

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Nellie Pou for Congress

ADDRESS (number and street)

PO Box 2696

Check if different
than previously
reported. (ACC)

Paterson

NJ

07509

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00887547

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

NJ

09

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

11

D D /

26

Y Y Y Y /

2024

through

M M /

12

D D /

31

Y Y Y Y /

2024

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Cruz, Migdalia, , ,

Signature of Treasurer

Cruz, Migdalia, , ,

Date

M M /

01

D D /

31

Y Y Y Y /

2025

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Nellie Pou for Congress

Report Covering the Period:

From:

M M / D D / Y Y Y Y
11 / 26 / 2024

To:

M M / D D / Y Y Y Y
12 / 31 / 2024

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	6300.00	10751.00
(b) Total Contribution Refunds (from Line 20(d))	1000.00	1000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	5300.00	9751.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	20340.36	45852.06
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	20340.36	45852.06
8. Cash on Hand at Close of Reporting Period (from Line 27)	152473.56	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	10000.00	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Nellie Pou for Congress

Report Covering the Period:

From:

M M / D D / Y Y Y Y
11 / 26 / 2024

To:

M M / D D / Y Y Y Y
12 / 31 / 2024**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

3300.00

7650.00

(ii) Unitemized

0.00

101.00

(iii) TOTAL of contributions
from individuals ▶

3300.00

7751.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

3000.00

3000.00

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

6300.00

10751.00

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS
(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

6300.00

10751.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	20340.36	45852.06
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)	1000.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1000.00	1000.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	21340.36	46852.06

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	167513.92
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	6300.00
25. SUBTOTAL (add Line 23 and Line 24).....	173813.92
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	21340.36
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	152473.56

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 5 OF 17

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Nellie Pou for Congress

Full Name (Last, First, Middle Initial)

Jacobs, Irwin, Mark, ,

Mailing Address 2710 Inverness Ct

City

La Jolla

State

CA

Zip Code

92037-2041

FEC ID number of contributing
federal political committee.

C

Name of Employer
n/aOccupation
Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		27		2024

Transaction ID : 6205714

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

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

Full Name (Last, First, Middle Initial)

C.

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

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

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

3300.00

3300.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 17

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Nellie Pou for Congress

Full Name (Last, First, Middle Initial)

ASTELLAS US LLC PAC (ASTELLAS PAC)

Mailing Address 2375 Waterview Dr

City

Northbrook

State

IL

Zip Code

60062-6145

FEC ID number of contributing
federal political committee.

C C00444885

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 11 2024

Transaction ID : 6264010

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

COMMONWEALTH PAC

Mailing Address PO Box 383

City

Merrifield

State

VA

Zip Code

22116-0383

FEC ID number of contributing
federal political committee.

C C00498931

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 18 2024

Transaction ID : 6189202

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PFIZER INC. PAC

Mailing Address 66 Hudson Blvd E

City

New York

State

NY

Zip Code

10001-2189

FEC ID number of contributing
federal political committee.

C C00016683

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 21 2024

Transaction ID : 6199085

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

3000.00

3000.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Nellie Pou for Congress

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 1270

City
NewarkState
NJZip Code
07101-1270Purpose of Disbursement
Credit card fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	4	/	2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

42.40

Transaction ID : 500142900

☐ Memo Item**B. Amalgamated Bank**

Mailing Address 1825 K St NW

City
WashingtonState
DCZip Code
20006-1202Purpose of Disbursement
Bank fee

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
1	1	/	2	7	/	2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

342.39

Transaction ID : 500133010

☐ Memo Item**C. T-Mobile**

Mailing Address PO Box 742596

City
CincinnatiState
OHZip Code
45274-2596Purpose of Disbursement
Telephone

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
1	2	/	0	3	/	2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

117.52

Transaction ID : 500142902

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

502.31

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Nellie Pou for Congress

Full Name (Last, First, Middle Initial)

A. Amalgamated Bank

Mailing Address 1825 K St NW

City
WashingtonState
DCZip Code
20006-1202Purpose of Disbursement
Bank fee

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
1	2		3	0		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

40.19

Transaction ID : 500142912

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Lugo, Eddial, , ,

Mailing Address 435 Victor St

City
Saddle BrookState
NJZip Code
07663-6116Purpose of Disbursement
Driver/Security

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
1	1		2	7		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : 500134312

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HM Consulting

Mailing Address 114 Lexington Dr

City
Silver SpringState
MDZip Code
20901-2531Purpose of Disbursement
Event catering

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
1	2		2	4		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

229.46

Transaction ID : 500141332

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1269.65

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Nellie Pou for Congress

Full Name (Last, First, Middle Initial)

A. MVAR Media LLCMailing Address 1421 Prince St
Ste 320City
AlexandriaState
VAZip Code
22314-2805Purpose of Disbursement
Digital advertising expenses

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	1	/	2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

4617.00

Transaction ID : 500134072

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sagal Supermarket

Mailing Address 174 Main St

City
PatersonState
NJZip Code
07505-1202Purpose of Disbursement
Event catering

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
1	1	/	2	7	/	2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : 500134313

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Cuadrado, Carol, , ,

Mailing Address PO Box 2141

City
PatersonState
NJZip Code
07509-2141Purpose of Disbursement
Expenses (see below if itemized)

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
1	2	/	0	4	/	2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

500.71

Transaction ID : 500136643

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5617.71

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Nellie Pou for Congress

Full Name (Last, First, Middle Initial)

A. Courtyard Washington

Mailing Address 140 L St SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		11		2024

City
WashingtonState
DCZip Code
20003-3335Purpose of Disbursement
Lodging

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

226.10

Transaction ID : 500136644

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Courtyard Washington

Mailing Address 140 L St SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		11		2024

City
WashingtonState
DCZip Code
20003-3335Purpose of Disbursement
Lodging

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

274.61

Transaction ID : 500136645

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Winpisinger & Associates, Inc.

Mailing Address 315 Inspiration Ln

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		04		2024

City
GaithersburgState
MDZip Code
20878-5808Purpose of Disbursement
Compliance services

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

2055.76

Transaction ID : 500138483

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2055.76

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Nellie Pou for Congress

Full Name (Last, First, Middle Initial)

A. Amaro, Jose, , ,

Mailing Address 65 Zabriskie St

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	7		2	0	2	4

City
HaledonState
NJZip Code
07508-1598

FEC Identification Number

C

Purpose of Disbursement
Sign operation

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

250.00

Transaction ID : 500134314

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. MVAR Media LLCMailing Address 1421 Prince St
Ste 320

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	1		2	0	2	4

City
AlexandriaState
VAZip Code
22314-2805

FEC Identification Number

C

Purpose of Disbursement
Digital advertising expenses

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

4143.00

Transaction ID : 500134074

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. NGP VANMailing Address 655 15th St NW
Ste 650

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	1		2	0	2	4

City
WashingtonState
DCZip Code
20005-5738

FEC Identification Number

C

Purpose of Disbursement
Database

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

650.00

Transaction ID : 500138485

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

5043.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Nellie Pou for Congress

Full Name (Last, First, Middle Initial)

A. Royal Printing Service

Mailing Address PO Box 1000

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		19		2024

City
West New YorkState
NJZip Code
07093-1000

FEC Identification Number

C

Purpose of Disbursement
Printing

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

207.92

Transaction ID : 500140916

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. HM Consulting

Mailing Address 114 Lexington Dr

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		24		2024

City
Silver SpringState
MDZip Code
20901-2531

FEC Identification Number

C

Purpose of Disbursement
Event catering

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

31.70

Transaction ID : 500141336

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Cuadrado, Carol, , ,

Mailing Address PO Box 2141

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		04		2024

City
PatersonState
NJZip Code
07509-2141

FEC Identification Number

C

Purpose of Disbursement
Transportation (see below if itemized)

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

142.00

Transaction ID : 500136646

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

381.62

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 17

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Nellie Pou for Congress

Full Name (Last, First, Middle Initial)

A. Sazerac House

Mailing Address 507 C St NE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		19		2024

City
WashingtonState
DCZip Code
20002-5809

FEC Identification Number

C

Purpose of Disbursement
Event catering

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

615.47

Transaction ID : 500140946

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Royal Printing Service

Mailing Address PO Box 1000

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		19		2024

City
West New YorkState
NJZip Code
07093-1000

FEC Identification Number

C

Purpose of Disbursement
Printing

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2079.19

Transaction ID : 500140917

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 1270

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		04		2024

City
NewarkState
NJZip Code
07101-1270

FEC Identification Number

C

Purpose of Disbursement
Credit card (see below if itemized)

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

610.86

Transaction ID : 500136638

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

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

3305.52

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Nellie Pou for Congress

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 1270

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2024

City
NewarkState
NJZip Code
07101-1270

FEC Identification Number

C

Purpose of Disbursement
Membership fees

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

470.00

Transaction ID : 500136641

☒ Memo Item *

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Winpisinger & Associates, Inc.

Mailing Address 315 Inspiration Ln

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		27		2024

City
GaithersburgState
MDZip Code
20878-5808

FEC Identification Number

C

Purpose of Disbursement
Compliance services

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2005.11

Transaction ID : 500141478

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒ Primary	☐ General	
☐	Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. Cuadrado, Carol, , ,

Mailing Address PO Box 2141

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		05		2024

City
PatersonState
NJZip Code
07509-2141

FEC Identification Number

C

Purpose of Disbursement
Replaces 9/23/24 check that was lost

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

106.48

Transaction ID : 500139519

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒ Primary	☐ General	
☐	Other (specify) ▼	

State:

District:

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

2111.59

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

20287.16

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☒ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Nellie Pou for Congress

Full Name (Last, First, Middle Initial)

A. ANNETTE QUIJANO ELECTION FUND

Mailing Address 311 W Henry St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		19		2024

City
LindenState
NJZip Code
07036-4129

FEC Identification Number

C

Purpose of Disbursement
Refund

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : 500142909

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

1000.00

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

1000.00

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 16 OF 17

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Nellie Pou for Congress

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

HM Consulting

Nature of Debt (Purpose):

Fundraising consulting

Mailing Address 114 Lexington Dr

City

Silver Spring

State

MD

Zip Code

20901-2531

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250001350

Amount Incurred This Period

5000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

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

HM Consulting

Nature of Debt (Purpose):

Fundraising consulting

Mailing Address 114 Lexington Dr

City

Silver Spring

State

MD

Zip Code

20901-2531

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250001351

Amount Incurred This Period

5000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

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

American Express

Nature of Debt (Purpose):

Credit card charges

Mailing Address PO Box 1270

City

Newark

State

NJ

Zip Code

07101-1270

Outstanding Balance Beginning This Period

610.86

Transaction ID : 1250001318

Amount Incurred This Period

0.00

Payment This Period

610.86

Outstanding Balance at Close of This Period

0.00

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

10000.00

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 17 OF 17

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Nellie Pou for Congress

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

MVAR Media LLC

Nature of Debt (Purpose):

Production expenses

Mailing Address 1421 Prince St
Ste 320City
AlexandriaState
VAZip Code
22314-2805

Outstanding Balance Beginning This Period

8760.00

Transaction ID : 1250001309

Amount Incurred This Period

0.00

Payment This Period

8760.00

Outstanding Balance at Close of This Period

0.00

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

0.00

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

10000.00

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

0.00

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

10000.00