

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Tracy for Maryland

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

	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))	<input type="text" value="532.78"/>	<input type="text" value="32582.53"/>
(b) Total Contribution Refunds (from Line 20(d))	<input type="text" value="30.00"/>	<input type="text" value="50.00"/>
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	<input type="text" value="502.78"/>	<input type="text" value="32532.53"/>
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	<input type="text" value="2459.51"/>	<input type="text" value="30461.32"/>
(b) Total Offsets to Operating Expenditures (from Line 14)	<input type="text" value="500.01"/>	<input type="text" value="500.01"/>
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	<input type="text" value="1959.50"/>	<input type="text" value="29961.31"/>
8. Cash on Hand at Close of Reporting Period (from Line 27)	<input type="text" value="2571.22"/>	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

Tracy for Maryland

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).....	25.00	11525.00
(ii) Unitemized	507.78	20803.53
(iii) TOTAL of contributions from individuals	532.78	32328.53
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate	0.00	254.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	532.78	32582.53
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.)	500.01	500.01
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).....	1032.79	33082.54

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.....	2459.51	30461.32
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	30.00	50.00
(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)).....	30.00	50.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	2489.51	30511.32

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	4027.94
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1032.79
25. SUBTOTAL (add Line 23 and Line 24).....	5060.73
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	2489.51
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2571.22

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 15
(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)
Tracy for Maryland

A. Full Name (Last, First, Middle Initial)
Hindman, Jolie, , ,

Mailing Address 4241 Baldwin Ave.
#B

City State Zip Code
Culver City CA 90232

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 ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 02 2026

Transaction ID : SA11AI.6378

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 441146

City State Zip Code
SOMERVILLE MA 02144

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

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
26508.27

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 03 2026

Transaction ID : SA11AI.6378.0

Amount of Each Receipt this Period
25.00

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).....▶	25.00
TOTAL This Period (last page this line number only).....▶	25.00

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

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NAME OF COMMITTEE (In Full)
Tracy for Maryland

A. Full Name (Last, First, Middle Initial)
Chiou, Melissa, ,

Mailing Address 4602 Aspen Hill Rd

City: Rockville State: MD Zip Code: 20853

FEC ID number of contributing federal political committee: C

Name of Employer: Self-employed Occupation: Social Media Consultant

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 21 / 2026

Transaction ID : SA14.6433

Amount of Each Receipt this Period
500.00

Memo Item
Returned Funds

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).....▶	500.00
TOTAL This Period (last page this line number only).....▶	500.00

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 7 OF 15	
	<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)
Tracy for Maryland

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2026	
Mailing Address PO Box 962017			FEC Identification Number C	
City Boston	State MA	Zip Code 02196	Amount of Each Disbursement this Period 2.48	
Purpose of Disbursement Service Fee		Category/ Type	Transaction ID : SB17.6217	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2026	
Mailing Address PO Box 962017			FEC Identification Number C	
City Boston	State MA	Zip Code 02196	Amount of Each Disbursement this Period 0.93	
Purpose of Disbursement Service Fee		Category/ Type	Transaction ID : SB17.6390	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2026	
Mailing Address PO Box 962017			FEC Identification Number C	
City Boston	State MA	Zip Code 02196	Amount of Each Disbursement this Period 4.38	
Purpose of Disbursement Service Fee		Category/ Type	Transaction ID : SB17.6391	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	7.79
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 8 OF 15			
	<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)
Tracy for Maryland

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. ActBlue Technical Services		M M / D D / Y Y Y Y 04 / 26 / 2026	
Mailing Address PO Box 962017		FEC Identification Number	
City Boston	State MA	Zip Code 02196	C
Purpose of Disbursement Service Fee		Category/ Type	Amount of Each Disbursement this Period
Candidate Name			3.22
Office Sought:	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 : SB17.6392
State:	District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. ActBlue Technical Services		M M / D D / Y Y Y Y 05 / 03 / 2026	
Mailing Address PO Box 962017		FEC Identification Number	
City Boston	State MA	Zip Code 02196	C
Purpose of Disbursement Service Fee		Category/ Type	Amount of Each Disbursement this Period
Candidate Name			4.11
Office Sought:	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 : SB17.6393
State:	District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. ActBlue Technical Services		M M / D D / Y Y Y Y 05 / 10 / 2026	
Mailing Address PO Box 962017		FEC Identification Number	
City Boston	State MA	Zip Code 02196	C
Purpose of Disbursement Service Fee		Category/ Type	Amount of Each Disbursement this Period
Candidate Name			0.20
Office Sought:	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 : SB17.6394
State:	District:		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	7.53
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 9 OF 15	
	<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)
Tracy for Maryland

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2026
Mailing Address PO Box 962017		FEC Identification Number C
City Boston	State MA	Zip Code 02196
Purpose of Disbursement Service Fee		Amount of Each Disbursement this Period 0.80
Candidate Name	Category/ Type	Transaction ID : SB17.6395
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 Technical Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2026
Mailing Address PO Box 962017		FEC Identification Number C
City Boston	State MA	Zip Code 02196
Purpose of Disbursement Service Fee		Amount of Each Disbursement this Period 1.39
Candidate Name	Category/ Type	Transaction ID : SB17.6396
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 Technical Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2026
Mailing Address PO Box 962017		FEC Identification Number C
City Boston	State MA	Zip Code 02196
Purpose of Disbursement Service Fee		Amount of Each Disbursement this Period 0.24
Candidate Name	Category/ Type	Transaction ID : SB17.6397
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).....▶	2.43
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 15	
	<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)
Tracy for Maryland

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2026
Mailing Address PO Box 962017		FEC Identification Number C
City Boston	State MA	Zip Code 02196
Purpose of Disbursement Service Fee		Amount of Each Disbursement this Period 2.28
Candidate Name		Transaction ID : SB17.6398
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. Amalgamated Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2026
Mailing Address 1825 K St NW		FEC Identification Number C
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Bank Fees		Amount of Each Disbursement this Period 95.21
Candidate Name		Transaction ID : SB17.6421
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. Amalgamated Bank		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2026
Mailing Address 1825 K St NW		FEC Identification Number C
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Bank Fees		Amount of Each Disbursement this Period 94.25
Candidate Name		Transaction ID : SB17.6422
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).....▶	191.74
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 15	
	<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)
Tracy for Maryland

Full Name (Last, First, Middle Initial) A. Chiou, Melissa, , ,		Date of Disbursement MM / DD / YYYY 04 / 10 / 2026
Mailing Address 4602 Aspen Hill Rd		FEC Identification Number C
City Rockville	State MD	Zip Code 20853
Purpose of Disbursement Social Media Support Services		Amount of Each Disbursement this Period 500.00
Candidate Name		Transaction ID : SB17.6242
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. Chiou, Melissa, , ,		Date of Disbursement MM / DD / YYYY 04 / 20 / 2026
Mailing Address 4602 Aspen Hill Rd		FEC Identification Number C
City Rockville	State MD	Zip Code 20853
Purpose of Disbursement Social Media Support Services		Amount of Each Disbursement this Period 500.00
Candidate Name		Transaction ID : SB17.6431
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. Facebook		Date of Disbursement MM / DD / YYYY 04 / 20 / 2026
Mailing Address 1 Hacker Wy		FEC Identification Number C
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement Digital Advertising		Amount of Each Disbursement this Period 23.00
Candidate Name		Transaction ID : SB17.6413
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).....▶	1023.00
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 12 OF 15	
	<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)
Tracy for Maryland

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Facebook		M M / D D / Y Y Y Y 04 / 20 / 2026
Mailing Address 1 Hacker Wy		FEC Identification Number
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement Digital Advertising		<input type="checkbox"/> Category/ Type
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For: 2026	23.00
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.6414
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Facebook		M M / D D / Y Y Y Y 04 / 20 / 2026
Mailing Address 1 Hacker Wy		FEC Identification Number
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement Digital Advertising		<input type="checkbox"/> Category/ Type
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For: 2026	21.00
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.6415
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Facebook		M M / D D / Y Y Y Y 04 / 20 / 2026
Mailing Address 1 Hacker Wy		FEC Identification Number
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement Digital Advertising		<input type="checkbox"/> Category/ Type
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For: 2026	30.00
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.6416
State: District:		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	74.00
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 15	
	<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)
Tracy for Maryland

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1 Hacker Wy

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement Digital Advertising

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 22 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 30.00

Transaction ID : SB17.6417

Memo Item

Full Name (Last, First, Middle Initial)

B. Facebook

Mailing Address 1 Hacker Wy

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement Digital Advertising

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 22 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 36.00

Transaction ID : SB17.6418

Memo Item

Full Name (Last, First, Middle Initial)

C. Facebook

Mailing Address 1 Hacker Wy

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement Digital Advertising

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 22 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 36.00

Transaction ID : SB17.6419

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 102.00

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 15	
	<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)
Tracy for Maryland

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1 Hacker Wy

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement Digital Advertising

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 14 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 69.34

Transaction ID : SB17.6420

Memo Item

Full Name (Last, First, Middle Initial)

B. Groundfloor Political

Mailing Address 1312 17th Street Unit #2585

City Denver State CO Zip Code 80202

Purpose of Disbursement Fundraising Commission

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 06 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 57.92

Transaction ID : SB17.6237

Memo Item

Full Name (Last, First, Middle Initial)

C. Switchboard Public Benefit Corp.

Mailing Address PO Box 33485

City Washington State DC Zip Code 20033

Purpose of Disbursement Account Verification

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 07 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 0.01

Transaction ID : SB17.6427

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 127.27

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 15	
	<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)
Tracy for Maryland

Full Name (Last, First, Middle Initial) A. Switchboard Public Benefit Corp.			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2026	
Mailing Address PO Box 33485			FEC Identification Number C	
City Washington	State DC	Zip Code 20033	Amount of Each Disbursement this Period 295.57	
Purpose of Disbursement Messaging Services		Category/ Type	Transaction ID : SB17.6424	
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. Switchboard Public Benefit Corp.			Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2026	
Mailing Address PO Box 33485			FEC Identification Number C	
City Washington	State DC	Zip Code 20033	Amount of Each Disbursement this Period 311.81	
Purpose of Disbursement Messaging Services		Category/ Type	Transaction ID : SB17.6425	
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) 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).....▶	607.38
TOTAL This Period (last page this line number only).....▶	2143.14