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

Jami Floyd for Congress

ADDRESS (number and street) ▼ PO BOX 230031

Check if different than previously reported. (ACC)

New York | NY | 10023 –

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼** C C00923862

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

STATE ▼ DISTRICT: NY 12

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- [ ] April 15 Quarterly Report (Q1)
- [X] 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 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: Tinsmon, Cassie, , ,

Signature of Treasurer: *Tinsmon, Cassie, , ,* Date: 08 / 21 / 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.

Office Use Only							

Image# 202608219903376852

SUMMARY PAGE
of Receipts and Disbursements

FEC **Form 3** (Revised 03/2016)

Write or Type Committee Name

Jami Floyd for Congress

Report Covering the Period: From: 04 / 01 / 2026 To: 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))	0.00	255413.77
(b) Total Contribution Refunds (from Line 20(d))	300.00	15290.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	– 300.00	240123.77
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	7549.95	266881.91
(b) Total Offsets to Operating Expenditures (from Line 14).....	22.19	22.19
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	7527.76	266859.72
8. Cash on Hand at Close of Reporting Period (from Line 27).....	10040.00	
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)	41275.00	

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

Image# 202608219903376853

DETAILED SUMMARY PAGE
of Receipts

FEC **Form 3** (Revised 05/2016)

Write or Type Committee Name

Jami Floyd for Congress

Report Covering the Period: From: 04 / 01 / 2026 To: 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)	0.00	187132.00
(ii) Unitemized	0.00	25087.45
(iii) TOTAL of contributions from individuals ▶	0.00	212219.45
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) The Candidate	0.00	43194.32
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	255413.77
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	0.00	350000.00
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	350000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	22.19	22.19
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.95
16. **TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) ▶	22.19	605436.91

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	7549.95	266881.91
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	41725.00	311725.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	41725.00	311725.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	300.00	15290.00
(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))	300.00	15290.00
21. OTHER DISBURSEMENTS	0.00	1500.00
22. **TOTAL DISBURSEMENTS** (add Lines 17, 18, 19(c), 20(d), and 21) ▶	49574.95	595396.91

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	59592.76
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	22.19
25. SUBTOTAL (add Line 23 and Line 24)	59614.95
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	49574.95
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	10040.00

Image# 202608219903376855

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)
Jami Floyd for Congress

A. Full Name (Last, First, Middle Initial)
Amalgamated Bank

Mailing Address 275 7Th Ave

City: New York | State: NY | Zip Code: 10001-6708

Purpose of Disbursement: Bank Fee

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 04 / 28 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 14.00

Transaction ID : 500128123

☐ Memo Item

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

Mailing Address 275 7Th Ave

City: New York | State: NY | Zip Code: 10001-6708

Purpose of Disbursement: Bank Fee

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 05 / 28 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 42.25

Transaction ID : 500152200

☐ Memo Item

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

Mailing Address 275 7Th Ave

City: New York | State: NY | Zip Code: 10001-6708

Purpose of Disbursement: Bank Fee

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 06 / 29 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 14.00

Transaction ID : 500152199

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 70.25

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

Image# 202608219903376856

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)
Jami Floyd for Congress

A. Full Name (Last, First, Middle Initial)
Google
Mailing Address 1600 Amphitheatre Pkwy
City: Mountain View | State: CA | Zip Code: 94043-1351
Purpose of Disbursement: Software
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 04 / 06 / 2026
FEC Identification Number: C
Amount of Each Disbursement this Period: 227.12
Transaction ID : 500128122
☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Google
Mailing Address 1600 Amphitheatre Pkwy
City: Mountain View | State: CA | Zip Code: 94043-1351
Purpose of Disbursement: Software
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 05 / 04 / 2026
FEC Identification Number: C
Amount of Each Disbursement this Period: 114.97
Transaction ID : 500128117
☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Google
Mailing Address 1600 Amphitheatre Pkwy
City: Mountain View | State: CA | Zip Code: 94043-1351
Purpose of Disbursement: Software
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 06 / 05 / 2026
FEC Identification Number: C
Amount of Each Disbursement this Period: 33.37
Transaction ID : 500152201
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 375.46

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)
Jami Floyd for Congress

A.
Full Name (Last, First, Middle Initial)
Gusto
Mailing Address 525 20Th St
City: San Francisco | State: CA | Zip Code: 94107-4345
Purpose of Disbursement: Payroll Fees
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 04 / 02 / 2026
FEC Identification Number: C
Amount of Each Disbursement this Period: 64.98
Transaction ID : 500125162
☐ Memo Item

B.
Full Name (Last, First, Middle Initial)
Gusto
Mailing Address 525 20Th St
City: San Francisco | State: CA | Zip Code: 94107-4345
Purpose of Disbursement: Payroll Taxes
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 05 / 04 / 2026
FEC Identification Number: C
Amount of Each Disbursement this Period: 496.19
Transaction ID : 500128115
☐ Memo Item

C.
Full Name (Last, First, Middle Initial)
Intuit
Mailing Address 2700 Coast Ave
City: Mountain View | State: CA | Zip Code: 94043-1140
Purpose of Disbursement: Accounting Software
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 04 / 30 / 2026
FEC Identification Number: C
Amount of Each Disbursement this Period: 55.65
Transaction ID : 500128124
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 616.82

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

Image# 202608219903376858

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)
Jami Floyd for Congress

A. Full Name (Last, First, Middle Initial)
Next Insurance

Mailing Address PO Box 60787

City: Palo Alto | State: CA | Zip Code: 94306-0787

Purpose of Disbursement: Worker's Compensation Insurance

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 04 / 06 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 22.60

Transaction ID : 500128121

☐ Memo Item

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

Mailing Address 1445 New York Ave NW Ste 200

City: Washington | State: DC | Zip Code: 20005-2158

Purpose of Disbursement: Software

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 04 / 01 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 212.00

Transaction ID : 500125151

☐ Memo Item

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

Mailing Address 1445 New York Ave NW Ste 200

City: Washington | State: DC | Zip Code: 20005-2158

Purpose of Disbursement: Software

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 04 / 03 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 212.00

Transaction ID : 500125152

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 446.60

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

Image# 202608219903376859

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)
Jami Floyd for Congress

A.
Full Name (Last, First, Middle Initial)
NGP, Inc.
Mailing Address 1445 New York Ave NW
Ste 200
City: Washington | State: DC | Zip Code: 20005-2158
Purpose of Disbursement: Software
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 04 / 03 / 2026
FEC Identification Number: C
Amount of Each Disbursement this Period: 1906.94
Transaction ID : 500125156
☐ Memo Item

B.
Full Name (Last, First, Middle Initial)
NGP, Inc.
Mailing Address 1445 New York Ave NW
Ste 200
City: Washington | State: DC | Zip Code: 20005-2158
Purpose of Disbursement: Software
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 04 / 03 / 2026
FEC Identification Number: C
Amount of Each Disbursement this Period: 1906.94
Transaction ID : 500125157
☐ Memo Item

C.
Full Name (Last, First, Middle Initial)
NGP, Inc.
Mailing Address 1445 New York Ave NW
Ste 200
City: Washington | State: DC | Zip Code: 20005-2158
Purpose of Disbursement: Software
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 04 / 29 / 2026
FEC Identification Number: C
Amount of Each Disbursement this Period: 2118.94
Transaction ID : 500125158
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 5932.82

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)
Jami Floyd for Congress

A.
Full Name (Last, First, Middle Initial)
Squarespace, Inc.
Mailing Address 225 Varick St
Fl 12
City: New York | State: NY | Zip Code: 10014-4383
Purpose of Disbursement: Software
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 04 / 13 / 2026
FEC Identification Number: C
Amount of Each Disbursement this Period: 36.00
Transaction ID : 500125165
☐ Memo Item

B.
Full Name (Last, First, Middle Initial)
Squarespace, Inc.
Mailing Address 225 Varick St
Fl 12
City: New York | State: NY | Zip Code: 10014-4383
Purpose of Disbursement: Software
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 05 / 12 / 2026
FEC Identification Number: C
Amount of Each Disbursement this Period: 36.00
Transaction ID : 500152197
☐ Memo Item

C.
Full Name (Last, First, Middle Initial)
Squarespace, Inc.
Mailing Address 225 Varick St
Fl 12
City: New York | State: NY | Zip Code: 10014-4383
Purpose of Disbursement: Software
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 06 / 12 / 2026
FEC Identification Number: C
Amount of Each Disbursement this Period: 36.00
Transaction ID : 500152198
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 108.00

TOTAL This Period (last page this line number only) ▶ 7549.95

Image# 202608219903376861

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)
Jami Floyd for Congress

A.
Full Name (Last, First, Middle Initial)
Floyd, Jami, , ,
Mailing Address PO Box 230031
City: New York | State: NY | Zip Code: 10023-0001
Purpose of Disbursement: Partial candidate loan repayment
Candidate Name: Floyd, Jami, , Mrs.,
Category/ Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 12
Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 04 / 29 / 2026
FEC Identification Number: C H6NY12222
Amount of Each Disbursement this Period: 41725.00
Transaction ID : 500125159
☐ Memo Item

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

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
Purpose of Disbursement
Candidate Name
Category/ Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For:
☐ Primary ☐ General ☐ Other (specify)
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) ▶ 41725.00

TOTAL This Period (last page this line number only) ▶ 41725.00

Image# 202608219903376862

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)
Jami Floyd for Congress

A.
Full Name (Last, First, Middle Initial)
Cholack, Dina, , ,

Mailing Address 333 Central Park W
Apt 61

City: New York | State: NY | Zip Code: 10025-7105

Purpose of Disbursement: Refund

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify)

Date of Disbursement: 04 / 29 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 300.00

Transaction ID : 500125166

☐ Memo Item

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

Mailing Address

City | State | Zip Code

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

Date of Disbursement: M M / D D / Y Y Y Y

FEC Identification Number: C

Amount of Each Disbursement this Period:

☐ Memo Item

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

Mailing Address

City | State | Zip Code

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

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) ▶ 300.00

TOTAL This Period (last page this line number only) ▶ 300.00

Image# 202608219903376863

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one) [X] 13a [ ] 13b

NAME OF COMMITTEE (In Full)
Jami Floyd for Congress

Transaction ID : 6884050L

LOAN SOURCE Full Name (Last, First, Middle Initial)
Floyd, Jami, , ,

[ ] Memo Item

Mailing Address
PO Box 230031

City: New York | State: NY | ZIP Code: 10023-0001

Election: 2026
[X] Primary
[ ] General
[ ] Other (specify)

[X] Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100000.00	61725.00	38275.00

TERMS

Date Incurred (MM/DD/YYYY)	Date Due (MM/DD/YYYY)	Interest Rate (If none, enter 0)	Secured:
01/30/2026	06/01/2026	0.00 % (apr)	[ ] Yes [X] No

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

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

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

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

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

SUBTOTALS This Period This Page (optional) ▶	38275.00
TOTALS This Period (last page in this line only) ▶	38275.00

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

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

NAME OF COMMITTEE (In Full)

Jami Floyd for Congress

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

NGP, Inc.

Mailing Address 1445 New York Ave NW
Ste 200

City: Washington | State: DC | Zip Code: 20005-2158

Nature of Debt (Purpose): Software

Transaction ID : 1250001175

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	2118.94	2118.94	0.00

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

Katz Compliance

Mailing Address 3723 Greenville Ave
Ste 41077

City: Dallas | State: TX | Zip Code: 75206-5311

Nature of Debt (Purpose): Compliance Services

Transaction ID : 1250001176

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	3000.00	0.00	3000.00

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

Mailing Address

City | State | Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ▶	3000.00
2) **TOTALS** This Period (last page this line number only) ▶	3000.00
3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶	38275.00
4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶	41275.00