

**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

CONSTANTINO FOR CONGRESS, INC.

ADDRESS (number and street)

20 CORPORATE WOODS BLVD

FL 2

Check if different
than previously
reported. (ACC)

ALBANY

NY

12211

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00892737

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

NY

21

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
07 / 01 / 2025

through

M M / D D / Y Y Y Y
09 / 30 / 2025*I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.*

Type or Print Name of Treasurer

GONZALEZ, BRITNEY, , ,

Signature of Treasurer

GONZALEZ, BRITNEY, , ,

Date

M M / D D / Y Y Y Y
10 / 14 / 2025

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

CONSTANTINO FOR CONGRESS, INC.

Report Covering the Period:

From:

MM / DD / YYYY
07 / 01 / 2025

To:

MM / DD / YYYY
09 / 30 / 2025

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	0.00	0.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	355391.65	0.00
(b) Total Offsets to Operating Expenditures (from Line 14)	3478.61	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	351913.04	0.00
8. Cash on Hand at Close of Reporting Period (from Line 27)	429789.10	
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)	2600000.00	

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

CONSTANTINO FOR CONGRESS, INC.

Report Covering the Period:

From:

MM / DD / YYYY
07 / 01 / 2025

To:

MM / DD / YYYY
09 / 30 / 2025**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).....

(ii) Unitemized.....

(iii) TOTAL of contributions
from individuals ▶

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACs).....

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

(b) All Other Loans.....

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)15. OTHER RECEIPTS
(Dividends, Interest, etc.)16. **TOTAL RECEIPTS** (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

3478.61

0.00

3478.61

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

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.....	355391.65	0.00
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	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	355391.65	0.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	781702.14
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	3478.61
25. SUBTOTAL (add Line 23 and Line 24).....	785180.75
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	355391.65
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	429789.10

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 5 OF 37

☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
☐ 12	☐ 13a	☐ 13b	☒ 14	☐ 15

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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

RAMP BUSINESS CORPORATION

A.

Mailing Address 28 W 23RD ST

FL 2

City

NEW YORK

State

NY

Zip Code

10010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

3478.61

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	2	5

Transaction ID : SA14.681

Amount of Each Receipt this Period

3478.61

☐ Memo Item

CREDIT CARD CASH BACK REBATE

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

☐ Memo Item

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

☐ Memo Item

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

3478.61

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

3478.61

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. FLORES, ALEC, , ,

Mailing Address 912 JENNIFER ST

City
INCLINE VILLAGEState
NVZip Code
89451Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2112.00

Transaction ID : SB17.I657

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FLORES, ALEC, , ,

Mailing Address 912 JENNIFER ST

City
INCLINE VILLAGEState
NVZip Code
89451Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

880.00

Transaction ID : SB17.I658

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FLORES, ALEC, , ,

Mailing Address 912 JENNIFER ST

City
INCLINE VILLAGEState
NVZip Code
89451Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

880.00

Transaction ID : SB17.I659

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3872.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. FLORES, ALEC, , ,

Mailing Address 912 JENNIFER ST

City
INCLINE VILLAGEState
NVZip Code
89451Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

880.00

Transaction ID : SB17.I660

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FLORES, ALEC, , ,

Mailing Address 912 JENNIFER ST

City
INCLINE VILLAGEState
NVZip Code
89451Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

880.00

Transaction ID : SB17.I661

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FLORES, ALEC, , ,

Mailing Address 912 JENNIFER ST

City
INCLINE VILLAGEState
NVZip Code
89451Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

880.00

Transaction ID : SB17.I662

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2640.00

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 PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. FLORES, ALEC, , ,

Mailing Address 912 JENNIFER ST

City
INCLINE VILLAGEState
NVZip Code
89451Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		19		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

880.00

Transaction ID : SB17.I663

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FLORES, ALEC, , ,

Mailing Address 912 JENNIFER ST

City
INCLINE VILLAGEState
NVZip Code
89451Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		26		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

880.00

Transaction ID : SB17.I664

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ROUDIK, LEONID, , ,Mailing Address 3945 CHESTNUT ST
APT 703City
PHILADELPHIAState
PAZip Code
19104Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

1189.87

Transaction ID : SB17.I634

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2949.87

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. THE TAMPA EDITION

Mailing Address 500 CHANNELSIDE DRIVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2025

City
TAMPAState
FLZip Code
33602

FEC Identification Number

C

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1189.87

Transaction ID : SB17.I635

☒ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. ROUDIK, LEONID, , ,Mailing Address 3945 CHESTNUT ST
APT 703

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		20		2025

City
PHILADELPHIAState
PAZip Code
19104

FEC Identification Number

C

Purpose of Disbursement
TRAVEL / SUBSCRIPTION / FOOD / BEVERAGE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1701.49

Transaction ID : SB17.I636

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. EDITION HOTELS

Mailing Address 500 CHANNELSIDE DRIVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		20		2025

City
TAMPAState
FLZip Code
33602

FEC Identification Number

C

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1189.87

Transaction ID : SB17.I637

☒ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

1701.49

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. LYFTMailing Address 185 BERRY ST
SUITE 400City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

347.22

Transaction ID : SB17.I639

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. BB DIGITAL MEDIA

Mailing Address 4290 66TH PLACE

City
BOCA RATONState
FLZip Code
33496Purpose of Disbursement
MEDIA PLACEMENT / MEDIA PRODUCTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB17.I645

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BB DIGITAL MEDIA

Mailing Address 4290 66TH PLACE

City
BOCA RATONState
FLZip Code
33496Purpose of Disbursement
MEDIA PLACEMENT / MEDIA PRODUCTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB17.I646

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

20000.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. BB DIGITAL MEDIA

Mailing Address 4290 66TH PLACE

City
BOCA RATONState
FLZip Code
33496Purpose of Disbursement
MEDIA PLACEMENT / MEDIA PRODUCTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB17.I647

☐ Memo Item**B. BB DIGITAL MEDIA**

Mailing Address 4290 66TH PLACE

City
BOCA RATONState
FLZip Code
33496Purpose of Disbursement
MEDIA PLACEMENT / MEDIA PRODUCTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

20000.00

Transaction ID : SB17.I648

☐ Memo Item**C. CATSKILL SECURITY LLC**

Mailing Address 482 WEST MAIL STREET

City
CATSKILLState
NYZip Code
12414Purpose of Disbursement
SECURITY SERVICES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1225.00

Transaction ID : SB17.I649

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

24225.00

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
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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. CMDIMailing Address 1595 SPRING HILL RD
STE 500City
TYSONS CORNERState
VAZip Code
22182Purpose of Disbursement
DATABASE MANAGEMENT

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		06		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.I652

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CMDIMailing Address 1595 SPRING HILL RD
STE 500City
TYSONS CORNERState
VAZip Code
22182Purpose of Disbursement
DATABASE MANAGEMENT

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		09		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.I653

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CROSBY OTTENHOFF GROUP

Mailing Address 421 OFFICE PARK DRIVE

City
MOUNTAIN BROOKState
ALZip Code
35223Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

11406.85

Transaction ID : SB17.I654

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

11506.85

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. DRAKE VENTURES LLCMailing Address 1007 N FEDERAL HIGHWAY
#405City
FORT LAURDERDALEState
FLZip Code
33304Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

20000.00

Transaction ID : SB17.I655

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DRAKE VENTURES LLCMailing Address 1007 N FEDERAL HIGHWAY
#405City
FORT LAURDERDALEState
FLZip Code
33304Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB17.I656

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GUSTO

Mailing Address 525 20TH STREET

City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
PAYROLL SERVICE FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

8.64

Transaction ID : SB17.I665

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

30008.64

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. GUSTO

Mailing Address 525 20TH STREET

City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		08		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

237.59

Transaction ID : SB17.I666

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GUSTO

Mailing Address 525 20TH STREET

City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		15		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

99.00

Transaction ID : SB17.I667

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GUSTO

Mailing Address 525 20TH STREET

City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		22		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

99.00

Transaction ID : SB17.I668

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

435.59

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. GUSTO

Mailing Address 525 20TH STREET

City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

99.00

Transaction ID : SB17.I669

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GUSTO

Mailing Address 525 20TH STREET

City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

99.00

Transaction ID : SB17.I670

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GUSTO

Mailing Address 525 20TH STREET

City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

96.65

Transaction ID : SB17.I671

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

294.65

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

SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. GUSTO

Mailing Address 525 20TH STREET

City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

99.00

Transaction ID : SB17.I672

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GUSTO

Mailing Address 525 20TH STREET

City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

93.72

Transaction ID : SB17.I673

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. INTUIT QUICKBOOKS

Mailing Address 2632 MARINE WAY

City
MOUNTAIN VIEWState
CAZip Code
94043Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

74.84

Transaction ID : SB17.I674

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

267.56

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. INTUIT QUICKBOOKS

Mailing Address 2632 MARINE WAY

City
MOUNTAIN VIEWState
CAZip Code
94043Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

74.84

Transaction ID : SB17.I675

☐ Memo Item**B. INTUIT QUICKBOOKS**

Mailing Address 2632 MARINE WAY

City
MOUNTAIN VIEWState
CAZip Code
94043Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

74.84

Transaction ID : SB17.I676

☐ Memo Item**C. PROMPT.IO.INC.**Mailing Address 14419 GREENWOOD AVE N
SUITE A-373City
SEATTLEState
WAZip Code
98133Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

21600.00

Transaction ID : SB17.I677

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

21749.68

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. PROMPT.IO.INC.Mailing Address 14419 GREENWOOD AVE N
SUITE A-373City
SEATTLEState
WAZip Code
98133Purpose of Disbursement
SOFTWARE SUBSCRIPTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

108000.00

Transaction ID : SB17.I678

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RAMP BUSINESS CORPORATIONMailing Address 28 W 23RD ST
FL 2City
NEW YORKState
NYZip Code
10010Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

33159.04

Transaction ID : SB17.I576

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ASANAMailing Address 633 FOLSOM ST
SUITE 100City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
SOFTWARE SUBSCRIPTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

145.70

Transaction ID : SB17.I580

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

141159.04

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. ASHBYMailing Address 548 MARKET ST
PMP 397006City
SAN FRANCISCOState
CAZip Code
94104Purpose of Disbursement
SOFTWARE SUBSCRIPTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.I581

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. DNSIMPLEMailing Address 548 MARKET ST
PMB 77519City
SAN FRANCISCOState
CAZip Code
94104Purpose of Disbursement
WEBSITE SERVICES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

121.20

Transaction ID : SB17.I582

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FACEBOOK ADS

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
MEDIA PLACEMENT / MEDIA PRODUCTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

25435.25

Transaction ID : SB17.I583

☒ Memo Item

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

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. GHOSTMailing Address 6380 WILSHIRE BOULEVARD
SUITE 1106City
LOS ANGELESState
CAZip Code
90048Purpose of Disbursement
WEBSITE SERVICES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

249.00

Transaction ID : SB17.I584

☒ Memo Item**B. GOOGLE WORKSPACE**

Mailing Address 1600 AMPHITHEATRE PARKWAY

City
MOUNTAIN VIEWState
CAZip Code
94043Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

342.14

Transaction ID : SB17.I586

☒ Memo Item**C. GROOVE**

Mailing Address 449 THAMES STREET

City
NEWPORTState
RIZip Code
02840Purpose of Disbursement
DIRECT MAIL SERVICES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

127.77

Transaction ID : SB17.I587

☒ Memo Item

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

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. HELPUICEMailing Address 1010 NE 2ND AVE
SUITE 100City
MIAMIState
FLZip Code
33132Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.I588

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. I360Mailing Address 1701 PENNSYLVANIA AVE NW
SUITE 200City
WASHINGTONState
DCZip Code
20006Purpose of Disbursement
DATA MANAGEMENT SUBSCRIPTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

5400.00

Transaction ID : SB17.I589

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. MAILERLITEMailing Address 548 MARKET ST
PMB 98174City
SAN FRANCISCOState
CAZip Code
94104Purpose of Disbursement
DIRECT MAIL SERVICES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

752.76

Transaction ID : SB17.I590

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. MAILREACH

Mailing Address 10 RUE DE PENTHIEVRE

City
PARISState
UKZip Code
75008Purpose of Disbursement
DIRECT MAIL SERVICES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

59.60

Transaction ID : SB17.I591

☒ Memo Item**B. RAMP BUSINESS CORPORATION**Mailing Address 28 W 23RD ST
FL 2City
NEW YORKState
NYZip Code
10010Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

22403.87

Transaction ID : SB17.I577

☐ Memo Item**C. ASANA**Mailing Address 633 FOLSOM ST
SUITE 100City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
SOFTWARE SUBSCRIPTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

145.69

Transaction ID : SB17.I607

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

22403.87

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. ASHBYMailing Address 548 MARKET ST
PMP 397006City
SAN FRANCISCOState
CAZip Code
94104Purpose of Disbursement
SOFTWARE SUBSCRIPTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.I608

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. DNSIMPLEMailing Address 548 MARKET ST
PMB 77519City
SAN FRANCISCOState
CAZip Code
94104Purpose of Disbursement
WEBSITE SERVICES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

90.20

Transaction ID : SB17.I609

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FACEBOOK ADS

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
MEDIA PLACEMENT / MEDIA PRODUCTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

13868.01

Transaction ID : SB17.I610

☒ Memo Item

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

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. GHOSTMailing Address 6380 WILSHIRE BOULEVARD
SUITE 1106City
LOS ANGELESState
CAZip Code
90048Purpose of Disbursement
WEBSITE SERVICES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

686.00

Transaction ID : SB17.I611

☒ Memo Item**B. GOOGLE WORKSPACE**

Mailing Address 1600 AMPHITHEATRE PARKWAY

City
MOUNTAIN VIEWState
CAZip Code
94043Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

370.66

Transaction ID : SB17.I613

☒ Memo Item**C. GROOVE**

Mailing Address 449 THAMES STREET

City
NEWPORTState
RIZip Code
02840Purpose of Disbursement
DIRECT MAIL SERVICES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

234.05

Transaction ID : SB17.I614

☒ Memo Item

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

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. HELPUICEMailing Address 1010 NE 2ND AVE
SUITE 100City
MIAMIState
FLZip Code
33132Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.I615

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. I360Mailing Address 1701 PENNSYLVANIA AVE NW
SUITE 200City
WASHINGTONState
DCZip Code
20006Purpose of Disbursement
DATA MANAGEMENT SUBSCRIPTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

5400.00

Transaction ID : SB17.I616

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. K LAP

Mailing Address 32401 8 MILE ROAD

City
LIVONIAState
MIZip Code
04152Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

79.00

Transaction ID : SB17.I617

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. MAILERLITEMailing Address 548 MARKET ST
PMB 98174City
SAN FRANCISCOState
CAZip Code
94104Purpose of Disbursement
DIRECT MAIL SERVICES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

752.76

Transaction ID : SB17.I618

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. MAILERSENDMailing Address 228 PARK AVE S
PMB 54955City
NEW YORKState
NYZip Code
10003Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

35.00

Transaction ID : SB17.I619

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. MAILREACH

Mailing Address 10 RUE DE PENTHIEVRE

City
PARISState
UKZip Code
75008Purpose of Disbursement
DIRECT MAIL SERVICES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

59.60

Transaction ID : SB17.I620

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. STICKER MULE

Mailing Address 336 FOREST AVE

City
AMSTERDAMState
NYZip Code
12010Purpose of Disbursement
DONOR MEMENTOS

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

157.23

Transaction ID : SB17.I621

☒ Memo Item**B. RAMP BUSINESS CORPORATION**Mailing Address 28 W 23RD ST
FL 2City
NEW YORKState
NYZip Code
10010Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

35693.70

Transaction ID : SB17.I578

☐ Memo Item**C. ASANA**Mailing Address 633 FOLSOM ST
SUITE 100City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
SOFTWARE SUBSCRIPTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

145.69

Transaction ID : SB17.I592

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

35693.70

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. ASHBYMailing Address 548 MARKET ST
PMP 397006City
SAN FRANCISCOState
CAZip Code
94104Purpose of Disbursement
SOFTWARE SUBSCRIPTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.I593

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. DNSIMPLEMailing Address 548 MARKET ST
PMB 77519City
SAN FRANCISCOState
CAZip Code
94104Purpose of Disbursement
WEBSITE SERVICES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

175.20

Transaction ID : SB17.I594

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FACEBOOK ADS

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
MEDIA PLACEMENT / MEDIA PRODUCTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

27300.13

Transaction ID : SB17.I595

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. GHOSTMailing Address 6380 WILSHIRE BOULEVARD
SUITE 1106City
LOS ANGELESState
CAZip Code
90048Purpose of Disbursement
WEBSITE SERVICES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

686.00

Transaction ID : SB17.I596

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. GOOGLE WORKSPACE

Mailing Address 1600 AMPHITHEATRE PARKWAY

City
MOUNTAIN VIEWState
CAZip Code
94043Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

349.48

Transaction ID : SB17.I598

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. GROOVE

Mailing Address 449 THAMES STREET

City
NEWPORTState
RIZip Code
02840Purpose of Disbursement
DIRECT MAIL SERVICES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

172.55

Transaction ID : SB17.I599

☒ Memo Item

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

0.00

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

SCHEDULE B (FEC Form 3)
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. HELPUJICEMailing Address 1010 NE 2ND AVE
SUITE 100City
MIAMIState
FLZip Code
33132Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.I600

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. I360Mailing Address 1701 PENNSYLVANIA AVE NW
SUITE 200City
WASHINGTONState
DCZip Code
20006Purpose of Disbursement
DATA MANAGEMENT SUBSCRIPTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

5400.00

Transaction ID : SB17.I601

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. K LAP

Mailing Address 32401 8 MILE ROAD

City
LIVONIAState
MIZip Code
04152Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

79.00

Transaction ID : SB17.I602

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. MAILERLITEMailing Address 548 MARKET ST
PMB 98174City
SAN FRANCISCOState
CAZip Code
94104Purpose of Disbursement
DIRECT MAIL SERVICES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

752.76

Transaction ID : SB17.I603

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. MAILERSENDMailing Address 228 PARK AVE S
PMB 54955City
NEW YORKState
NYZip Code
10003Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

35.00

Transaction ID : SB17.I605

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. MAILREACH

Mailing Address 10 RUE DE PENTHIEVRE

City
PARISState
UKZip Code
75008Purpose of Disbursement
DIRECT MAIL SERVICES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

59.60

Transaction ID : SB17.I604

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. RAMP BUSINESS CORPORATIONMailing Address 28 W 23RD ST
FL 2City
NEW YORKState
NYZip Code
10010Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

30205.10

Transaction ID : SB17.I579

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ASANAMailing Address 633 FOLSOM ST
SUITE 100City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
SOFTWARE SUBSCRIPTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

145.69

Transaction ID : SB17.I622

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. ASHBYMailing Address 548 MARKET ST
PMP 397006City
SAN FRANCISCOState
CAZip Code
94104Purpose of Disbursement
SOFTWARE SUBSCRIPTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.I623

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

30205.10

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. DNSIMPLEMailing Address 548 MARKET ST
PMB 77519City
SAN FRANCISCOState
CAZip Code
94104Purpose of Disbursement
WEBSITE SERVICES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

90.20

Transaction ID : SB17.I624

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FACEBOOK ADS

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
MEDIA PLACEMENT / MEDIA PRODUCTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

22356.33

Transaction ID : SB17.I625

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. GHOSTMailing Address 6380 WILSHIRE BOULEVARD
SUITE 1106City
LOS ANGELESState
CAZip Code
90048Purpose of Disbursement
WEBSITE SERVICES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

686.00

Transaction ID : SB17.I626

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. GROOVE

Mailing Address 449 THAMES STREET

City
NEWPORTState
RIZip Code
02840Purpose of Disbursement
DIRECT MAIL SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
09	30	2025

FEC Identification Number

C

Amount of Each Disbursement this Period

225.00

Transaction ID : SB17.I627

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. I360Mailing Address 1701 PENNSYLVANIA AVE NW
SUITE 200City
WASHINGTONState
DCZip Code
20006Purpose of Disbursement
DATA MANAGEMENT SUBSCRIPTION

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
09	30	2025

FEC Identification Number

C

Amount of Each Disbursement this Period

5400.00

Transaction ID : SB17.I628

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. K LAP

Mailing Address 32401 8 MILE ROAD

City
LIVONIAState
MIZip Code
04152Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
09	30	2025

FEC Identification Number

C

Amount of Each Disbursement this Period

79.00

Transaction ID : SB17.I629

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. MAILERLITEMailing Address 548 MARKET ST
PMB 98174City
SAN FRANCISCOState
CAZip Code
94104Purpose of Disbursement
DIRECT MAIL SERVICES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

708.48

Transaction ID : SB17.I630

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. MAILERSENDMailing Address 228 PARK AVE S
PMB 54955City
NEW YORKState
NYZip Code
10003Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

35.00

Transaction ID : SB17.I631

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. MAILREACH

Mailing Address 10 RUE DE PENTHIEVRE

City
PARISState
UKZip Code
75008Purpose of Disbursement
DIRECT MAIL SERVICES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

59.60

Transaction ID : SB17.I632

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

CONSTANTINO FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. STICKER MULE

Mailing Address 336 FOREST AVE

City
AMSTERDAMState
NYZip Code
12010Purpose of Disbursement
DONOR MEMENTOS

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

119.80

Transaction ID : SB17.I633

☒ Memo Item**B. STICKER MULE**

Mailing Address 336 FOREST AVE

City
AMSTERDAMState
NYZip Code
12010Purpose of Disbursement
DONOR MEMENTOS

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3478.61

Transaction ID : SB17.I682

☐ Memo Item**C. THE DAILY GAZETTE**

Mailing Address 2345 MAXON ROAD EXTENSION

City
SCHENECTADYState
NYZip Code
12308Purpose of Disbursement
MEDIA PLACEMENT

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2750.00

Transaction ID : SB17.I679

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6228.61

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

355341.65

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 37 OF 37
	FOR LINE NUMBER: (check only one) ☒ 13a ☐ 13b

NAME OF COMMITTEE (In Full) CONSTANTINO FOR CONGRESS, INC.	Transaction ID : SC10.14
---	--------------------------

LOAN SOURCE Full Name (Last, First, Middle Initial) CONSTANTINO, ANTHONY, THOMAS, ,		☐ Memo Item	Election: 2025 ☐ Primary ☐ General ☒ Other (specify) ▼ SPECIAL GENERAL
Mailing Address 20 CORPORATE WOODS BLVD FL 2			
City ALBANY	State NY	ZIP Code 12211	☒ Personal Funds of the Candidate

Original Amount of Loan 2600000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 2600000.00
---------------------------------------	------------------------------------	---

TERMS	Date Incurred M M / D D / Y Y Y Y 11 / 18 / 2024	Date Due M M / D D / Y Y Y Y NONE	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: ☐ Yes ☒ 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).....▶	2600000.00
TOTALS This Period (last page in this line only).....▶	2600000.00
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	