

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
**DREAM NYC**

ADDRESS (number and street) **1319 F ST NW**  
**STE 301, PMB 204**  
 Check if different than previously reported. (ACC) **WASHINGTON DC 20004**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00928069** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

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)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on **06 / 23 / 2026** in the State of **NY**  
(d) 30-Day POST-Election Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period **04 / 01 / 2026** through **06 / 03 / 2026**

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 **Badillo, Jorge, , ,**

Signature of Treasurer **Badillo, Jorge, , ,** Date **06 / 11 / 2026**

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**DREAM NYC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2026"/>	<input type="text" value="50000.00"/>	<input type="text" value="50000.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="227335.84"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="801500.00"/>	<input type="text" value="1154010.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="1028835.84"/>	<input type="text" value="1204010.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="924914.40"/>	<input type="text" value="1100088.56"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="103921.44"/>	<input type="text" value="103921.44"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**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

Write or Type Committee Name

DREAM NYC

Report Covering the Period: From: MM / DD / YYYY 04 / 01 / 2026 To: MM / DD / YYYY 06 / 03 / 2026

I. Receipts

COLUMN A  
Total This Period

COLUMN B  
Calendar Year-to-Date

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	801500.00	1154000.00
(ii) Unitemized .....	0.00	10.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	801500.00	1154010.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	801500.00	1154010.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	801500.00	1154010.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	801500.00	1154010.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	124245.15	181306.31
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	124245.15	181306.31
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	800669.25	918782.25
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	924914.40	1100088.56
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	924914.40	1100088.56

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	801500.00	1154010.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	801500.00	1154010.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	124245.15	181306.31
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	124245.15	181306.31

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 18
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 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)  
**DREAM NYC**

**A. Ceron Uribe, Juan, Felipe, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 140 Dolores St Apt 306  
 City San Francisco State CA Zip Code 94104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) OpenAI Occupation (for Individual) Member of Technical Staff  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200000.00

Date of Receipt **04 / 23 / 2026**  
**Transaction ID : SA11AI.4208**  
 Amount of Each Receipt this Period 200000.00  
 Memo Item  
 Contribution

**B. Daniel, Ziegler, z, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2634 Dana St  
 City Berkley State CA Zip Code 94704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Anthropic PBC Occupation (for Individual) Machine Learning Researcher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500000.00

Date of Receipt **05 / 05 / 2026**  
**Transaction ID : SA11AI.4233**  
 Amount of Each Receipt this Period 500000.00  
 Memo Item  
 Contribution

**C. Grube, Zane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 110 Charlton St PH 30C  
 City New York State NY Zip Code 10014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Jane Street Occupation (for Individual) Trader  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt **06 / 01 / 2026**  
**Transaction ID : SA11AI.4263**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item  
 Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 7 OF 18  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**DREAM NYC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Mennet, Lisa, , ,**

Mailing Address **PO Box 70367**

City **Seattle**    State **WA**    Zip Code **98127**

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

Name of Employer (for Individual) **Not Employed**    Occupation (for Individual) **Retired**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**50000.00**

Date of Receipt  
**04 / 23 / 2026**

**Transaction ID : SA11AI.4202**

Amount of Each Receipt this Period  
**50000.00**

Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Wirsching, Norbert, , ,**

Mailing Address **303 East 57th Street**

City **New York**    State **NY**    Zip Code **10022**

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

Name of Employer (for Individual) **Not Employed**    Occupation (for Individual) **Retired**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1500.00**

Date of Receipt  
**04 / 21 / 2026**

**Transaction ID : SA11AI.4204**

Amount of Each Receipt this Period  
**1500.00**

Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C.**

Mailing Address

City    State    Zip Code

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

Name of Employer (for Individual)    Occupation (for Individual)

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item  
Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>51500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>801500.00</b>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DREAM NYC**

**A. ActBlue**

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer Street

City Somerville State ME Zip Code 02144

Purpose of Disbursement Merchant Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 26 / 2026

FEC Identification Number: C

Transaction ID : SB21B.4206

Amount of Each Disbursement this Period: 2034.25

Memo Item

**B. Amalgamated Bank**

Full Name (Last, First, Middle Initial)

Mailing Address 275 7th Ave

City New York City State NY Zip Code 10001

Purpose of Disbursement Bank Analysis Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 28 / 2026

FEC Identification Number: C

Transaction ID : SB21B.4234

Amount of Each Disbursement this Period: 52.40

Memo Item

**C. Arete Public Affairs, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 155 Water Street Suite 233

City Brooklyn State NY Zip Code 11201

Purpose of Disbursement Communication Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 11 / 2026

FEC Identification Number: C

Transaction ID : SB21B.4236

Amount of Each Disbursement this Period: 15000.00

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	17086.65
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DREAM NYC**

Full Name (Last, First, Middle Initial) <b>A. Herrera Arellano LLP</b>			Date of Disbursement MM / DD / YYYY 05 / 22 / 2026	
Mailing Address 530 E McDowell Rd #107-150			FEC Identification Number <b>C</b>	
City Phoenix	State AZ	Zip Code 85004	Transaction ID : <b>SB21B.4237</b>	
Purpose of Disbursement Legal Fees			Amount of Each Disbursement this Period 1360.00	
Candidate Name			Memo Item <input type="checkbox"/>	
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. Information Resources Group</b>			Date of Disbursement MM / DD / YYYY 04 / 17 / 2026	
Mailing Address 732 S 6th St #6550			FEC Identification Number <b>C</b>	
City Las Vegas	State NV	Zip Code 89101	Transaction ID : <b>SB21B.4214</b>	
Purpose of Disbursement Research Consultant			Amount of Each Disbursement this Period 7500.00	
Candidate Name			Memo Item <input type="checkbox"/>	
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. Prestige WW Inc</b>			Date of Disbursement MM / DD / YYYY 06 / 03 / 2026	
Mailing Address 1350 Beverly Rd Ste 115 PMB 131			FEC Identification Number <b>C</b>	
City McLean	State VA	Zip Code 22101	Transaction ID : <b>SB21B.4265</b>	
Purpose of Disbursement Digital Consulting			Amount of Each Disbursement this Period 7500.00	
Candidate Name			Memo Item <input type="checkbox"/>	
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).....▶	83860.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DREAM NYC**

Full Name (Last, First, Middle Initial) <b>A. Sullivan Insight</b>		Date of Disbursement MM / DD / YYYY 04 / 02 / 2026
Mailing Address 1828 Northeast Riley Drive		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4210</b>
City Lee's Summit	State MO	Zip Code 64086
Purpose of Disbursement Research Consultant		Amount of Each Disbursement this Period [ ] 6000.00
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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Sullivan Insight</b>		Date of Disbursement MM / DD / YYYY 04 / 06 / 2026
Mailing Address 1828 Northeast Riley Drive		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4211</b>
City Lee's Summit	State MO	Zip Code 64086
Purpose of Disbursement Research Consultant		Amount of Each Disbursement this Period [ ] 7500.00
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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Sullivan Insight</b>		Date of Disbursement MM / DD / YYYY 05 / 05 / 2026
Mailing Address 1828 Northeast Riley Drive		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4235</b>
City Lee's Summit	State MO	Zip Code 64086
Purpose of Disbursement Research Consultant		Amount of Each Disbursement this Period [ ] 7500.00
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:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 21000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**DREAM NYC**

**A. The Money Wheel, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1325 W Holly St

City Phoenix State AZ Zip Code 85007

Purpose of Disbursement  
Compliance and Accounting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 04 / 06 / 2026

FEC Identification Number: C

Transaction ID : SB21B.4212

Amount of Each Disbursement this Period: 2250.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	124196.65

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
DREAM NYC
FEC IDENTIFICATION NUMBER
C C00928069

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Jacobson & Zilber Strategies LLC
Mailing Address: 34119 E Champman Ave, 356
City: Orange, State: CA, Zip Code: 92869
Purpose of Expenditure: Digital Media Production
Category/Type:
Date of Public Distribution/Dissemination: 06/02/2026
Amount: 32199.00
Transaction ID: SE.4254
Date of Disbursement or Obligation: 05/29/2026
Name of Federal Candidate: BORES, ALEXANDER, , ,
Support: [X] Oppose: [ ]
Office Sought: House [X] Senate [ ]
District: 12 State: NY
Calendar Year-To-Date Per Election for Office Sought: 847891.75
Disbursement For: Primary [X] General [ ] Other (specify)

Full Name of Payee: Lim Consulting Services
Mailing Address: 5600 Namakagan RD
City: Berthesda, State: MD, Zip Code: 20816
Purpose of Expenditure: Digital Ad Buy
Category/Type:
Date of Public Distribution/Dissemination: 06/02/2026
Amount: 187500.00
Transaction ID: SE.4251
Date of Disbursement or Obligation: 05/29/2026
Name of Federal Candidate: BORES, ALEXANDER, , ,
Support: [X] Oppose: [ ]
Office Sought: House [X] Senate [ ]
District: 12 State: NY
Calendar Year-To-Date Per Election for Office Sought: 815692.75
Disbursement For: Primary [X] General [ ] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures ..... 219699.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures .....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature: Badillo, Jorge, , ,

Date: 06/11/2026

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
DREAM NYC
FEC IDENTIFICATION NUMBER
C C00928069

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Lim Consulting Services
Mailing Address: 5600 Namakagan RD
City: Berthesda, State: MD, Zip Code: 20816
Purpose of Expenditure: TV Buy
Date of Public Distribution/Dissemination: 06/02/2026
Amount: 62500.00
Transaction ID: SE.4256
Date of Disbursement or Obligation: 05/29/2026

Name of Federal Candidate: BORES, ALEXANDER, , ,
Support
Office Sought: House
District: 12
State: NY
Calendar Year-To-Date Per Election for Office Sought: 910391.75
Disbursement For: Primary

Full Name of Payee: Prestige WW Inc
Mailing Address: 1350 Beverly Rd, Ste 115 PMB 131
City: McLean, State: VA, Zip Code: 22101
Purpose of Expenditure: Mailers
Date of Public Distribution/Dissemination: 04/15/2026
Amount: 64301.79
Transaction ID: SE.4195
Date of Disbursement or Obligation: 04/13/2026

Name of Federal Candidate: BORES, ALEXANDER, , ,
Support
Office Sought: House
District: 12
State: NY
Calendar Year-To-Date Per Election for Office Sought: 174024.29
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures: 126801.79
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature: Badillo, Jorge, , ,

Date: 06/11/2026

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
DREAM NYC
FEC IDENTIFICATION NUMBER
C C00928069

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Prestige WW Inc
Mailing Address: 1350 Beverly Rd, Ste 115 PMB 131, McLean, VA 22101
Purpose of Expenditure: Mailers
Date of Public Distribution/Dissemination: 04/25/2026
Amount: 56986.99
Transaction ID: SE.4198
Date of Disbursement or Obligation: 04/20/2026

Name of Federal Candidate: BORES, ALEXANDER, , ,
Support
Office Sought: House
District: 12
State: NY
Calendar Year-To-Date Per Election for Office Sought: 231011.28
Disbursement For: Primary

Full Name of Payee: Prestige WW Inc
Mailing Address: 1350 Beverly Rd, Ste 115 PMB 131, McLean, VA 22101
Purpose of Expenditure: Mailers
Date of Public Distribution/Dissemination: 05/01/2026
Amount: 55033.99
Transaction ID: SE.4242
Date of Disbursement or Obligation: 04/29/2026

Name of Federal Candidate: BORES, ALEXANDER, , ,
Support
Office Sought: House
District: 12
State: NY
Calendar Year-To-Date Per Election for Office Sought: 286045.27
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures: 112020.98
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature: Badillo, Jorge, , ,

Date: 06/11/2026

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
DREAM NYC
FEC IDENTIFICATION NUMBER
C C00928069

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Prestige WW Inc
Mailing Address: 1350 Beverly Rd, Ste 115 PMB 131, McLean, VA 22101
Purpose of Expenditure: Mailers
Name of Federal Candidate: BORES, ALEXANDER, , , Support
Office Sought: House, District: 12, State: NY
Calendar Year-To-Date Per Election for Office Sought: 341079.35
Disbursement For: Primary

Full Name of Payee: Prestige WW Inc
Mailing Address: 1350 Beverly Rd, Ste 115 PMB 131, McLean, VA 22101
Purpose of Expenditure: Mailers
Name of Federal Candidate: BORES, ALEXANDER, , , Support
Office Sought: House, District: 12, State: NY
Calendar Year-To-Date Per Election for Office Sought: 396113.43
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures: 110068.16
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature: Badillo, Jorge, , ,

Date: 06 / 11 / 2026

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
DREAM NYC
FEC IDENTIFICATION NUMBER
C C00928069

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Prestige WW Inc
Mailing Address: 1350 Beverly Rd, Ste 115 PMB 131, McLean, VA 22101
Purpose of Expenditure: Mailers
Name of Federal Candidate: BORES, ALEXANDER, , , Support
Office Sought: House, District: 12, State: NY
Calendar Year-To-Date Per Election for Office Sought: 453100.51
Disbursement For: Primary
Date of Public Distribution/Dissemination: 05/22/2026
Amount: 56987.08
Transaction ID: SE.4223
Date of Disbursement or Obligation: 05/15/2026

Full Name of Payee: Prestige WW Inc
Mailing Address: 1350 Beverly Rd, Ste 115 PMB 131, McLean, VA 22101
Purpose of Expenditure: Mailers
Name of Federal Candidate: BORES, ALEXANDER, , , Support
Office Sought: House, District: 12, State: NY
Calendar Year-To-Date Per Election for Office Sought: 508134.59
Disbursement For: Primary
Date of Public Distribution/Dissemination: 05/25/2026
Amount: 55034.08
Transaction ID: SE.4228
Date of Disbursement or Obligation: 05/19/2026

(a) SUBTOTAL of Itemized Independent Expenditures: 112021.16
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature: Badillo, Jorge, , ,

Date: 06/11/2026

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
DREAM NYC
FEC IDENTIFICATION NUMBER
C C00928069

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Prestige WW Inc
Mailing Address: 1350 Beverly Rd, Ste 115 PMB 131, McLean, VA 22101
Purpose of Expenditure: Mailers
Name of Federal Candidate: BORES, ALEXANDER, , , Support
Office Sought: House, District: 12, State: NY
Calendar Year-To-Date Per Election for Office Sought: 563168.67
Disbursement For: Primary

Full Name of Payee: Prestige WW Inc
Mailing Address: 1350 Beverly Rd, Ste 115 PMB 131, McLean, VA 22101
Purpose of Expenditure: Mailers
Name of Federal Candidate: BORES, ALEXANDER, , , Support
Office Sought: House, District: 12, State: NY
Calendar Year-To-Date Per Election for Office Sought: 618202.75
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures: 110068.16
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Signature: Badillo, Jorge, , ,

Date: 06 / 11 / 2026

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
DREAM NYC
FEC IDENTIFICATION NUMBER
C C00928069

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Statewide Impact Media LLC
Mailing Address: PO Box 4442
City: Saratoga Springs, State: NY, Zip Code: 12866
Purpose of Expenditure: Newspaper Ad
Category/Type:
Name of Federal Candidate: BORES, ALEXANDER, , ,
Support: [X] Oppose: [ ]
Office Sought: House [X] Senate [ ]
District: 12 State: NY
Calendar Year-To-Date Per Election for Office Sought: 628192.75
Disbursement For: Primary [X] General [ ] Other (specify)

Full Name of Payee
Mailing Address
City
State
Zip Code
Purpose of Expenditure
Category/Type
Name of Federal Candidate
Support
Oppose
Office Sought: House District: State:
Disbursement For: Primary General Other (specify)

Table with 2 columns: Description and Amount.
(a) SUBTOTAL of Itemized Independent Expenditures: 9990.00
(b) SUBTOTAL of Unitemized Independent Expenditures:
(c) TOTAL Independent Expenditures: 800669.25

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature: Badillo, Jorge, , ,

Date: 06 / 11 / 2026