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/ Type 002	

Full Name (Last, First, Middle Initial) <b>B. UBER</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		Amount of Each Disbursement this Period 41.90
Candidate Name		Transaction ID : SB17.I30236
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/ Type 002	

Full Name (Last, First, Middle Initial) <b>C. UBER</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		Amount of Each Disbursement this Period 36.92
Candidate Name		Transaction ID : SB17.I30237
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/ Type 002	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 99 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. UBER</b>			Date of Disbursement MM / DD / YYYY 08 / 28 / 2025	
Mailing Address 1455 MARKET STREET SUITE 400			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94103	Amount of Each Disbursement this Period 41.72	
Purpose of Disbursement GROUND TRANSPORTATION		Category/ Type 002	Transaction ID : SB17.I30242	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. UBER</b>			Date of Disbursement MM / DD / YYYY 09 / 05 / 2025	
Mailing Address 1455 MARKET STREET SUITE 400			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94103	Amount of Each Disbursement this Period 24.73	
Purpose of Disbursement GROUND TRANSPORTATION		Category/ Type 002	Transaction ID : SB17.I30270	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. UBER</b>			Date of Disbursement MM / DD / YYYY 09 / 08 / 2025	
Mailing Address 1455 MARKET STREET SUITE 400			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94103	Amount of Each Disbursement this Period 36.96	
Purpose of Disbursement GROUND TRANSPORTATION		Category/ Type 002	Transaction ID : SB17.I30284	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 100 OF 184	
	<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)  
**Salazar for Congress**

**A. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 09 / 08 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 2.47

Transaction ID : SB17.I30285

Memo Item

**B. AMERICAN EXPRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 650448

City DALLAS State TX Zip Code 75265

Purpose of Disbursement CREDIT CARD PAYMENT Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 11 / 03 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 24671.14

Transaction ID : SB17.I29197

Memo Item

**C. AIDA**

Full Name (Last, First, Middle Initial)

Mailing Address 3306 MARY STREET

City MIAMI State FL Zip Code 33133-5253

Purpose of Disbursement FOOD/BEVERAGE Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 10 / 10 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 4928.00

Transaction ID : SB17.I30457

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 24671.14

**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 101 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)  
**A. AMAZON MARKETPLACE**

Mailing Address 410 TERRY AVENUE NORTH

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 09 / 16 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 46.54

Transaction ID : SB17.I30352

Memo Item

Full Name (Last, First, Middle Initial)  
**B. AMAZON MARKETPLACE**

Mailing Address 410 TERRY AVENUE NORTH

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 09 / 16 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 49.05

Transaction ID : SB17.I30354

Memo Item

Full Name (Last, First, Middle Initial)  
**C. AMAZON MARKETPLACE**

Mailing Address 410 TERRY AVENUE NORTH

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 09 / 26 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 30.47

Transaction ID : SB17.I30406

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)  
**A. AMAZON MARKETPLACE**

Mailing Address 410 TERRY AVENUE NORTH

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 10 / 01 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 27.76

Transaction ID : SB17.I30436

Memo Item

Full Name (Last, First, Middle Initial)  
**B. AMAZON MARKETPLACE**

Mailing Address 410 TERRY AVENUE NORTH

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 10 / 08 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 15.89

Transaction ID : SB17.I30448

Memo Item

Full Name (Last, First, Middle Initial)  
**C. AMERICAN AIRLINES**

Mailing Address 4255 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155-2603

Purpose of Disbursement AIRFARE Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 09 / 18 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 1025.48

Transaction ID : SB17.I30358

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2025
Mailing Address 4255 AMON CARTER BLVD		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155-2603
Purpose of Disbursement AIRFARE	002	
Candidate Name	Amount of Each Disbursement this Period 241.48	
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) ▼	Transaction ID : SB17.I30359
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2025
Mailing Address 4255 AMON CARTER BLVD		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155-2603
Purpose of Disbursement AIRFARE	002	
Candidate Name	Amount of Each Disbursement this Period 900.49	
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) ▼	Transaction ID : SB17.I30417
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2025
Mailing Address 4255 AMON CARTER BLVD		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155-2603
Purpose of Disbursement AIRFARE	002	
Candidate Name	Amount of Each Disbursement this Period 279.48	
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) ▼	Transaction ID : SB17.I30423
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 104 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2025
Mailing Address 4255 AMON CARTER BLVD		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155-2603
Purpose of Disbursement AIRFARE	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period - 293.48
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2025
Mailing Address 4255 AMON CARTER BLVD		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155-2603
Purpose of Disbursement AIRFARE	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 293.48
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2025
Mailing Address 4255 AMON CARTER BLVD		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155-2603
Purpose of Disbursement AIRFARE	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period - 360.48
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:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 105 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. AMTRAK</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2025
Mailing Address 400 NORTH CAPITOL STREET NORTHWEST		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20001
Purpose of Disbursement GROUND TRANSPORTATION		002
Candidate Name		Amount of Each Disbursement this Period - 240.00
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) ▼	Transaction ID : SB17.I30465
State: District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. AROMAS DEL PERU</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2025
Mailing Address 1930 PONCE DE LEON		FEC Identification Number C
City CORAL GABLES	State FL	Zip Code 33134
Purpose of Disbursement FOOD/BEVERAGE		001
Candidate Name		Amount of Each Disbursement this Period 384.24
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) ▼	Transaction ID : SB17.I30386
State: District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. AROMAS DEL PERU</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2025
Mailing Address 1930 PONCE DE LEON		FEC Identification Number C
City CORAL GABLES	State FL	Zip Code 33134
Purpose of Disbursement FOOD/BEVERAGE		001
Candidate Name		Amount of Each Disbursement this Period 53.76
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) ▼	Transaction ID : SB17.I30443
State: District:		<input checked="" type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 106 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. AROMAS DEL PERU</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2025	
Mailing Address 1930 PONCE DE LEON			FEC Identification Number C	
City CORAL GABLES	State FL	Zip Code 33134	Amount of Each Disbursement this Period 335.03	
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type 001	Transaction ID : SB17.I30461	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2025	
Mailing Address PO BOX 6463			FEC Identification Number C	
City CAROL STREAM	State IL	Zip Code 60197-6463	Amount of Each Disbursement this Period 308.01	
Purpose of Disbursement PHONE SERVICES		Category/ Type 001	Transaction ID : SB17.I30384	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. CANVA US, INC</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2025	
Mailing Address 200 EAST 6TH STREET			FEC Identification Number C	
City AUSTIN	State TX	Zip Code 78701	Amount of Each Disbursement this Period 30.00	
Purpose of Disbursement SUBSCRIPTION		Category/ Type 001	Transaction ID : SB17.I30370	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. CANVA US, INC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2025
Mailing Address 200 EAST 6TH STREET		FEC Identification Number C
City AUSTIN	State TX	Zip Code 78701
Purpose of Disbursement SUBSCRIPTION	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 120.00	
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) ▼	Transaction ID : SB17.I30458
State:    District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CHEVRON</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2025
Mailing Address 720 SOUTHWEST 2ND AVENUE		FEC Identification Number C
City MIAMI	State FL	Zip Code 33130
Purpose of Disbursement TRAVEL EXPENSE	Category/ Type 002	
Candidate Name	Amount of Each Disbursement this Period 47.98	
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) ▼	Transaction ID : SB17.I30411
State:    District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CHEVRON</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2025
Mailing Address 720 SOUTHWEST 2ND AVENUE		FEC Identification Number C
City MIAMI	State FL	Zip Code 33130
Purpose of Disbursement TRAVEL EXPENSE	Category/ Type 002	
Candidate Name	Amount of Each Disbursement this Period 45.01	
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) ▼	Transaction ID : SB17.I30441
State:    District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 108 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. DONA PAULINA</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2025
Mailing Address 8263 BIRD ROAD		FEC Identification Number C
City MIAMI	State FL	Zip Code 33155
Purpose of Disbursement FOOD/BEVERAGE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 36.00	
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) ▼	Transaction ID : SB17.I30388
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. EXXONMOBILE</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2025
Mailing Address 6790 SOUTHWEST 57TH AVENUE		FEC Identification Number C
City MIAMI	State FL	Zip Code 33143
Purpose of Disbursement FUEL	Category/Type 002	
Candidate Name	Amount of Each Disbursement this Period 36.00	
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) ▼	Transaction ID : SB17.I30383
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. EXXONMOBILE</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2025
Mailing Address 6790 SOUTHWEST 57TH AVENUE		FEC Identification Number C
City MIAMI	State FL	Zip Code 33143
Purpose of Disbursement FUEL	Category/Type 002	
Candidate Name	Amount of Each Disbursement this Period 54.29	
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) ▼	Transaction ID : SB17.I30456
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 109 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. FACEBOOK</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2025	
Mailing Address 1601 WILLOW ROAD			FEC Identification Number C	
City MENLO PARK	State CA	Zip Code 94025	Amount of Each Disbursement this Period 277.17	
Purpose of Disbursement ADVERTISING & MARKETING		Category/ Type 004	Transaction ID : SB17.I30440	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. GAYLORD ROCKIES</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2025	
Mailing Address 6700 NORTH GAYLORD ROCKIES BOULEVA			FEC Identification Number C	
City AURORA	State CO	Zip Code 80019	Amount of Each Disbursement this Period 1979.57	
Purpose of Disbursement TRAVEL: LODGING		Category/ Type 002	Transaction ID : SB17.I30447	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. GOOGLE</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2025	
Mailing Address 1600 AMPHITHEATRE PARKWAY			FEC Identification Number C	
City MOUNTAIN VIEW	State CA	Zip Code 94043	Amount of Each Disbursement this Period 13.34	
Purpose of Disbursement WEBSITE HOSTING		Category/ Type 001	Transaction ID : SB17.I30432	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)

**A. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW    State CA    Zip Code 94043

Purpose of Disbursement SUBSCRIPTION     Category/Type

Candidate Name

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

State:    District:

Date of Disbursement:  /  /

FEC Identification Number:

Amount of Each Disbursement this Period:

Transaction ID : SB17.I30433

Memo Item

Full Name (Last, First, Middle Initial)

**B. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW    State CA    Zip Code 94043

Purpose of Disbursement ADVERTISING     Category/Type

Candidate Name

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

State:    District:

Date of Disbursement:  /  /

FEC Identification Number:

Amount of Each Disbursement this Period:

Transaction ID : SB17.I30434

Memo Item

Full Name (Last, First, Middle Initial)

**C. HOTELSONE**

Mailing Address 10190 COVINGTON CROSS DRIVE  
SUITE 200

City LAS VEGAS    State NV    Zip Code 89144

Purpose of Disbursement TRAVEL: LODGING     Category/Type

Candidate Name

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

State:    District:

Date of Disbursement:  /  /

FEC Identification Number:

Amount of Each Disbursement this Period:

Transaction ID : SB17.I30357

Memo Item

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

**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)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. HP.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2025
Mailing Address 3000 HANOVER STREET		FEC Identification Number C
City PALO ALTO	State CA	Zip Code 94304
Purpose of Disbursement SOFTWARE		001
Candidate Name		Category/ Type
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:	Amount of Each Disbursement this Period 25.67	
Transaction ID : SB17.I30398		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. LYFT</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2025
Mailing Address 185 BERRY ST		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107-5705
Purpose of Disbursement GROUND TRANSPORTATION		002
Candidate Name		Category/ Type
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:	Amount of Each Disbursement this Period 60.99	
Transaction ID : SB17.I30369		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. LYFT</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2025
Mailing Address 185 BERRY ST		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107-5705
Purpose of Disbursement GROUND TRANSPORTATION		002
Candidate Name		Category/ Type
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:	Amount of Each Disbursement this Period 67.00	
Transaction ID : SB17.I30376		<input checked="" type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 112 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. LYFT		M M / D D / Y Y Y Y 09 / 21 / 2025
Mailing Address 185 BERRY ST		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94107-5705
Purpose of Disbursement GROUND TRANSPORTATION	002	
Candidate Name	Category/ Type	
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:	Amount of Each Disbursement this Period 6.00	
Transaction ID : SB17.I30377		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. LYFT		M M / D D / Y Y Y Y 09 / 21 / 2025
Mailing Address 185 BERRY ST		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94107-5705
Purpose of Disbursement GROUND TRANSPORTATION	002	
Candidate Name	Category/ Type	
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:	Amount of Each Disbursement this Period 5.00	
Transaction ID : SB17.I30378		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. LYFT		M M / D D / Y Y Y Y 09 / 26 / 2025
Mailing Address 185 BERRY ST		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94107-5705
Purpose of Disbursement GROUND TRANSPORTATION	002	
Candidate Name	Category/ Type	
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:	Amount of Each Disbursement this Period 36.50	
Transaction ID : SB17.I30403		<input checked="" type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 113 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. LYFT</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2025
Mailing Address 185 BERRY ST		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107-5705
Purpose of Disbursement GROUND TRANSPORTATION	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 43.16
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:	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.I30410	

Full Name (Last, First, Middle Initial) <b>B. LYFT</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2025
Mailing Address 185 BERRY ST		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107-5705
Purpose of Disbursement GROUND TRANSPORTATION	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 105.93
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:	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.I30428	

Full Name (Last, First, Middle Initial) <b>C. MATTYS FLOWER DESIGN LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2025
Mailing Address 7422 WEST FLAGLER STREET		FEC Identification Number C
City MIAMI	State FL	Zip Code 33144
Purpose of Disbursement FLORALS	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 286.00
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:	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.I30446	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 114 OF 184			
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)

**A. METRICOOL**

Mailing Address 12 ENTREPLANTA H C

City TELLEZ, MADRID State ZZ Zip Code 00000

Purpose of Disbursement SUBSCRIPTION Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 09 / 17 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 59.00

Transaction ID : SB17.I30355

Memo Item

Full Name (Last, First, Middle Initial)

**B. MR SPLASH**

Mailing Address 1650 SOUTHWEST 27TH AVENUE

City MIAMI State FL Zip Code 33145

Purpose of Disbursement CAR WASH Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 09 / 30 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 126.99

Transaction ID : SB17.I30427

Memo Item

Full Name (Last, First, Middle Initial)

**C. PLAZA HOTEL**

Mailing Address 768 5TH AVENUE

City NEW YORK State NY Zip Code 10019

Purpose of Disbursement TRAVEL: LODGING Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement 09 / 28 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 307.93

Transaction ID : SB17.I30415

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. PURA VIDA MIAMI</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2025
Mailing Address 460 SOUTH ROSEMARY AVENUE		FEC Identification Number C
City WEST PALM BEACH	State FL	Zip Code 33401
Purpose of Disbursement FOOD/BEVERAGE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 86.83
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. PURA VIDA MIAMI</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2025
Mailing Address 460 SOUTH ROSEMARY AVENUE		FEC Identification Number C
City WEST PALM BEACH	State FL	Zip Code 33401
Purpose of Disbursement FOOD/BVERAGE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 62.34
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. RASA</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2025
Mailing Address 1247 1ST STREET SOUTHEAST		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FOOD/BEVERAGE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 431.20
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:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 116 OF 184	
	<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)  
**Salazar for Congress**

**A. SERGIOS**

Full Name (Last, First, Middle Initial)

Mailing Address 9330 SOUTHWEST 40TH STREET

City MIAMI State FL Zip Code 33165

Purpose of Disbursement FOOD/BEVERAGE Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 10 / 01 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 212.42

Transaction ID : SB17.I30431

Memo Item

**B. SHELL OIL**

Full Name (Last, First, Middle Initial)

Mailing Address 1201 NORTHWEST 7TH STREET

City MIAMI State FL Zip Code 33125

Purpose of Disbursement TRAVEL EXPENSE Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 09 / 22 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 21.40

Transaction ID : SB17.I30385

Memo Item

**C. SIRIUS XM RADIO INC**

Full Name (Last, First, Middle Initial)

Mailing Address 1500 ECKINGTON PLACE NORTHEAST

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement SUBSCRIPTION Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 09 / 19 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 28.27

Transaction ID : SB17.I30366

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 117 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. SPROUTS FARMERS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2025
Mailing Address 5670 TOWER ROAD		FEC Identification Number C
City DENVER	State CO	Zip Code 80249
Purpose of Disbursement FOOD/BEVERAGE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 214.74	
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) ▼	Transaction ID : SB17.I30438
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. SUNPASS</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2025
Mailing Address 9405 WEST COLONIAL DRIVE		FEC Identification Number C
City OCOEE	State FL	Zip Code 34761
Purpose of Disbursement TOLL EXPENSE	Category/Type 002	
Candidate Name	Amount of Each Disbursement this Period 25.00	
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) ▼	Transaction ID : SB17.I30351
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. SUPER MACHI</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2025
Mailing Address 7931 NORTHWEST 2ND STREET		FEC Identification Number C
City MIAMI	State FL	Zip Code 33126-8000
Purpose of Disbursement FOOD/BEVERAGE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 366.63	
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) ▼	Transaction ID : SB17.I30381
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 118 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. THE GOLDEN HOG</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2025	
Mailing Address 91 HARBOR DRIVE			FEC Identification Number C	
City KEY BISCAIYNE	State FL	Zip Code 33149	Amount of Each Disbursement this Period 89.76	
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type 001	Transaction ID : SB17.I30375	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. THE GOLDEN HOG</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2025	
Mailing Address 91 HARBOR DRIVE			FEC Identification Number C	
City KEY BISCAIYNE	State FL	Zip Code 33149	Amount of Each Disbursement this Period 27.18	
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type 001	Transaction ID : SB17.I30392	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. THE GOLDEN HOG</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2025	
Mailing Address 91 HARBOR DRIVE			FEC Identification Number C	
City KEY BISCAIYNE	State FL	Zip Code 33149	Amount of Each Disbursement this Period 65.40	
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type 001	Transaction ID : SB17.I30454	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)  
**A. THE GOLDEN HOG**

Mailing Address 91 HARBOR DRIVE

City KEY BISCAYNE    State FL    Zip Code 33149

Purpose of Disbursement FOOD/BEVERAGE        Category/Type

Candidate Name

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

State:    District:

Date of Disbursement  
 /  /

FEC Identification Number

Amount of Each Disbursement this Period

Transaction ID : SB17.I30455

Memo Item

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

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO    State CA    Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION        Category/Type

Candidate Name

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

State:    District:

Date of Disbursement  
 /  /

FEC Identification Number

Amount of Each Disbursement this Period

Transaction ID : SB17.I30349

Memo Item

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

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO    State CA    Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION        Category/Type

Candidate Name

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

State:    District:

Date of Disbursement  
 /  /

FEC Identification Number

Amount of Each Disbursement this Period

Transaction ID : SB17.I30353

Memo Item

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

**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 120 OF 184			
	<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)  
**Salazar for Congress**

**A. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 09 / 19 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 32.36

Transaction ID : SB17.I30360

Memo Item

**B. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 09 / 19 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 10.18

Transaction ID : SB17.I30361

Memo Item

**C. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 09 / 19 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 4.00

Transaction ID : SB17.I30362

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 121 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. UBER</b>		M M / D D / Y Y Y Y 09 / 20 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		002
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For:	59.37
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : SB17.I30371</b>
State: District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. UBER</b>		M M / D D / Y Y Y Y 09 / 20 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		002
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For:	53.80
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : SB17.I30372</b>
State: District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. UBER</b>		M M / D D / Y Y Y Y 09 / 20 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		002
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For:	40.33
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : SB17.I30373</b>
State: District:		<input checked="" type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 122 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>A. UBER</b>		M M / D D / Y Y Y Y 09 / 20 / 2025	
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number	
City SAN FRANCISCO	State CA	Zip Code 94103	C
Purpose of Disbursement GROUND TRANSPORTATION		002	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	31.17
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) ▼		Transaction ID : SB17.I30374
State: District:			<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>B. UBER</b>		M M / D D / Y Y Y Y 09 / 22 / 2025	
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number	
City SAN FRANCISCO	State CA	Zip Code 94103	C
Purpose of Disbursement GROUND TRANSPORTATION		002	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	53.25
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) ▼		Transaction ID : SB17.I30379
State: District:			<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>C. UBER</b>		M M / D D / Y Y Y Y 09 / 24 / 2025	
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number	
City SAN FRANCISCO	State CA	Zip Code 94103	C
Purpose of Disbursement GROUND TRANSPORTATION		002	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	32.02
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) ▼		Transaction ID : SB17.I30390
State: District:			<input checked="" type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

**A. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO    State CA    Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION     002    Category/Type

Candidate Name

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

State:    District:

Date of Disbursement: 09 / 25 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 7.99

Transaction ID : SB17.I30395

Memo Item

**B. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO    State CA    Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION     002    Category/Type

Candidate Name

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

State:    District:

Date of Disbursement: 09 / 26 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 87.90

Transaction ID : SB17.I30399

Memo Item

**C. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO    State CA    Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION     002    Category/Type

Candidate Name

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

State:    District:

Date of Disbursement: 09 / 26 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 70.40

Transaction ID : SB17.I30400

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 184			
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. UBER</b>		M M / D D / Y Y Y Y 09 / 26 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		002
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For:	29.09
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : SB17.I30401</b>
State: District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. UBER</b>		M M / D D / Y Y Y Y 09 / 26 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		002
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For:	8.79
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : SB17.I30402</b>
State: District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. UBER</b>		M M / D D / Y Y Y Y 09 / 27 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		002
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For:	71.74
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : SB17.I30407</b>
State: District:		<input checked="" type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 125 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. UBER</b>		M M / D D / Y Y Y Y 09 / 27 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		<input type="text" value="C"/>
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="text" value="2.90"/>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID : SB17.I30408</b>
State: District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. UBER</b>		M M / D D / Y Y Y Y 09 / 28 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		<input type="text" value="C"/>
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="text" value="41.28"/>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID : SB17.I30413</b>
State: District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. UBER</b>		M M / D D / Y Y Y Y 09 / 28 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		<input type="text" value="C"/>
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="text" value="30.87"/>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID : SB17.I30414</b>
State: District:		<input checked="" type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

# 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 126 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. UBER</b>		<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2025"/>
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		<input type="text" value="C"/>
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="text" value="11.83"/>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID : SB17.I30419</b>
State: _____ District: _____		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. UBER</b>		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2025"/>
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		<input type="text" value="C"/>
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="text" value="30.51"/>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID : SB17.I30424</b>
State: _____ District: _____		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. UBER</b>		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2025"/>
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		<input type="text" value="C"/>
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="text" value="26.12"/>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID : SB17.I30425</b>
State: _____ District: _____		<input checked="" type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

# 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 127 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. UBER</b>		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y
Mailing Address 1455 MARKET STREET SUITE 400		<input type="text"/> 09 / <input type="text"/> 30 / <input type="text"/> 2025
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		FEC Identification Number <input type="text"/> C <input type="text"/>
Candidate Name		Amount of Each Disbursement this Period <input type="text"/> 2.61
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) ▼	Transaction ID : SB17.I30426
State: District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. UBER</b>		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y
Mailing Address 1455 MARKET STREET SUITE 400		<input type="text"/> 10 / <input type="text"/> 02 / <input type="text"/> 2025
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		FEC Identification Number <input type="text"/> C <input type="text"/>
Candidate Name		Amount of Each Disbursement this Period <input type="text"/> 3.05
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) ▼	Transaction ID : SB17.I30437
State: District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. UBER</b>		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y
Mailing Address 1455 MARKET STREET SUITE 400		<input type="text"/> 10 / <input type="text"/> 03 / <input type="text"/> 2025
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		FEC Identification Number <input type="text"/> C <input type="text"/>
Candidate Name		Amount of Each Disbursement this Period <input type="text"/> 33.02
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) ▼	Transaction ID : SB17.I30439
State: District:		<input checked="" type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<input type="text"/> 0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

# 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 128 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. UBER</b>		M M / D D / Y Y Y Y 10 / 06 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		<input type="text" value="C"/>
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="text" value="36.18"/>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID : SB17.I30442
State: District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. UBER</b>		M M / D D / Y Y Y Y 10 / 08 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		<input type="text" value="C"/>
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="text" value="35.66"/>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID : SB17.I30444
State: District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. UBER</b>		M M / D D / Y Y Y Y 10 / 08 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		<input type="text" value="C"/>
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="text" value="10.04"/>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID : SB17.I30445
State: District:		<input checked="" type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

# 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 129 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. UBER</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		Amount of Each Disbursement this Period 87.42
Candidate Name		Transaction ID : SB17.I30449
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/ Type 002	

Full Name (Last, First, Middle Initial) <b>B. UBER</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		Amount of Each Disbursement this Period 86.31
Candidate Name		Transaction ID : SB17.I30450
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/ Type 002	

Full Name (Last, First, Middle Initial) <b>C. UBER</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		Amount of Each Disbursement this Period 40.64
Candidate Name		Transaction ID : SB17.I30451
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/ Type 002	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 130 OF 184	
	<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)  
**Salazar for Congress**

**A. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 10 / 09 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 40.27

Transaction ID : SB17.I30452

Memo Item

**B. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 10 / 07 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 66.94

Transaction ID : SB17.I30462

Memo Item

**C. UNITED AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement TRAVEL: AIRFARE Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 09 / 18 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 553.49

Transaction ID : SB17.I30356

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. UNITED AIRLINES</b>		Date of Disbursement MM / DD / YYYY 09 / 19 / 2025
Mailing Address 233 SOUTH WACKER DRIVE		FEC Identification Number C
City CHICAGO	State IL	Zip Code 60606
Purpose of Disbursement TRAVEL: AIRFARE		002
Candidate Name		Amount of Each Disbursement this Period 109.99
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. UNITED AIRLINES</b>		Date of Disbursement MM / DD / YYYY 09 / 22 / 2025
Mailing Address 233 SOUTH WACKER DRIVE		FEC Identification Number C
City CHICAGO	State IL	Zip Code 60606
Purpose of Disbursement TRAVEL: AIRFARE		002
Candidate Name		Amount of Each Disbursement this Period 709.73
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. UNITED AIRLINES</b>		Date of Disbursement MM / DD / YYYY 09 / 29 / 2025
Mailing Address 233 SOUTH WACKER DRIVE		FEC Identification Number C
City CHICAGO	State IL	Zip Code 60606
Purpose of Disbursement TRAVEL: AIRFARE		002
Candidate Name		Amount of Each Disbursement this Period 817.53
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:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2025
Mailing Address PO BOX 650448		FEC Identification Number C
City DALLAS	State TX	Zip Code 75265
Purpose of Disbursement CREDIT CARD PAYMENT		001
Candidate Name		Amount of Each Disbursement this Period 13443.79
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. AMAZON MARKETPLACE</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2025
Mailing Address 410 TERRY AVENUE NORTH		FEC Identification Number C
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement OFFICE SUPPLIES		001
Candidate Name		Amount of Each Disbursement this Period 92.32
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. AMAZON MARKETPLACE</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2025
Mailing Address 410 TERRY AVENUE NORTH		FEC Identification Number C
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement OFFICE SUPPLIES		001
Candidate Name		Amount of Each Disbursement this Period 91.30
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:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	13443.79
<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 133 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)  
**A. AMAZON MARKETPLACE**

Mailing Address 410 TERRY AVENUE NORTH

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 10 / 14 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 35.54

Transaction ID : SB17.I30484

Memo Item

Full Name (Last, First, Middle Initial)  
**B. AMAZON MARKETPLACE**

Mailing Address 410 TERRY AVENUE NORTH

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 10 / 14 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 19.99

Transaction ID : SB17.I30485

Memo Item

Full Name (Last, First, Middle Initial)  
**C. AMAZON MARKETPLACE**

Mailing Address 410 TERRY AVENUE NORTH

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 10 / 14 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 8.45

Transaction ID : SB17.I30486

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 134 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)  
**A. AMAZON MARKETPLACE**

Mailing Address 410 TERRY AVENUE NORTH

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 10 / 16 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 29.12

Transaction ID : SB17.I30498

Memo Item

Full Name (Last, First, Middle Initial)  
**B. AMAZON MARKETPLACE**

Mailing Address 410 TERRY AVENUE NORTH

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 10 / 17 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 165.21

Transaction ID : SB17.I30508

Memo Item

Full Name (Last, First, Middle Initial)  
**C. AMAZON MARKETPLACE**

Mailing Address 410 TERRY AVENUE NORTH

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 10 / 17 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 29.95

Transaction ID : SB17.I30509

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. AMAZON MARKETPLACE</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2025
Mailing Address 410 TERRY AVENUE NORTH		FEC Identification Number C
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement OFFICE SUPPLIES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 17.10
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. AMAZON MARKETPLACE</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2025
Mailing Address 410 TERRY AVENUE NORTH		FEC Identification Number C
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement OFFICE SUPPLIES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 8.55
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. AMAZON MARKETPLACE</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2025
Mailing Address 410 TERRY AVENUE NORTH		FEC Identification Number C
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement OFFICE SUPPLIES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 21.22
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:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 136 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. AMAZON MARKETPLACE</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2025
Mailing Address 410 TERRY AVENUE NORTH		FEC Identification Number C
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement OFFICE SUPPLIES	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 5.23	
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:	Transaction ID : SB17.I30570 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. AMAZON MARKETPLACE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2025
Mailing Address 410 TERRY AVENUE NORTH		FEC Identification Number C
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement OFFICE SUPPLIES	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 33.17	
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:	Transaction ID : SB17.I30593 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. AMAZON MARKETPLACE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2025
Mailing Address 410 TERRY AVENUE NORTH		FEC Identification Number C
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement OFFICE SUPPLIES	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 41.35	
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:	Transaction ID : SB17.I30595 <input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 137 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)  
**A. AMERICAN AIRLINES**

Mailing Address 4255 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155-2603

Purpose of Disbursement AIRFARE Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 10 / 14 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 358.48

Transaction ID : SB17.I30480

Memo Item

Full Name (Last, First, Middle Initial)  
**B. AMERICAN AIRLINES**

Mailing Address 4255 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155-2603

Purpose of Disbursement AIRFARE Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 10 / 14 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 288.48

Transaction ID : SB17.I30481

Memo Item

Full Name (Last, First, Middle Initial)  
**C. AMERICAN AIRLINES**

Mailing Address 4255 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155-2603

Purpose of Disbursement AIRFARE Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 10 / 16 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 99.00

Transaction ID : SB17.I30497

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 138 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2025
Mailing Address 4255 AMON CARTER BLVD		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155-2603
Purpose of Disbursement AIRFARE	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 468.96
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2025
Mailing Address 4255 AMON CARTER BLVD		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155-2603
Purpose of Disbursement AIRFARE	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 516.96
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2025
Mailing Address 4255 AMON CARTER BLVD		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155-2603
Purpose of Disbursement AIRFARE	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 66.04
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:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 139 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2025
Mailing Address 4255 AMON CARTER BLVD		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155-2603
Purpose of Disbursement AIRFARE	Category/ Type 002	
Candidate Name	Amount of Each Disbursement this Period 360.48	
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) ▼	Transaction ID : SB17.I30554 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2025
Mailing Address 4255 AMON CARTER BLVD		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155-2603
Purpose of Disbursement AIRFARE	Category/ Type 002	
Candidate Name	Amount of Each Disbursement this Period - 419.58	
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) ▼	Transaction ID : SB17.I30600 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AMTRAK</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2025
Mailing Address 400 NORTH CAPITOL STREET NORTHWEST		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20001
Purpose of Disbursement GROUND TRANSPORTATION	Category/ Type 002	
Candidate Name	Amount of Each Disbursement this Period 447.00	
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) ▼	Transaction ID : SB17.I30469 <input checked="" type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 140 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. AMTRAK</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2025
Mailing Address 400 NORTH CAPITOL STREET NORTHWEST		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20001
Purpose of Disbursement GROUND TRANSPORTATION		Amount of Each Disbursement this Period 338.00
Candidate Name		Transaction ID : SB17.I30478
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. AMTRAK</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2025
Mailing Address 400 NORTH CAPITOL STREET NORTHWEST		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20001
Purpose of Disbursement GROUND TRANSPORTATION		Amount of Each Disbursement this Period 338.00
Candidate Name		Transaction ID : SB17.I30479
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. AMTRAK</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2025
Mailing Address 400 NORTH CAPITOL STREET NORTHWEST		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20001
Purpose of Disbursement GROUND TRANSPORTATION		Amount of Each Disbursement this Period 521.00
Candidate Name		Transaction ID : SB17.I30496
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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: PAGE 141 OF 184  
(check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)

**A. AMTRAK**

Mailing Address 400 NORTH CAPITOL STREET NORTHWEST

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 10 / 17 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 227.00

Transaction ID : SB17.I30507

Memo Item

Full Name (Last, First, Middle Initial)

**B. AMTRAK**

Mailing Address 400 NORTH CAPITOL STREET NORTHWEST

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement FOOD/BEVERAGE Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 10 / 22 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 9.00

Transaction ID : SB17.I30529

Memo Item

Full Name (Last, First, Middle Initial)

**C. AT&T**

Mailing Address PO BOX 6463

City CAROL STREAM State IL Zip Code 60197-6463

Purpose of Disbursement PHONE SERVICES Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 10 / 23 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 303.44

Transaction ID : SB17.I30533

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)

**A. BRIGHTLINE**

Mailing Address 161 NORTHWEST 6 STREET

City MIAMI    State FL    Zip Code 33128

Purpose of Disbursement GROUND TRANSPORTATION     Category/Type

Candidate Name

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

State:    District:

Date of Disbursement:  /  /

FEC Identification Number:

Amount of Each Disbursement this Period:

Transaction ID : SB17.I30591

Memo Item

Full Name (Last, First, Middle Initial)

**B. BRIGHTLINE**

Mailing Address 161 NORTHWEST 6 STREET

City MIAMI    State FL    Zip Code 33128

Purpose of Disbursement GROUND TRANSPORTATION     Category/Type

Candidate Name

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

State:    District:

Date of Disbursement:  /  /

FEC Identification Number:

Amount of Each Disbursement this Period:

Transaction ID : SB17.I30599

Memo Item

Full Name (Last, First, Middle Initial)

**C. CANVA US, INC**

Mailing Address 200 EAST 6TH STREET

City AUSTIN    State TX    Zip Code 78701

Purpose of Disbursement SUBSCRIPTION     Category/Type

Candidate Name

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

State:    District:

Date of Disbursement:  /  /

FEC Identification Number:

Amount of Each Disbursement this Period:

Transaction ID : SB17.I30521

Memo Item

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

**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)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2025
Mailing Address 300 FIRST STREET SOUTHEAST		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FOOD/BEVERAGE	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 417.77	
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) ▼	Transaction ID : SB17.I30490
State:    District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CECCONI NED NOMAD</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2025
Mailing Address 1170 BROADWAY		FEC Identification Number C
City NEW YORK	State NY	Zip Code 10001
Purpose of Disbursement TRAVEL: LODGING	Category/ Type 002	
Candidate Name	Amount of Each Disbursement this Period 278.94	
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) ▼	Transaction ID : SB17.I30489
State:    District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CHEVRON</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2025
Mailing Address 720 SOUTHWEST 2ND AVENUE		FEC Identification Number C
City MIAMI	State FL	Zip Code 33130
Purpose of Disbursement TRAVEL EXPENSE	Category/ Type 002	
Candidate Name	Amount of Each Disbursement this Period 43.52	
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) ▼	Transaction ID : SB17.I30579
State:    District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 144 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. CROWNE PLAZA HQ</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2025
Mailing Address 15500 EAST 40TH AVENUE		FEC Identification Number C
City DENVER	State CO	Zip Code 80239-5701
Purpose of Disbursement TRAVEL:LODGING	002	
Candidate Name	Amount of Each Disbursement this Period 809.73	
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) ▼	Transaction ID : SB17.I30539
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. DELTA</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2025
Mailing Address 1030 DELTA BLVD DPT 680		FEC Identification Number C
City ATLANTA	State GA	Zip Code 30354-1989
Purpose of Disbursement TRAVEL: AIRFARE	002	
Candidate Name	Amount of Each Disbursement this Period 349.49	
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) ▼	Transaction ID : SB17.I30553
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. EXPEDIA</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2025
Mailing Address 1111 EXPEDIA GROUP WAY WEST		FEC Identification Number C
City SEATTLE	State WA	Zip Code 98119
Purpose of Disbursement LODGING	002	
Candidate Name	Amount of Each Disbursement this Period 1504.30	
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) ▼	Transaction ID : SB17.I30477
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. EXXONMOBILE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2025
Mailing Address 6790 SOUTHWEST 57TH AVENUE		FEC Identification Number C
City MIAMI	State FL	Zip Code 33143
Purpose of Disbursement FUEL	Category/Type 002	
Candidate Name	Amount of Each Disbursement this Period 51.01	
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) ▼	Transaction ID : SB17.I30583
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. FLORABELLE</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2025
Mailing Address 5612 SOUTHWEST 162ND PASS		FEC Identification Number C
City MIAMI	State FL	Zip Code 33193-5691
Purpose of Disbursement FLORALS	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 810.00	
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) ▼	Transaction ID : SB17.I30550
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. GOOGLE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2025
Mailing Address 1600 AMPHITHEATRE PARKWAY		FEC Identification Number C
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement WEBSITE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 13.42	
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) ▼	Transaction ID : SB17.I30576
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. GOOGLE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2025
Mailing Address 1600 AMPHITHEATRE PARKWAY		FEC Identification Number C
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement SUBSCRIPTION	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 168.23	
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:	Transaction ID : SB17.I30577 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. GOOGLE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2025
Mailing Address 1600 AMPHITHEATRE PARKWAY		FEC Identification Number C
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement ADVERTISING	Category/ Type 004	
Candidate Name	Amount of Each Disbursement this Period 157.54	
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:	Transaction ID : SB17.I30578 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. HP.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2025
Mailing Address 3000 HANOVER STREET		FEC Identification Number C
City PALO ALTO	State CA	Zip Code 94304
Purpose of Disbursement SOFTWARE	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 25.67	
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:	Transaction ID : SB17.I30538 <input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 147 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. LYFT		M M / D D / Y Y Y Y 10 / 19 / 2025
Mailing Address 185 BERRY ST		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94107-5705
Purpose of Disbursement GROUND TRANSPORTATION		002
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For:	42.53
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I30520
State: District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. LYFT		M M / D D / Y Y Y Y 10 / 26 / 2025
Mailing Address 185 BERRY ST		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94107-5705
Purpose of Disbursement GROUND TRANSPORTATION		002
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For:	7.24
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I30545
State: District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. LYFT		M M / D D / Y Y Y Y 11 / 04 / 2025
Mailing Address 185 BERRY ST		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94107-5705
Purpose of Disbursement GROUND TRANSPORTATION		002
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For:	45.77
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I30585
State: District:		<input checked="" type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 148 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. LYFT</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2025
Mailing Address 185 BERRY ST		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107-5705
Purpose of Disbursement GROUND TRANSPORTATION	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 36.87
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) ▼	Transaction ID : SB17.I30597
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. METRICOOL</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2025
Mailing Address 12 ENTREPLANTA H C		FEC Identification Number C
City TELLEZ, MADRID	State ZZ	Zip Code 00000
Purpose of Disbursement SUBSCRIPTION	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 59.00
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) ▼	Transaction ID : SB17.I30504
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. MILANEZZA KITCHEN</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2025
Mailing Address 700 CRANDON BOULEVARD		FEC Identification Number C
City KEY BISCAYNE	State FL	Zip Code 33149
Purpose of Disbursement FOOD/BEVERAGE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 19.87
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) ▼	Transaction ID : SB17.I30473
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 149 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. OFFICE DEPOT</b>		M M / D D / Y Y Y Y 10 / 31 / 2025
Mailing Address 10630 NW 19TH ST		FEC Identification Number
City DORAL	State FL	Zip Code 33172-2542
Purpose of Disbursement OFFICE SUPPLIES	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	34.96	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I30567	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. PURA VIDA MIAMI</b>		M M / D D / Y Y Y Y 11 / 02 / 2025
Mailing Address 460 SOUTH ROSEMARY AVENUE		FEC Identification Number
City WEST PALM BEACH	State FL	Zip Code 33401
Purpose of Disbursement FOOD/BEVERAGE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	100.00	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I30580	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. PURA VIDA MIAMI</b>		M M / D D / Y Y Y Y 11 / 02 / 2025
Mailing Address 460 SOUTH ROSEMARY AVENUE		FEC Identification Number
City WEST PALM BEACH	State FL	Zip Code 33401
Purpose of Disbursement FOOD/BEVERAGE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	58.74	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I30581	
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 150 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)

**A. SIRIUS XM RADIO INC**

Mailing Address 1500 ECKINGTON PLACE NORTHEAST

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement SUBSCRIPTION Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 10 / 19 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 28.27

Transaction ID : SB17.I30518

Memo Item

Full Name (Last, First, Middle Initial)

**B. SUNPASS**

Mailing Address 9405 WEST COLONIAL DRIVE

City OCOEE State FL Zip Code 34761

Purpose of Disbursement TOLL EXPENSE Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement 10 / 12 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 25.00

Transaction ID : SB17.I30472

Memo Item

Full Name (Last, First, Middle Initial)

**C. SUNPASS**

Mailing Address 9405 WEST COLONIAL DRIVE

City OCOEE State FL Zip Code 34761

Purpose of Disbursement TOLL EXPENSES Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement 11 / 05 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 25.00

Transaction ID : SB17.I30589

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 OF 184			
	<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)  
**Salazar for Congress**

**A. THE GOLDEN HOG**

Full Name (Last, First, Middle Initial)  
Mailing Address 91 HARBOR DRIVE

City KEY BISCAYNE State FL Zip Code 33149

Purpose of Disbursement FOOD/BEVERAGE Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 10 / 10 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 73.44

Transaction ID : SB17.I30467

Memo Item

**B. THE GOLDEN HOG**

Full Name (Last, First, Middle Initial)  
Mailing Address 91 HARBOR DRIVE

City KEY BISCAYNE State FL Zip Code 33149

Purpose of Disbursement FOOD/BEVERAGE Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 10 / 10 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 18.17

Transaction ID : SB17.I30468

Memo Item

**C. THE GOLDEN HOG**

Full Name (Last, First, Middle Initial)  
Mailing Address 91 HARBOR DRIVE

City KEY BISCAYNE State FL Zip Code 33149

Purpose of Disbursement FOOD/BEVERAGE Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 10 / 30 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 88.37

Transaction ID : SB17.I30562

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: PAGE 152 OF 184  
(check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

**A. THE GOLDEN HOG**

Full Name (Last, First, Middle Initial)  
Mailing Address 91 HARBOR DRIVE

City KEY BISCAYNE    State FL    Zip Code 33149

Purpose of Disbursement FOOD/BEVERAGE     001    Category/Type

Candidate Name

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

State:    District:

Date of Disbursement: 10 / 31 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 58.71

Transaction ID : SB17.I30564

Memo Item

**B. THE GOLDEN HOG**

Full Name (Last, First, Middle Initial)  
Mailing Address 91 HARBOR DRIVE

City KEY BISCAYNE    State FL    Zip Code 33149

Purpose of Disbursement FOOD/BEVERAGE     001    Category/Type

Candidate Name

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

State:    District:

Date of Disbursement: 10 / 31 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 13.63

Transaction ID : SB17.I30565

Memo Item

**C. THE GOLDEN HOG**

Full Name (Last, First, Middle Initial)  
Mailing Address 91 HARBOR DRIVE

City KEY BISCAYNE    State FL    Zip Code 33149

Purpose of Disbursement FOOD/BEVERAGE     001    Category/Type

Candidate Name

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

State:    District:

Date of Disbursement: 10 / 31 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 7.49

Transaction ID : SB17.I30566

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: PAGE 153 OF 184  
(check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)

**A. THE GOLDEN HOG**

Mailing Address 91 HARBOR DRIVE

City KEY BISCAYNE State FL Zip Code 33149

Purpose of Disbursement FOOD/BEVERAGE Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 11 / 05 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 47.07

Transaction ID : SB17.I30588

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER**

Mailing Address 1455 MARKET STREET SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 10 / 13 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 74.89

Transaction ID : SB17.I30476

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER**

Mailing Address 1455 MARKET STREET SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 10 / 16 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 46.59

Transaction ID : SB17.I30491

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. UBER</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		002
Candidate Name		Amount of Each Disbursement this Period 37.89
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) ▼	Transaction ID : SB17.I30492
State:      District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. UBER</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		002
Candidate Name		Amount of Each Disbursement this Period 3.78
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) ▼	Transaction ID : SB17.I30493
State:      District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. UBER</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		002
Candidate Name		Amount of Each Disbursement this Period 60.15
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) ▼	Transaction ID : SB17.I30499
State:      District:		<input checked="" type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 155 OF 184	
	<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)  
**Salazar for Congress**

**A. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 10 / 17 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 29.58

Transaction ID : SB17.I30500

Memo Item

**B. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 10 / 17 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 14.16

Transaction ID : SB17.I30501

Memo Item

**C. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 10 / 17 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 2.95

Transaction ID : SB17.I30502

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

**A. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO    State CA    Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION     002    Category/Type

Candidate Name

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

State:    District:

Date of Disbursement: M M / D D / Y Y Y Y  
10 / 18 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 59.22

Transaction ID : SB17.I30511

Memo Item

**B. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO    State CA    Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION     002    Category/Type

Candidate Name

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

State:    District:

Date of Disbursement: M M / D D / Y Y Y Y  
10 / 18 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 39.00

Transaction ID : SB17.I30512

Memo Item

**C. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO    State CA    Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION     002    Category/Type

Candidate Name

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

State:    District:

Date of Disbursement: M M / D D / Y Y Y Y  
10 / 18 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 8.88

Transaction ID : SB17.I30513

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 157 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. UBER</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		Amount of Each Disbursement this Period 38.03
Candidate Name		Transaction ID : SB17.I30514
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type 002	

Full Name (Last, First, Middle Initial) <b>B. UBER</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		Amount of Each Disbursement this Period 21.37
Candidate Name		Transaction ID : SB17.I30515
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type 002	

Full Name (Last, First, Middle Initial) <b>C. UBER</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		Amount of Each Disbursement this Period 18.55
Candidate Name		Transaction ID : SB17.I30516
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type 002	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 158 OF 184	
	<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)  
**Salazar for Congress**

**A. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 10 / 19 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 2.00

Transaction ID : SB17.I30517

Memo Item

**B. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 10 / 20 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 42.20

Transaction ID : SB17.I30523

Memo Item

**C. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 10 / 22 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 41.67

Transaction ID : SB17.I30526

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: PAGE 159 OF 184  
(check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

**A. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 10 / 22 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 33.58

Transaction ID : SB17.I30527

Memo Item

**B. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 10 / 23 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 24.17

Transaction ID : SB17.I30531

Memo Item

**C. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 10 / 23 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 10.00

Transaction ID : SB17.I30532

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 160 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)

**A. UBER**

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 10 / 24 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 56.94

Transaction ID : SB17.I30535

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER**

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 10 / 24 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 30.36

Transaction ID : SB17.I30536

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER**

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 10 / 25 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 32.21

Transaction ID : SB17.I30537

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 OF 184			
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>A. UBER</b>		M M / D D / Y Y Y Y 10 / 26 / 2025	
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number	
City SAN FRANCISCO	State CA	Zip Code 94103	C
Purpose of Disbursement GROUND TRANSPORTATION		002	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	31.42
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) ▼		Transaction ID : SB17.I30543
State: District:			<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>B. UBER</b>		M M / D D / Y Y Y Y 10 / 26 / 2025	
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number	
City SAN FRANCISCO	State CA	Zip Code 94103	C
Purpose of Disbursement GROUND TRANSPORTATION		002	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	29.94
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) ▼		Transaction ID : SB17.I30544
State: District:			<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>C. UBER</b>		M M / D D / Y Y Y Y 10 / 27 / 2025	
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number	
City SAN FRANCISCO	State CA	Zip Code 94103	C
Purpose of Disbursement GROUND TRANSPORTATION		002	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	52.21
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) ▼		Transaction ID : SB17.I30547
State: District:			<input checked="" type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 162 OF 184	
	<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)  
**Salazar for Congress**

**A. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 10 / 27 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 38.70

Transaction ID : SB17.I30548

Memo Item

**B. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 10 / 27 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 5.22

Transaction ID : SB17.I30549

Memo Item

**C. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 10 / 28 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 201.63

Transaction ID : SB17.I30552

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 163 OF 184			
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. UBER</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		Amount of Each Disbursement this Period 74.49
Candidate Name		Transaction ID : SB17.I30556
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type 002	

Full Name (Last, First, Middle Initial) <b>B. UBER</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		Amount of Each Disbursement this Period 30.07
Candidate Name		Transaction ID : SB17.I30563
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type 002	

Full Name (Last, First, Middle Initial) <b>C. UBER</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2025
Mailing Address 1455 MARKET STREET SUITE 400		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement GROUND TRANSPORTATION		Amount of Each Disbursement this Period 103.36
Candidate Name		Transaction ID : SB17.I30573
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type 002	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<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 164 OF 184			
	<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)  
**Salazar for Congress**

**A. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 11 / 05 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 92.87

Transaction ID : SB17.I30586

Memo Item

**B. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 11 / 06 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 39.43

Transaction ID : SB17.I30592

Memo Item

**C. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 11 / 07 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 113.59

Transaction ID : SB17.I30594

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 165 OF 184	
	<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)  
**Salazar for Congress**

**A. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 11 / 08 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 96.32

Transaction ID : SB17.I30596

Memo Item

**B. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET  
SUITE 400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement GROUND TRANSPORTATION Category/Type 002

Candidate Name

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

State: District:

Date of Disbursement: 11 / 10 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 47.07

Transaction ID : SB17.I30598

Memo Item

**C. WALMART**

Full Name (Last, First, Middle Initial)

Mailing Address 8400 CORAL WAY

City MIAMI State FL Zip Code 33165

Purpose of Disbursement OFFICE SUPPLIES Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 10 / 26 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 158.74

Transaction ID : SB17.I30542

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. WALMART</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2025
Mailing Address 8400 CORAL WAY		FEC Identification Number C
City MIAMI	State FL	Zip Code 33165
Purpose of Disbursement OFFICE SUPPLIES	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 5.24	
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) ▼	Transaction ID : SB17.I30546
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2025
Mailing Address 1593 SPRING HILL RD SUITE 400		FEC Identification Number C
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement SUBSCRIPTIONS	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 1000.00	
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) ▼	Transaction ID : SB17.I29176
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2025
Mailing Address 1593 SPRING HILL RD SUITE 400		FEC Identification Number C
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement SUBSCRIPTIONS	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 1000.00	
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) ▼	Transaction ID : SB17.I30294
State: District:	<input type="checkbox"/> Memo Item	

<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 167 OF 184			
	<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	

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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. <b>CMDI</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>16</td> <td></td> <td>2025</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		16		2025
M M	/	D D	/	Y Y Y Y									
12		16		2025									
Mailing Address 1593 SPRING HILL RD SUITE 400		FEC Identification Number											
City TYSONS CORNER	State VA	Zip Code 22182	C										
Purpose of Disbursement SUBSCRIPTIONS	Category/Type 001		Amount of Each Disbursement this Period										
Candidate Name			1000.00										
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) ▼		Transaction ID : SB17.I30314										
State: District:			<input type="checkbox"/> Memo Item										

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. <b>CONSERVATIVE CONNECTOR</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>20</td> <td></td> <td>2025</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		20		2025
M M	/	D D	/	Y Y Y Y									
10		20		2025									
Mailing Address 513 C STREET NORTHEAST		FEC Identification Number											
City WASHINGTON	State DC	Zip Code 20002	C										
Purpose of Disbursement LIST RENTAL	Category/Type 003		Amount of Each Disbursement this Period										
Candidate Name			43.00										
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) ▼		Transaction ID : SB17.I29181										
State: District:			<input type="checkbox"/> Memo Item										

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. <b>CONSERVATIVE CONNECTOR</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>03</td> <td></td> <td>2025</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	11		03		2025
M M	/	D D	/	Y Y Y Y									
11		03		2025									
Mailing Address 513 C STREET NORTHEAST		FEC Identification Number											
City WASHINGTON	State DC	Zip Code 20002	C										
Purpose of Disbursement LIST RENTAL	Category/Type 003		Amount of Each Disbursement this Period										
Candidate Name			12.90										
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) ▼		Transaction ID : SB17.I29200										
State: District:			<input type="checkbox"/> Memo Item										

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1055.90
<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 168 OF 184			
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)

**A. CR MEDIAMINDS CONSULTING**

Mailing Address 400 NORTHWEST 93RD TERRACE

City PEMBROKE PINES State FL Zip Code 33024

Purpose of Disbursement DIGITAL COMMUNICATIONS CONSULTING Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 10 / 01 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 1250.00

Transaction ID : SB17.I29146

Memo Item

Full Name (Last, First, Middle Initial)

**B. CR MEDIAMINDS CONSULTING**

Mailing Address 400 NORTHWEST 93RD TERRACE

City PEMBROKE PINES State FL Zip Code 33024

Purpose of Disbursement DIGITAL COMMUNICATIONS CONSULTING/TRAVEL Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 11 / 05 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 2117.53

Transaction ID : SB17.I29208

Memo Item

Full Name (Last, First, Middle Initial)

**C. CR MEDIAMINDS CONSULTING**

Mailing Address 400 NORTHWEST 93RD TERRACE

City PEMBROKE PINES State FL Zip Code 33024

Purpose of Disbursement DIGITAL COMMUNICATIONS CONSULTING Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 12 / 11 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 1250.00

Transaction ID : SB17.I30312

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 4617.53

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)  
**A. DICKINSON WRIGHT PLLC**

Mailing Address 2600 WEST BIG BEAVER ROAD  
STE. 300

City TROY State MI Zip Code 48084

Purpose of Disbursement LEGAL CONSULTING Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 02 / 2025

FEC Identification Number  
C

Amount of Each Disbursement this Period  
1553.00

Transaction ID : SB17.I29152

Memo Item

Full Name (Last, First, Middle Initial)  
**B. INSPIRE CAPITAL FL**

Mailing Address 591 EVERNIA STREET  
APT. 1519

City WEST PALM BEACH State FL Zip Code 33401

Purpose of Disbursement FINANCE CONSULTING Category/Type 003

Candidate Name

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

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 17 / 2025

FEC Identification Number  
C

Amount of Each Disbursement this Period  
210.00

Transaction ID : SB17.I29178

Memo Item

Full Name (Last, First, Middle Initial)  
**C. INSPIRE CAPITAL FL**

Mailing Address 591 EVERNIA STREET  
APT. 1519

City WEST PALM BEACH State FL Zip Code 33401

Purpose of Disbursement FINANCE CONSULTING Category/Type 003

Candidate Name

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

State: District:

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

FEC Identification Number  
C

Amount of Each Disbursement this Period  
2185.00

Transaction ID : SB17.I29190

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3948.00
<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: PAGE 170 OF 184  
(check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)  
**A. NABUT PROFESSIONAL SERVICES LLC**

Mailing Address 3217 SOUTHEAST 4TH COURT

City HOMESTEAD    State FL    Zip Code 33033

Purpose of Disbursement DIGITAL COMMUNICATIONS CONSULTING        Category/Type

Candidate Name

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

State:    District:

Date of Disbursement:  /  /

FEC Identification Number:

Amount of Each Disbursement this Period:

Transaction ID : SB17.I29155

Memo Item

Full Name (Last, First, Middle Initial)  
**B. NABUT PROFESSIONAL SERVICES LLC**

Mailing Address 3217 SOUTHEAST 4TH COURT

City HOMESTEAD    State FL    Zip Code 33033

Purpose of Disbursement DIGITAL COMMUNICATIONS CONSULTING        Category/Type

Candidate Name

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

State:    District:

Date of Disbursement:  /  /

FEC Identification Number:

Amount of Each Disbursement this Period:

Transaction ID : SB17.I29206

Memo Item

Full Name (Last, First, Middle Initial)  
**C. NABUT PROFESSIONAL SERVICES LLC**

Mailing Address 3217 SOUTHEAST 4TH COURT

City HOMESTEAD    State FL    Zip Code 33033

Purpose of Disbursement DIGITAL COMMUNICATIONS CONSULTING        Category/Type

Candidate Name

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

State:    District:

Date of Disbursement:  /  /

FEC Identification Number:

Amount of Each Disbursement this Period:

Transaction ID : SB17.I30319

Memo Item

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

**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)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

**A. O2M DIGITAL LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 539 WEST COMMERCE STREET  
UNIT 4240

City DALLAS State TX Zip Code 75208

Purpose of Disbursement LIST RENTAL Category/Type 003

Candidate Name

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

State: District:

Date of Disbursement 10 / 06 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 2.41

Transaction ID : SB17.I29162

Memo Item

**B. O2M DIGITAL LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 539 WEST COMMERCE STREET  
UNIT 4240

City DALLAS State TX Zip Code 75208

Purpose of Disbursement LIST RENTAL Category/Type 003

Candidate Name

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

State: District:

Date of Disbursement 10 / 14 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 12.75

Transaction ID : SB17.I29170

Memo Item

**C. O2M DIGITAL LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 539 WEST COMMERCE STREET  
UNIT 4240

City DALLAS State TX Zip Code 75208

Purpose of Disbursement LIST RENTAL Category/Type 003

Candidate Name

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

State: District:

Date of Disbursement 11 / 03 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 2.41

Transaction ID : SB17.I29202

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 17.57

**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)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)

**A. ONMESSAGE DIGITAL FUNDRAISING**

Mailing Address 817 SLATERS LANE

City ALEXANDRIA    State VA    Zip Code 22314

Purpose of Disbursement DIGITAL FUNDRAISING CONSULTING     Category/Type

Candidate Name

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

State:    District:

Date of Disbursement: M M / D D / Y Y Y Y  
10 / 06 / 2025

FEC Identification Number:

Amount of Each Disbursement this Period:

Transaction ID : SB17.I29163

Memo Item

Full Name (Last, First, Middle Initial)

**B. ONMESSAGE DIGITAL FUNDRAISING**

Mailing Address 817 SLATERS LANE

City ALEXANDRIA    State VA    Zip Code 22314

Purpose of Disbursement DIGITAL FUNDRAISING CONSULTING     Category/Type

Candidate Name

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

State:    District:

Date of Disbursement: M M / D D / Y Y Y Y  
10 / 14 / 2025

FEC Identification Number:

Amount of Each Disbursement this Period:

Transaction ID : SB17.I29171

Memo Item

Full Name (Last, First, Middle Initial)

**C. ONMESSAGE DIGITAL FUNDRAISING**

Mailing Address 817 SLATERS LANE

City ALEXANDRIA    State VA    Zip Code 22314

Purpose of Disbursement DIGITAL FUNDRAISING CONSULTING     Category/Type

Candidate Name

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

State:    District:

Date of Disbursement: M M / D D / Y Y Y Y  
10 / 20 / 2025

FEC Identification Number:

Amount of Each Disbursement this Period:

Transaction ID : SB17.I29182

Memo Item

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

**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 173 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>A. ONMESSAGE DIGITAL FUNDRAISING</b>		M M / D D / Y Y Y Y 10 / 27 / 2025	
Mailing Address 817 SLATERS LANE		FEC Identification Number	
City ALEXANDRIA	State VA	C	
Zip Code 22314	Purpose of Disbursement DIGITAL FUNDRAISING CONSULTING	Amount of Each Disbursement this Period	
	003	9.00	
Candidate Name		Transaction ID : SB17.I29186	
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) ▼	<input type="checkbox"/> Memo Item	
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>B. ONMESSAGE DIGITAL FUNDRAISING</b>		M M / D D / Y Y Y Y 11 / 03 / 2025	
Mailing Address 817 SLATERS LANE		FEC Identification Number	
City ALEXANDRIA	State VA	C	
Zip Code 22314	Purpose of Disbursement DIGITAL FUNDRAISING CONSULTING	Amount of Each Disbursement this Period	
	003	39.43	
Candidate Name		Transaction ID : SB17.I29203	
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) ▼	<input type="checkbox"/> Memo Item	
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>C. RIGHT RAIL LIST CO.</b>		M M / D D / Y Y Y Y 10 / 06 / 2025	
Mailing Address 705 MELVIN AVENUE #105		FEC Identification Number	
City ANNAPOLIS	State MD	C	
Zip Code 21401	Purpose of Disbursement LIST RENTAL	Amount of Each Disbursement this Period	
	003	3.50	
Candidate Name		Transaction ID : SB17.I29161	
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) ▼	<input type="checkbox"/> Memo Item	
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	51.93
<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)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)

**A. RIGHT RAIL LIST CO.**

Mailing Address 705 MELVIN AVENUE #105

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement LIST RENTAL Category/Type 003

Candidate Name

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

State: District:

Date of Disbursement 10 / 14 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 28.00

Transaction ID : SB17.I29169

Memo Item

Full Name (Last, First, Middle Initial)

**B. RIGHT RAIL LIST CO.**

Mailing Address 705 MELVIN AVENUE #105

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement LIST RENTAL Category/Type 003

Candidate Name

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

State: District:

Date of Disbursement 10 / 27 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 17.50

Transaction ID : SB17.I29185

Memo Item

Full Name (Last, First, Middle Initial)

**C. RIGHT RAIL LIST CO.**

Mailing Address 705 MELVIN AVENUE #105

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement LIST RENTAL Category/Type 003

Candidate Name

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

State: District:

Date of Disbursement 11 / 03 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 3.50

Transaction ID : SB17.I29201

Memo Item

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ 49.00

**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 175 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. SMART VOTERS USA, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2025
Mailing Address 2325 SOUTHWEST 127TH AVENUE		FEC Identification Number C
City MIAMI	State FL	Zip Code 33175
Purpose of Disbursement GRASSROOTS/FIELD CONSULTING	001	
Candidate Name	Category/Type	
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:	Amount of Each Disbursement this Period 10000.00	
		Transaction ID : SB17.I29153
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. SMART VOTERS USA, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2025
Mailing Address 2325 SOUTHWEST 127TH AVENUE		FEC Identification Number C
City MIAMI	State FL	Zip Code 33175
Purpose of Disbursement GRASSROOTS/FIELD CONSULTING	001	
Candidate Name	Category/Type	
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:	Amount of Each Disbursement this Period 10000.00	
		Transaction ID : SB17.I29194
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. STRATEGIC VICTORY SOLUTIONS LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2025
Mailing Address 1305 WEST 11TH STREET #213		FEC Identification Number C
City HOUSTON	State TX	Zip Code 77008
Purpose of Disbursement COMPLIANCE CONSULTING/SHIPPING	001	
Candidate Name	Category/Type	
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:	Amount of Each Disbursement this Period 3009.65	
		Transaction ID : SB17.I29157
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	23009.65
<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)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. STRATEGIC VICTORY SOLUTIONS LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2025
Mailing Address 1305 WEST 11TH STREET #213		FEC Identification Number C
City HOUSTON	State TX	Zip Code 77008
Purpose of Disbursement COMPLIANCE CONSULTING/SHIPPING		001
Candidate Name		Amount of Each Disbursement this Period 3038.60
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) ▼	Transaction ID : SB17.I29198
State:    District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. STRATEGIC VICTORY SOLUTIONS LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2025
Mailing Address 1305 WEST 11TH STREET #213		FEC Identification Number C
City HOUSTON	State TX	Zip Code 77008
Purpose of Disbursement COMPLIANCE CONSULTING/SHIPPING		001
Candidate Name		Amount of Each Disbursement this Period 3020.90
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) ▼	Transaction ID : SB17.I30305
State:    District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. STRATEGIC VICTORY SOLUTIONS LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2025
Mailing Address 1305 WEST 11TH STREET #213		FEC Identification Number C
City HOUSTON	State TX	Zip Code 77008
Purpose of Disbursement SHIPPING		001
Candidate Name		Amount of Each Disbursement this Period 10.45
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) ▼	Transaction ID : SB17.I30327
State:    District:		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6069.95
<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)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)  
**A. THE STANTON GROUP, LLC**

Mailing Address **3410 ALABAMA AVENUE**

City **ALEXANDRIA**    State **VA**    Zip Code **22305**

Purpose of Disbursement  
**FINANCE CONSULTING**        Category/Type

Candidate Name

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

State:    District:

Date of Disbursement  
 /  /

FEC Identification Number

Amount of Each Disbursement this Period

Transaction ID : **SB17.I29193**

Memo Item

Full Name (Last, First, Middle Initial)  
**B. THE STANTON GROUP, LLC**

Mailing Address **3410 ALABAMA AVENUE**

City **ALEXANDRIA**    State **VA**    Zip Code **22305**

Purpose of Disbursement  
**EVENT VENUE RENTAL & CATERING/TRAVEL/SHIPPING**        Category/Type

Candidate Name

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

State:    District:

Date of Disbursement  
 /  /

FEC Identification Number

Amount of Each Disbursement this Period

Transaction ID : **SB17.I29209**

Memo Item

Full Name (Last, First, Middle Initial)  
**C. THE STANTON GROUP, LLC**

Mailing Address **3410 ALABAMA AVENUE**

City **ALEXANDRIA**    State **VA**    Zip Code **22305**

Purpose of Disbursement  
**FINANCE CONSULTING/EVENT VENUE RENTAL & CATERING**        Category/Type

Candidate Name

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

State:    District:

Date of Disbursement  
 /  /

FEC Identification Number

Amount of Each Disbursement this Period

Transaction ID : **SB17.I30307**

Memo Item

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

**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 178 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. V V ACCOUNTING SERVICES, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2025	
Mailing Address 13209 SOUTHWEST 10TH LANE			FEC Identification Number C	
City MIAMI	State FL	Zip Code 33184	Amount of Each Disbursement this Period 17000.00	
Purpose of Disbursement FINANCE & ACCOUNTING SERVICES CONSULTING		Category/ Type 001	Transaction ID : SB17.I29145	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. V V ACCOUNTING SERVICES, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2025	
Mailing Address 13209 SOUTHWEST 10TH LANE			FEC Identification Number C	
City MIAMI	State FL	Zip Code 33184	Amount of Each Disbursement this Period 17000.00	
Purpose of Disbursement FINANCE & ACCOUNTING SERVICES CONSULTING		Category/ Type 001	Transaction ID : SB17.I29192	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2025	
Mailing Address 1776 WILSON BOULEVARD			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 290.85	
Purpose of Disbursement PROCESSING FEES		Category/ Type 001	Transaction ID : SB17.I29159	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	34290.85
<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 179 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2025
Mailing Address 1776 WILSON BOULEVARD		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement MERCHANDISE FEES	Category/Type 003	
Candidate Name	Amount of Each Disbursement this Period 10.00	
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) ▼	Transaction ID : SB17.I29160
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2025
Mailing Address 1776 WILSON BOULEVARD		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement PROCESSING FEES	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 52.76	
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) ▼	Transaction ID : SB17.I29168
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2025
Mailing Address 1776 WILSON BOULEVARD		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement PROCESSING FEES	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 182.39	
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) ▼	Transaction ID : SB17.I29180
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	245.15
<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 180 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2025
Mailing Address 1776 WILSON BOULEVARD		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement PROCESSING FEES	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 8.95	
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:	Transaction ID : SB17.I29183 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2025
Mailing Address 1776 WILSON BOULEVARD		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement PROCESSING FEES	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 16.21	
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:	Transaction ID : SB17.I29199 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2025
Mailing Address 1776 WILSON BOULEVARD		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement PROCESSING FEES	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 32.49	
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:	Transaction ID : SB17.I30211 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	57.65
<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 181 OF 184			
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2025
Mailing Address 1776 WILSON BOULEVARD		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement PROCESSING FEES	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 585.61
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:	Transaction ID : SB17.I30293 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2025
Mailing Address 1776 WILSON BOULEVARD		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement PROCESSING FEES	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 10.11
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:	Transaction ID : SB17.I30297 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2025
Mailing Address 1776 WILSON BOULEVARD		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement PROCESSING FEES	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 8.22
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:	Transaction ID : SB17.I30306 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	603.94
<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 182 OF 184	
	<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)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2025
Mailing Address 1776 WILSON BOULEVARD		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement PROCESSING FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 15.92
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:	Transaction ID : SB17.I30310 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2025
Mailing Address 1776 WILSON BOULEVARD		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement PROCESSING FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 248.03
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:	Transaction ID : SB17.I30313 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2025
Mailing Address 1776 WILSON BOULEVARD		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement PROCESSING FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 87.66
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:	Transaction ID : SB17.I30323 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	351.61
<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)  
 17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
**Salazar for Congress**

Full Name (Last, First, Middle Initial)

### A. WINRED TECHNICAL SERVICES, LLC

Mailing Address 1776 WILSON BOULEVARD

City ARLINGTON    State VA    Zip Code 22209

Purpose of Disbursement PROCESSING FEES     001    Category/Type

Candidate Name

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

Date of Disbursement  
M M / D D / Y Y Y Y  
12 / 29 / 2025

FEC Identification Number  
C

Amount of Each Disbursement this Period  
7.42  
Transaction ID : SB17.I30328

Memo Item

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City    State    Zip Code

Purpose of Disbursement        Category/Type

Candidate Name

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

Date of Disbursement  
M M / D D / Y Y Y Y

FEC Identification Number  
C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City    State    Zip Code

Purpose of Disbursement        Category/Type

Candidate Name

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

Date of Disbursement  
M M / D D / Y Y Y Y

FEC Identification Number  
C

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 7.42  
**TOTAL** This Period (last page this line number only).....▶ 166642.14

**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)

**Salazar for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Raider Fundraising</b>			Nature of Debt (Purpose): Fundraising Consulting-Disputed Invoice
Mailing Address PO Box 11526			
City Austin	State TX	Zip Code 78711	

Outstanding Balance Beginning This Period <input style="width:90%;" type="text" value="14300.00"/>		<b>Transaction ID : SD10.85</b>	
Amount Incurred This Period <input style="width:90%;" type="text" value="0.00"/>	Payment This Period <input style="width:90%;" type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input style="width:90%;" type="text" value="14300.00"/>	

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 <input style="width:90%;" type="text"/>			
Amount Incurred This Period <input style="width:90%;" type="text"/>	Payment This Period <input style="width:90%;" type="text"/>	Outstanding Balance at Close of This Period <input style="width:90%;" 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 style="width:90%;" type="text"/>			
Amount Incurred This Period <input style="width:90%;" type="text"/>	Payment This Period <input style="width:90%;" type="text"/>	Outstanding Balance at Close of This Period <input style="width:90%;" type="text"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input style="width:90%;" type="text" value="14300.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input style="width:90%;" type="text" value="14300.00"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input style="width:90%;" 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 style="width:90%;" type="text" value="14300.00"/>