

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

Chatzky for Congress

ADDRESS (number and street) P.O. Box 768

Check if different than previously reported. (ACC)

New York NY 10033

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼ C C00906636

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

STATE ▼ DISTRICT NY 17

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 / D D / Y Y Y Y through M M / D D / Y Y Y Y

04 / 01 / 2026 through 06 / 30 / 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 Presser, Steven, , ,

Signature of Treasurer Presser, Steven, , , Date M M / D D / Y Y Y Y

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 3 (Revised 03/2016)

Write or Type Committee Name

Chatzky for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2026 To: M M / D D / Y Y Y Y 06 / 30 / 2026

	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))	67266.00	416421.60
(b) Total Contribution Refunds (from Line 20(d))	66500.00	66750.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	766.00	349671.60
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	49508.05	847552.24
(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))	49508.05	847552.24
8. Cash on Hand at Close of Reporting Period (from Line 27)		
	789.36	
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)		
	0.00	

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

Chatzky for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2026 To: M M / D D / Y Y Y Y 06 / 30 / 2026

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).....	150.00	306371.01
(ii) Unitemized.....	116.00	43045.59
(iii) TOTAL of contributions from individuals ▶	266.00	349416.60
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	67000.00	67005.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	67266.00	416421.60
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	11291000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	11291000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	500.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	67266.00	11707921.60

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.....	49508.05	847552.24
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	5539960.00	10790960.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	5539960.00	10790960.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	66500.00	66750.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	66500.00	66750.00
21. OTHER DISBURSEMENTS	0.00	1870.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	5655968.05	11707132.24

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	5589491.41
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	67266.00
25. SUBTOTAL (add Line 23 and Line 24).....	5656757.41
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	5655968.05
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	789.36

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 27
(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)
Chatzky for Congress

A. Full Name (Last, First, Middle Initial)
Gentry, Noe, , ,

Mailing Address 102 Aalapapa Way

City Kailua State HI Zip Code 96734-3120

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

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
275.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 05 / 2026

Transaction ID : 7946934

Amount of Each Receipt this Period
25.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address PO Box 962017

City Boston State MA Zip Code 02196-2017

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 ▼
266.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 05 / 2026

Transaction ID : 7946934E

Amount of Each Receipt this Period
25.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 35 Candlewood Ct

City Briarcliff Manor State NY Zip Code 10510-1300

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

Name of Employer Occupation Salesperson

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
275.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 05 / 2026

Transaction ID : 7947470

Amount of Each Receipt this Period
25.00

Memo Item

* Earmarked Contribution: See Below

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

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

50.00

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

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

FOR LINE NUMBER: PAGE 6 OF 27
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chatzky for Congress

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

Mailing Address PO Box 962017

City Boston State MA Zip Code 02196-2017

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 ▼
266.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 05 / 2026

Transaction ID : 7947470E

Amount of Each Receipt this Period
25.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 581 Sleepy Hollow Rd

City Briarcliff Manor State NY Zip Code 10510-2526

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

Name of Employer Occupation
Not Employed Not Employed

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
04 / 01 / 2026

Transaction ID : 7885522

Amount of Each Receipt this Period
100.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address PO Box 962017

City Boston State MA Zip Code 02196-2017

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 ▼
266.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 05 / 2026

Transaction ID : 7885522E

Amount of Each Receipt this Period
100.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional)..... ▶	100.00
TOTAL This Period (last page this line number only)..... ▶	150.00

**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 7 OF 27
	<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)
Chatzky for Congress

Full Name (Last, First, Middle Initial) Chatzky, Peter, , ,		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 01 / 2026	
Mailing Address 206 Pine Rd		Transaction ID : 9548102	
City Briarcliff Manor	State NY	Zip Code 10510-2237	
FEC ID number of contributing federal political committee. C H6NY17213		Amount of Each Receipt this Period 67000.00	
Name of Employer Information Requested Occupation Information Requested		<input type="checkbox"/> Memo Item	
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 567045.00	

Full Name (Last, First, Middle Initial) Chatzky, Peter, , ,		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 01 / 2026	
Mailing Address 206 Pine Rd		Transaction ID : 9611337	
City Briarcliff Manor	State NY	Zip Code 10510-2237	
FEC ID number of contributing federal political committee. C H6NY17213		Amount of Each Receipt this Period 250000.00	
Name of Employer Information Requested Occupation Information Requested		<input checked="" type="checkbox"/> Memo Item	
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 567045.00	

Full Name (Last, First, Middle Initial) Chatzky, Peter, , ,		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 01 / 2026	
Mailing Address 206 Pine Rd		Transaction ID : 9611455	
City Briarcliff Manor	State NY	Zip Code 10510-2237	
FEC ID number of contributing federal political committee. C H6NY17213		Amount of Each Receipt this Period 250000.00	
Name of Employer Information Requested Occupation Information Requested		<input checked="" type="checkbox"/> Memo Item	
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 567045.00	

SUBTOTAL of Receipts This Page (optional)..... ▶	67000.00
TOTAL This Period (last page this line number only)..... ▶	67000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 OF 27
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chatzky for Congress

A. Full Name (Last, First, Middle Initial)
Chatzky, Peter, , ,

Mailing Address 206 Pine Rd

City Briarcliff Manor State NY Zip Code 10510-2237

FEC ID number of contributing federal political committee. **C** H6NY17213

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
567045.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 01 / 2026

Transaction ID : 9611478

Amount of Each Receipt this Period
40.00

Memo Item

* Forgiven Loan

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 Information Requested Occupation Information Requested

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 Information Requested Occupation Information Requested

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).....▶	0.00
TOTAL This Period (last page this line number only).....▶	67000.00

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 9 OF 27	
	<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)
Chatzky for Congress

Full Name (Last, First, Middle Initial)

A. ACTBLUE

Mailing Address PO Box 962017

City Boston State MA Zip Code 02196-2017

Purpose of Disbursement Service Fee Category/Type 003

Candidate Name

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

State: District:

Date of Disbursement: 04 / 05 / 2026

FEC Identification Number: C C00401224

Amount of Each Disbursement this Period: 9.54

Transaction ID : 500099558

Memo Item

Full Name (Last, First, Middle Initial)

B. ACTBLUE

Mailing Address PO Box 962017

City Boston State MA Zip Code 02196-2017

Purpose of Disbursement Service Fee Category/Type 003

Candidate Name

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

State: District:

Date of Disbursement: 04 / 12 / 2026

FEC Identification Number: C C00401224

Amount of Each Disbursement this Period: 0.99

Transaction ID : 500122386

Memo Item

Full Name (Last, First, Middle Initial)

C. Bellon, Gina, , ,

Mailing Address 1010 Hollis Ave

City Cherry Hill State NJ Zip Code 08002-2621

Purpose of Disbursement Strategic Campaign Consultant Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement: 04 / 01 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 4000.00

Transaction ID : 500099552

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 4010.53

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 27			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Chatzky for Congress

Full Name (Last, First, Middle Initial) A. Bellon, Gina, , ,		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2026
Mailing Address 1010 Hollis Ave		FEC Identification Number C
City Cherry Hill	State NJ	Zip Code 08002-2621
Purpose of Disbursement Strategic Campaign Consultant	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 4000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500143422
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Kaleel, Nuha, , ,		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2026
Mailing Address 1892 Glenrock St		FEC Identification Number C
City Yorktown Heights	State NY	Zip Code 10598-4025
Purpose of Disbursement Fundraising Consultant March	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 6000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500099553
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. LC Media LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2026
Mailing Address 1604 Fawn Ln		FEC Identification Number C
City Huntingdon Valley	State PA	Zip Code 19006-7918
Purpose of Disbursement Digital Ads Buy - March	Category/ Type 004	
Candidate Name		Amount of Each Disbursement this Period 4000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500122385
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	14000.00
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 11 OF 27			
	<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)
Chatzky for Congress

Full Name (Last, First, Middle Initial)

A. Mandate Media

Mailing Address 4407 S Corbett Ave

City Portland State OR Zip Code 97239-4206

Purpose of Disbursement Digital Outreach

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement 04 / 01 / 2026

FEC Identification Number C

Amount of Each Disbursement this Period 4457.52

Transaction ID : 500099554

Memo Item

Full Name (Last, First, Middle Initial)

B. Presser Compliance LLC

Mailing Address PO Box 768

City New York State NY Zip Code 10033-0594

Purpose of Disbursement April Compliance Services

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement 04 / 03 / 2026

FEC Identification Number C

Amount of Each Disbursement this Period 4000.00

Transaction ID : 500097703

Memo Item

Full Name (Last, First, Middle Initial)

C. Presser Compliance LLC

Mailing Address PO Box 768

City New York State NY Zip Code 10033-0594

Purpose of Disbursement May Compliance Services

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement 05 / 07 / 2026

FEC Identification Number C

Amount of Each Disbursement this Period 4000.00

Transaction ID : 500127421

Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 12457.52

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 12 OF 27			
	<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)
Chatzky for Congress

Full Name (Last, First, Middle Initial) A. Presser Compliance LLC		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2026
Mailing Address PO Box 768		FEC Identification Number C
City New York	State NY	Zip Code 10033-0594
Purpose of Disbursement June Compliance Services	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 4000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500144688
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. TD Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2026
Mailing Address 4941 Broadway		FEC Identification Number C
City New York	State NY	Zip Code 10034-2303
Purpose of Disbursement Bank Fee	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 10.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500099555
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. TD Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2026
Mailing Address 4941 Broadway		FEC Identification Number C
City New York	State NY	Zip Code 10034-2303
Purpose of Disbursement Bank Fee	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 10.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500099556
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	4020.00
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 13 OF 27	
	<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)
Chatzky for Congress

Full Name (Last, First, Middle Initial)

A. TD Bank

Mailing Address 4941 Broadway

City New York State NY Zip Code 10034-2303

Purpose of Disbursement Bank Fee Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 05 / 08 / 2026

FEC Identification Number C

Amount of Each Disbursement this Period 10.00

Transaction ID : 500140086

Memo Item

Full Name (Last, First, Middle Initial)

B. TD Bank

Mailing Address 4941 Broadway

City New York State NY Zip Code 10034-2303

Purpose of Disbursement Bank Fee Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 05 / 29 / 2026

FEC Identification Number C

Amount of Each Disbursement this Period 10.00

Transaction ID : 500140087

Memo Item

Full Name (Last, First, Middle Initial)

C. Verrelli, Alyssa, , ,

Mailing Address 1882 Woodbine St # 2

City Ridgewood State NY Zip Code 11385-3735

Purpose of Disbursement Campaign Manager April Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 04 / 01 / 2026

FEC Identification Number C

Amount of Each Disbursement this Period 7500.00

Transaction ID : 500087053

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 7520.00

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 14 OF 27	
	<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)
Chatzky for Congress

Full Name (Last, First, Middle Initial) A. Verrelli, Alyssa, , ,			Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2026	
Mailing Address 1882 Woodbine St # 2			FEC Identification Number C	
City Ridgewood	State NY	Zip Code 11385-3735	Amount of Each Disbursement this Period 7500.00	
Purpose of Disbursement Campaign Manager May		Category/ Type 001	Transaction ID : 500143421	
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	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	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).....▶	7500.00
TOTAL This Period (last page this line number only).....▶	49508.05

**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 27	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Chatzky for Congress

Full Name (Last, First, Middle Initial) A. Chatzky, Peter, , ,		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2026
Mailing Address 206 Pine Rd		FEC Identification Number C H6NY17213
City Briarcliff Manor	State NY	Zip Code 10510-2237
Purpose of Disbursement Loan Repayment	Category/ Type 009	
Candidate Name Chatzky, Peter, , ,	Amount of Each Disbursement this Period 5500000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500143414
State: NY District: 17	<input type="checkbox"/> Memo Item Loan Repayment	

Full Name (Last, First, Middle Initial) B. Chatzky, Peter, , ,		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2026
Mailing Address 206 Pine Rd		FEC Identification Number C H6NY17213
City Briarcliff Manor	State NY	Zip Code 10510-2237
Purpose of Disbursement Loan Repayment	Category/ Type 009	
Candidate Name Chatzky, Peter, , ,	Amount of Each Disbursement this Period 39960.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500143420
State: NY District: 17	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Chatzky, Peter, , ,		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2026
Mailing Address 206 Pine Rd		FEC Identification Number C H6NY17213
City Briarcliff Manor	State NY	Zip Code 10510-2237
Purpose of Disbursement Forgiven Loan	Category/ Type 009	
Candidate Name Chatzky, Peter, , ,	Amount of Each Disbursement this Period 250000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500144638
State: NY District: 17	<input checked="" type="checkbox"/> Memo Item *	

SUBTOTAL of Disbursements This Page (optional).....▶	5539960.00
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 16 OF 27	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Chatzky for Congress

Full Name (Last, First, Middle Initial) A. Chatzky, Peter, , ,			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2026	
Mailing Address 206 Pine Rd			FEC Identification Number C H6NY17213	
City Briarcliff Manor	State NY	Zip Code 10510-2237	Amount of Each Disbursement this Period 250000.00	
Purpose of Disbursement 'Forgiven Loan		Category/ Type 009	Transaction ID : 500144639	
Candidate Name Chatzky, Peter, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input checked="" type="checkbox"/> Memo Item *	
State: NY District: 17		Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Chatzky, Peter, , ,			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2026	
Mailing Address 206 Pine Rd			FEC Identification Number C H6NY17213	
City Briarcliff Manor	State NY	Zip Code 10510-2237	Amount of Each Disbursement this Period 40.00	
Purpose of Disbursement Forgiven Loan		Category/ Type 009	Transaction ID : 500144640	
Candidate Name Chatzky, Peter, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input checked="" type="checkbox"/> Memo Item *	
State: NY District: 17		Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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	Memo Item	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	5539960.00

**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 17 OF 27			
	<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)
Chatzky for Congress

Full Name (Last, First, Middle Initial) A. Chatzky, Emily, R, ,			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2026		
Mailing Address 1602 N Rowell Ave			FEC Identification Number C		
City Manhattan Beach	State CA	Zip Code 90266-4055	Amount of Each Disbursement this Period 3500.00		
Purpose of Disbursement Contribution Refund		Category/ Type 010	Transaction ID : 500144349		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Chatzky, Jacob, S, ,			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2026		
Mailing Address 1602 N Rowell Ave			FEC Identification Number C		
City Manhattan Beach	State CA	Zip Code 90266-4055	Amount of Each Disbursement this Period 3500.00		
Purpose of Disbursement Contribution Refund		Category/ Type 010	Transaction ID : 500144350		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Chatzky, Jean, , ,			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2026		
Mailing Address 237 S 18Th St			FEC Identification Number C		
City Philadelphia	State PA	Zip Code 19103-6161	Amount of Each Disbursement this Period 3500.00		
Purpose of Disbursement Contribution Refund		Category/ Type 010	Transaction ID : 500144352		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	10500.00
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 18 OF 27			
	<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)
Chatzky for Congress

Full Name (Last, First, Middle Initial) A. Chatzky, John, , ,		Date of Disbursement MM / DD / YYYY 06 / 01 / 2026
Mailing Address 82 Honey Hollow Rd		FEC Identification Number C
City Pound Ridge	State NY	Zip Code 10576-1104
Purpose of Disbursement Contribution Refund	Category/ Type 010	
Candidate Name		Amount of Each Disbursement this Period 3500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500144355
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Chatzky, Julia, , ,		Date of Disbursement MM / DD / YYYY 06 / 01 / 2026
Mailing Address 125 W Tremont Ave Unit 1112		FEC Identification Number C
City Charlotte	State NC	Zip Code 28203-5576
Purpose of Disbursement Contribution Refund	Category/ Type 010	
Candidate Name		Amount of Each Disbursement this Period 3500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500144356
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Chatzky, Susan, Q, ,		Date of Disbursement MM / DD / YYYY 06 / 01 / 2026
Mailing Address 206 Pine Rd		FEC Identification Number C
City Briarcliff Manor	State NY	Zip Code 10510-2237
Purpose of Disbursement Contribution Refund	Category/ Type 010	
Candidate Name		Amount of Each Disbursement this Period 3500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500144358
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	10500.00
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 19 OF 27			
	<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)
Chatzky for Congress

Full Name (Last, First, Middle Initial) A. Goldman, Barbara, , ,			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2026		
Mailing Address 7776 Trieste Pl			FEC Identification Number C		
City Delray Beach	State FL	Zip Code 33446-4400	Amount of Each Disbursement this Period 3500.00		
Purpose of Disbursement Contribution Refund		Category/ Type 010	Transaction ID : 500144361		
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Goldman, Irvin, , ,			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2026		
Mailing Address 7776 Trieste Pl			FEC Identification Number C		
City Delray Beach	State FL	Zip Code 33446-4400	Amount of Each Disbursement this Period 3500.00		
Purpose of Disbursement Contribution Refund		Category/ Type 010	Transaction ID : 500144362		
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Linde, Amy, , ,			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2026		
Mailing Address 3 Lila Ln			FEC Identification Number C		
City Chappaqua	State NY	Zip Code 10514-2218	Amount of Each Disbursement this Period 3500.00		
Purpose of Disbursement Contribution Refund		Category/ Type 010	Transaction ID : 500144369		
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	10500.00
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 27	
	<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)
Chatzky for Congress

Full Name (Last, First, Middle Initial) A. Linde, Frank, , ,		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2026
Mailing Address 3 Lila Ln		FEC Identification Number C
City Chappaqua	State NY	Zip Code 10514-2218
Purpose of Disbursement Contribution Refund	Category/ Type 010	
Candidate Name		Amount of Each Disbursement this Period 3500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500144370
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Mullin, Deborah, , ,		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2026
Mailing Address 82 Honey Hollow Rd		FEC Identification Number C
City Pound Ridge	State NY	Zip Code 10576-1104
Purpose of Disbursement Contribution Refund	Category/ Type 010	
Candidate Name		Amount of Each Disbursement this Period 3500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500144436
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Nelson, Jane, , ,		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2026
Mailing Address 350 Greens Farms Rd		FEC Identification Number C
City Westport	State CT	Zip Code 06880-6332
Purpose of Disbursement Contribution Refund	Category/ Type 010	
Candidate Name		Amount of Each Disbursement this Period 3500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500144437
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	10500.00
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 27	
	<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)
Chatzky for Congress

Full Name (Last, First, Middle Initial) A. Perry, Jeffrey, , ,			Date of Disbursement MM / DD / YYYY 06 / 01 / 2026
Mailing Address 151 W Main St			FEC Identification Number C
City Tarrytown	State NY	Zip Code 10591-3674	Amount of Each Disbursement this Period 3500.00
Purpose of Disbursement Contribution Refund		Category/ Type 010	Transaction ID : 500144438
Candidate Name		Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. Pforzheimer, Carl, Andrew, ,			Date of Disbursement MM / DD / YYYY 06 / 01 / 2026
Mailing Address 199 Hurlbutt St			FEC Identification Number C
City Wilton	State CT	Zip Code 06897-2705	Amount of Each Disbursement this Period 3500.00
Purpose of Disbursement Contribution Refund		Category/ Type 010	Transaction ID : 500144441
Candidate Name		Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) C. Pforzheimer, Zelig, , ,			Date of Disbursement MM / DD / YYYY 06 / 01 / 2026
Mailing Address 199 Hurlbutt St			FEC Identification Number C
City Wilton	State CT	Zip Code 06897-2705	Amount of Each Disbursement this Period 3500.00
Purpose of Disbursement Contribution Refund		Category/ Type 010	Transaction ID : 500144443
Candidate Name		Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	10500.00
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 27	
	<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)
Chatzky for Congress

Full Name (Last, First, Middle Initial) A. Pine, Richard, , ,		Date of Disbursement MM / DD / YYYY 06 / 01 / 2026
Mailing Address 25 Aspinwall Rd		FEC Identification Number C
City Briarcliff Manor	State NY	Zip Code 10510-2101
Purpose of Disbursement Contribution Refund	Category/ Type 010	
Candidate Name	Amount of Each Disbursement this Period 3500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500144448
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Rubin, Alison, , ,		Date of Disbursement MM / DD / YYYY 06 / 01 / 2026
Mailing Address 151 W Main St		FEC Identification Number C
City Tarrytown	State NY	Zip Code 10591-3674
Purpose of Disbursement Contribution Refund	Category/ Type 010	
Candidate Name	Amount of Each Disbursement this Period 3500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500144449
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Ungar, Jonathan, , ,		Date of Disbursement MM / DD / YYYY 06 / 01 / 2026
Mailing Address 7 Dunham Rd		FEC Identification Number C
City Scarsdale	State NY	Zip Code 10583-6005
Purpose of Disbursement Contribution Refund	Category/ Type 010	
Candidate Name	Amount of Each Disbursement this Period 3500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500144451
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	10500.00
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 23 OF 27			
	<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)
Chatzky for Congress

Full Name (Last, First, Middle Initial) A. Ungar, Nicole, , ,		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2026
Mailing Address 7 Dunham Rd		FEC Identification Number C
City Scarsdale	State NY	Zip Code 10583-6005
Purpose of Disbursement Contribution Refund		010
Candidate Name		Amount of Each Disbursement this Period 3500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500144457
State: District:		<input type="checkbox"/> Memo Item

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
Purpose of Disbursement		
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
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
Purpose of Disbursement		
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	3500.00
TOTAL This Period (last page this line number only).....▶	66500.00

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Chatzky for Congress** Transaction ID : **9603313L**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2026
Chatzky, Peter, , ,			<input checked="" type="checkbox"/> Primary
Mailing Address 206 Pine Rd			<input type="checkbox"/> General
City Briarcliff Manor		State NY	<input type="checkbox"/> Other (specify) ▼
ZIP Code 10510-2237		<input checked="" type="checkbox"/> Personal Funds of the Candidate	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
250000.00	250000.00	0.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	06 / 27 / 2025	none	0.00 % (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).....▶	0.00
TOTALS This Period (last page in this line only).....▶	

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) **Chatzky for Congress** Transaction ID : **3051014L**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2026
Chatzky, Peter, , ,			<input checked="" type="checkbox"/> Primary
Mailing Address 206 Pine Rd			<input type="checkbox"/> General
City Briarcliff Manor		State NY	<input type="checkbox"/> Other (specify) ▼
ZIP Code 10510-2237		<input checked="" type="checkbox"/> Personal Funds of the Candidate	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
250000.00	250000.00	0.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	06 / 30 / 2025	none	0.00 % (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).....▶	0.00
TOTALS This Period (last page in this line only).....▶	

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) **Chatzky for Congress** Transaction ID : **7997504L**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2026
Chatzky, Peter, , ,			<input checked="" type="checkbox"/> Primary
Mailing Address			<input type="checkbox"/> General
206 Pine Rd			<input type="checkbox"/> Other (specify) ▼
City	State	ZIP Code	<input checked="" type="checkbox"/> Personal Funds of the Candidate
Briarcliff Manor	NY	10510-2237	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
40000.00	40000.00	0.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y	M M / D D / Y Y Y Y	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	03 / 09 / 2026	none		

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).....▶	0.00
TOTALS This Period (last page in this line only).....▶	

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) **Chatzky for Congress** Transaction ID : **7997510L**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2026
Chatzky, Peter, , ,			<input checked="" type="checkbox"/> Primary
Mailing Address			<input type="checkbox"/> General
206 Pine Rd			<input type="checkbox"/> Other (specify) ▼
City	State	ZIP Code	<input checked="" type="checkbox"/> Personal Funds of the Candidate
Briarcliff Manor	NY	10510-2237	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5500000.00	5500000.00	0.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y	M M / D D / Y Y Y Y	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	03 / 30 / 2026	none		

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).....▶	0.00
TOTALS This Period (last page in this line only).....▶	0.00

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