

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
Frederica S Wilson for Congress

ADDRESS (number and street) 413 New Jersey Avenue
Check if different than previously reported. (ACC) Washington DC 20003

2. FEC IDENTIFICATION NUMBER C C00460055
3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE DISTRICT FL 24

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)
(b) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)
(c) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 10 / 01 / 2025 through 12 / 31 / 2025

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 Handfield, Larry, , ,
Signature of Treasurer Handfield, Larry, , , Date 01 / 29 / 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 3 (Revised 03/2016)

Write or Type Committee Name

Frederica S Wilson 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
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	23099.58	123807.59
(b) Total Contribution Refunds (from Line 20(d))	3363.53	14451.53
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	19736.05	109356.06
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	26115.15	220682.07
(b) Total Offsets to Operating Expenditures (from Line 14)	11088.00	11088.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	15027.15	209594.07
8. Cash on Hand at Close of Reporting Period (from Line 27)	406994.65	
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)	15250.00	

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

Frederica S Wilson for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4627.18	28382.06
(ii) Unitemized.....	472.40	2275.53
(iii) TOTAL of contributions from individuals ▶	5099.58	30657.59
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	18000.00	93150.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	23099.58	123807.59
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.)	11088.00	11088.00
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)..... ▶	34187.58	134895.59

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.....	26115.15	220682.07
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	3363.53	14451.53
(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)).....	3363.53	14451.53
21. OTHER DISBURSEMENTS	25000.00	28023.63
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	54478.68	263157.23

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	427285.75
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	34187.58
25. SUBTOTAL (add Line 23 and Line 24).....	461473.33
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	54478.68
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	406994.65

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 28
(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)
Frederica S Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Ocean Prime

Mailing Address 1341 G St NW

City Washington State DC Zip Code 20005-3105

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3027.18

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

Transaction ID : 6086977

Amount of Each Receipt this Period
1344.00

Memo Item

Refund

B. Full Name (Last, First, Middle Initial)
Ocean Prime

Mailing Address 1341 G St NW

City Washington State DC Zip Code 20005-3105

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3027.18

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

Transaction ID : 6086978

Amount of Each Receipt this Period
1078.38

Memo Item

Refund

C. Full Name (Last, First, Middle Initial)
Ocean Prime

Mailing Address 1341 G St NW

City Washington State DC Zip Code 20005-3105

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3027.18

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

Transaction ID : 6086979

Amount of Each Receipt this Period
604.80

Memo Item

Refund

SUBTOTAL of Receipts This Page (optional)..... ▶ 3027.18

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 6 OF 28	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Pyle, David, , ,

Mailing Address 151 Innovation Dr

City Irvine	State CA	Zip Code 92617-3040
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Philanthropist
--------------------------	------------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		12		2025

Transaction ID : 6087008

Amount of Each Receipt this Period
1500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Williams Cohee, Teri, , ,

Mailing Address 88 Clyde St

City Chestnut Hill	State MA	Zip Code 02467-2900
-----------------------	-------------	------------------------

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

Name of Employer OneUnited Bank	Occupation President and CEO
------------------------------------	---------------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		11		2025

Transaction ID : 6086945

Amount of Each Receipt this Period
50.00

Memo Item

* Earmarked Contribution: See Below ActBlue

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

Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation Conduit total listed in Agg. field
------------------	--

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
563.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		11		2025

Transaction ID : 6086945E

Amount of Each Receipt this Period
50.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional)..... ▶	1550.00
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 28
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Williams Cohee, Teri, , ,

Mailing Address 88 Clyde St

City Chestnut Hill State MA Zip Code 02467-2900

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

Name of Employer OneUnited Bank Occupation President and CEO

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
650.00

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

Transaction ID : 6086958

Amount of Each Receipt this Period
50.00

Memo Item

* Earmarked Contribution: See Below ActBlue

B. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
563.00

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

Transaction ID : 6086958E

Amount of Each Receipt this Period
50.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

SUBTOTAL of Receipts This Page (optional).....▶	50.00
TOTAL This Period (last page this line number only).....▶	4627.18

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 28
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Brightline Holdings

Mailing Address 700 NW 1st Ave
Ste 1620

City Miami State FL Zip Code 33136-4119

FEC ID number of contributing federal political committee. **C** C00544908

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 12 2025

Transaction ID : 6087001

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
D.R.I.V.E. DEMOCRAT, REPUBLICAN, INDEPENDENT VOTER EDUCATION (THE PAC OF THE INTERNATIONAL

Mailing Address 25 Louisiana Northwest 25 Ave NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00032979

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 19 2025

Transaction ID : 6087033

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Elect Democratic Women PAC

Mailing Address 600 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-4316

FEC ID number of contributing federal political committee. **C** C00685297

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 10 2025

Transaction ID : 6087025

Amount of Each Receipt this Period
1000.00

Memo Item

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: (check only one)		PAGE 9 OF 28	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Ingram Barge PAC

Mailing Address 1 Belle Meade Place 4400 Harding R

City Nashville	State TN	Zip Code 37205
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FEC ID number of contributing federal political committee. **C** C00364471

Name of Employer	Occupation
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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 / 24 / 2025

Transaction ID : 6087028

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MACHINISTS NON PARTISAN POLITICAL LEAGUE OF THE INTERNATIONAL ASSOCIATION OF MACHINISTS &

Mailing Address 9000 Machinists PI

City Upper Marlboro	State MD	Zip Code 20772-2675
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00002469

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 / 21 / 2025

Transaction ID : 6087032

Amount of Each Receipt this Period
5000.00

Memo Item

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

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

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 24 / 2025

Transaction ID : 6087027

Amount of Each Receipt this Period
1000.00

Memo Item

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 10 OF 28
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Transport Workers Union

Mailing Address 501 3rd St NW
FI 9

City Washington State DC Zip Code 20001-2790

FEC ID number of contributing federal political committee. **C** C00008268

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
10 / 02 / 2025

Transaction ID : 6086904

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Transport Workers Union

Mailing Address 501 3rd St NW
FI 9

City Washington State DC Zip Code 20001-2790

FEC ID number of contributing federal political committee. **C** C00008268

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
11 / 10 / 2025

Transaction ID : 6086996

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Transport Workers Union

Mailing Address 501 3rd St NW
FI 9

City Washington State DC Zip Code 20001-2790

FEC ID number of contributing federal political committee. **C** C00008268

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
11 / 11 / 2025

Transaction ID : 6086997

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)..... ▶

4000.00

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 28
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

A. Full Name (Last, First, Middle Initial)
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

Mailing Address 1775 K St NW

City Washington State DC Zip Code 20006-1502

FEC ID number of contributing federal political committee. **C** C00002766

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 / 24 / 2025

Transaction ID : 6087031

Amount of Each Receipt this Period
2500.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	18000.00

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 12 OF 28	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Marriott

Mailing Address 7750 Wisconsin Ave

City Bethesda	State MD	Zip Code 20814-3522
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
11088.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		12		2025

Transaction ID : 6086999

Amount of Each Receipt this Period
11088.00

Memo Item

Refund of September Deposit

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

Mailing Address

City	State	Zip Code
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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

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	11088.00
TOTAL This Period (last page this line number only).....▶	11088.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 28			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. ActBlue		M M / D D / Y Y Y Y 10 / 05 / 2025
Mailing Address PO Box 382110		FEC Identification Number
City Cambridge	State MA	Zip Code 02238-2110
Purpose of Disbursement conduit bank fee	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026	3.95
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500737749
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. ActBlue		M M / D D / Y Y Y Y 10 / 12 / 2025
Mailing Address PO Box 382110		FEC Identification Number
City Cambridge	State MA	Zip Code 02238-2110
Purpose of Disbursement Conduit Bank Fee	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026	2.38
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500737761
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. ActBlue		M M / D D / Y Y Y Y 10 / 19 / 2025
Mailing Address PO Box 382110		FEC Identification Number
City Cambridge	State MA	Zip Code 02238-2110
Purpose of Disbursement Conduit Bank Fee	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026	1.98
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500737751
		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	8.31
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 14 OF 28	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

Full Name (Last, First, Middle Initial) A. ActBlue		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2025
Mailing Address PO Box 382110		FEC Identification Number C C00401224
City Cambridge	State MA	Zip Code 02238-2110
Purpose of Disbursement Conduit Bank Fee		Amount of Each Disbursement this Period 0.20
Candidate Name	Category/Type	Transaction ID : 500737771
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. ActBlue		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2025
Mailing Address PO Box 382110		FEC Identification Number C C00401224
City Cambridge	State MA	Zip Code 02238-2110
Purpose of Disbursement Conduit Bank Fee		Amount of Each Disbursement this Period 2.38
Candidate Name	Category/Type	Transaction ID : 500737774
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. ActBlue		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2025
Mailing Address PO Box 382110		FEC Identification Number C C00401224
City Cambridge	State MA	Zip Code 02238-2110
Purpose of Disbursement Conduit Bank Fee		Amount of Each Disbursement this Period 0.72
Candidate Name	Category/Type	Transaction ID : 500737775
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	3.30
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 15 OF 28	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

Full Name (Last, First, Middle Initial) A. ActBlue		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2025
Mailing Address PO Box 382110		FEC Identification Number C C00401224
City Cambridge	State MA	Zip Code 02238-2110
Purpose of Disbursement Conduit Bank Fee		Amount of Each Disbursement this Period 0.20
Candidate Name		Transaction ID : 500737776
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Advanced Network Strategies, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2025
Mailing Address 413 New Jersey Ave SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-4007
Purpose of Disbursement Reimbursement of Fundraising Expense		Amount of Each Disbursement this Period 2342.14
Candidate Name		Transaction ID : 500737853
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Advanced Network Strategies, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2025
Mailing Address 413 New Jersey Ave SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-4007
Purpose of Disbursement Reimbursement of fundraising Expense		Amount of Each Disbursement this Period 2450.00
Candidate Name		Transaction ID : 500737854
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	4792.34
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 16 OF 28	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

A. Advanced Network Strategies, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 413 New Jersey Ave SE

City Washington State DC Zip Code 20003-4007

Purpose of Disbursement Reimbursement of fundraising expense

Candidate Name

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

State: District:

Date of Disbursement: 10 / 07 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 2701.35

Transaction ID : 500737855

Memo Item

B. Advanced Network Strategies, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 413 New Jersey Ave SE

City Washington State DC Zip Code 20003-4007

Purpose of Disbursement Monthly Retainer for Fundraising Services

Candidate Name

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

State: District:

Date of Disbursement: 11 / 05 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 4500.00

Transaction ID : 500737856

Memo Item

C. Advanced Network Strategies, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 413 New Jersey Ave SE

City Washington State DC Zip Code 20003-4007

Purpose of Disbursement Monthly Retainer for Fundraising Services

Candidate Name

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

State: District:

Date of Disbursement: 12 / 12 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 4500.00

Transaction ID : 500724053

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 11701.35

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 17 OF 28			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2025
Mailing Address PO Box 5014		FEC Identification Number C
City Carol Stream	State IL	Zip Code 60197-5014
Purpose of Disbursement Monthly AT&T Mobility Payment for campaign phone		Amount of Each Disbursement this Period 119.35
Candidate Name		Transaction ID : 500737758
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2025
Mailing Address PO Box 5014		FEC Identification Number C
City Carol Stream	State IL	Zip Code 60197-5014
Purpose of Disbursement Monthly AT&T Mobility Payment for campaign phone		Amount of Each Disbursement this Period 119.39
Candidate Name		Transaction ID : 500737782
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2025
Mailing Address PO Box 5014		FEC Identification Number C
City Carol Stream	State IL	Zip Code 60197-5014
Purpose of Disbursement Monthly AT&T Mobility Payment for campaign phone		Amount of Each Disbursement this Period 126.58
Candidate Name		Transaction ID : 500737787
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	365.32
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 18 OF 28	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

Full Name (Last, First, Middle Initial) A. Bank of America Corporation		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2025
Mailing Address 730 15th St NW		FEC Identification Number C
City Washington	State DC	Zip Code 20005-1050
Purpose of Disbursement Wire Fee		Amount of Each Disbursement this Period 30.00
Candidate Name	Category/Type	Transaction ID : 500737754
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Beachwood Lane Property Management LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2025
Mailing Address 18425 NW 2nd Ave Ste 105		FEC Identification Number C
City Miami	State FL	Zip Code 33169-4525
Purpose of Disbursement Campaign office rent		Amount of Each Disbursement this Period 1644.15
Candidate Name	Category/Type	Transaction ID : 500737759
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. FedEx		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2025
Mailing Address 942 Shady Grove Rd S		FEC Identification Number C
City Memphis	State TN	Zip Code 38120-4117
Purpose of Disbursement Shipping expense		Amount of Each Disbursement this Period 58.33
Candidate Name	Category/Type	Transaction ID : 500737770
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1732.48
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

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NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

A. GMASS

Full Name (Last, First, Middle Initial)

Mailing Address 9433 Ridings Blvd

City Dayton State OH Zip Code 45458-9732

Purpose of Disbursement Campaign software.

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 30 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 55.00

Transaction ID : 500737779

Memo Item

B. GMASS

Full Name (Last, First, Middle Initial)

Mailing Address 9433 Ridings Blvd

City Dayton State OH Zip Code 45458-9732

Purpose of Disbursement Campaign software.

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 01 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 55.00

Transaction ID : 500737785

Memo Item

C. GMASS

Full Name (Last, First, Middle Initial)

Mailing Address 9433 Ridings Blvd

City Dayton State OH Zip Code 45458-9732

Purpose of Disbursement Campaign software.

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 55.00

Transaction ID : 500737789

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 165.00

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 20 OF 28			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

Full Name (Last, First, Middle Initial) A. MDW Communications		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2025
Mailing Address 51 N NOB HILL Rd Ste 151		FEC Identification Number C
City Plantation	State FL	Zip Code 33324
Purpose of Disbursement Monthly retainer for communication services		Amount of Each Disbursement this Period 3500.00
Candidate Name		Transaction ID : 500737757
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. MDW Communications		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2025
Mailing Address 51 N NOB HILL Rd Ste 151		FEC Identification Number C
City Plantation	State FL	Zip Code 33324
Purpose of Disbursement Monthly retainer for communication services		Amount of Each Disbursement this Period 3500.00
Candidate Name		Transaction ID : 500737783
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2025
Mailing Address 30 Ivy St SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-4006
Purpose of Disbursement Membership dues for National Democratic Club		Amount of Each Disbursement this Period 10.00
Candidate Name		Transaction ID : 500737755
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	7010.00
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 21 OF 28	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

Full Name (Last, First, Middle Initial) A. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2025
Mailing Address 30 Ivy St SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-4006
Purpose of Disbursement Membership dues for National Democratic Club		Amount of Each Disbursement this Period 70.00
Candidate Name		Transaction ID : 500737756
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2025
Mailing Address 30 Ivy St SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-4006
Purpose of Disbursement Membership dues for National Democratic Club		Amount of Each Disbursement this Period 70.00
Candidate Name		Transaction ID : 500737780
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2025
Mailing Address 30 Ivy St SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-4006
Purpose of Disbursement Membership dues for National Democratic Club		Amount of Each Disbursement this Period 10.00
Candidate Name		Transaction ID : 500737781
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	150.00
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 22 OF 28	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

Full Name (Last, First, Middle Initial) A. National Democratic Club			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2025	
Mailing Address 30 Ivy St SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-4006	Amount of Each Disbursement this Period 70.00	
Purpose of Disbursement Membership dues for National Democratic Club		Category/ Type	Transaction ID : 500737786	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	70.00
TOTAL This Period (last page this line number only).....▶	25998.10

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 28			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

Full Name (Last, First, Middle Initial) A. Ocean Prime		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2025
Mailing Address 1341 G St NW		FEC Identification Number C
City Washington	State DC	Zip Code 20005-3105
Purpose of Disbursement Food and beverage		Amount of Each Disbursement this Period 1344.00
Candidate Name		Transaction ID : 500724065
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Ocean Prime		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2025
Mailing Address 1341 G St NW		FEC Identification Number C
City Washington	State DC	Zip Code 20005-3105
Purpose of Disbursement refund.		Amount of Each Disbursement this Period 672.00
Candidate Name		Transaction ID : 500737773
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Ocean Prime		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2025
Mailing Address 1341 G St NW		FEC Identification Number C
City Washington	State DC	Zip Code 20005-3105
Purpose of Disbursement Food and beverage		Amount of Each Disbursement this Period 1347.53
Candidate Name		Transaction ID : 500737778
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	3363.53
TOTAL This Period (last page this line number only).....▶	3363.53

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB20A

Transaction ID : 500737773

Ocean Prime accidentally charged \$672.00 and refunded \$604.80. The difference is due to a credit card charging fee.

Form/Schedule:

Transaction ID:

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

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NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

Full Name (Last, First, Middle Initial)
A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 S Capitol St SE
FI 2

City Washington State DC Zip Code 20003-4024

Purpose of Disbursement Dues

Candidate Name DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE Category/Type

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
12 / 06 / 2025

FEC Identification Number
C C00000935

Amount of Each Disbursement this Period
25000.00

Transaction ID : 500737821

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).....▶	25000.00
TOTAL This Period (last page this line number only).....▶	25000.00

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : 2066758L
 Frederica S Wilson for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item Wilson, Frederica, S, ,		Election: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1018 NW 204th St		
City Miami	State FL	ZIP Code 33169-2457 <input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 250.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 250.00
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TERMS Date Incurred M M / D D / Y Y Y Y 03 / 13 / 2009	Date Due M M / D D / Y Y Y Y No due date	Interest Rate (If none, enter 0) None % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional).....▶	<input style="width: 100%;" type="text" value="250.00"/>
TOTALS This Period (last page in this line only)▶	<input style="width: 100%;" type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : 2070556L
 Frederica S Wilson for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2010
Wilson, Frederica, S, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 1018 NW 204th St		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Miami	State FL	ZIP Code 33169-2457
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
4500.00	0.00	4500.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 06 / 30 / 2009	M M / D D / Y Y Y Y No Due Date	None % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....▶	4500.00
TOTALS This Period (last page in this line only).....▶	<input type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)
LOANS**

NAME OF COMMITTEE (In Full) **Frederica S Wilson for Congress** Transaction ID : **2070559L**

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2010
Wilson, Frederica, S, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 1018 NW 204th St		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Miami	State FL	ZIP Code 33169-2457
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 50000.00	Cumulative Payment To Date 39500.00	Balance Outstanding at Close of This Period 10500.00
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TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 08 / 20 / 2010	M M / D D / Y Y Y Y None	None % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	10500.00
TOTALS This Period (last page in this line only).....▶	15250.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.