## FEC FORM 3

Only

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED FEC MAIL CENTER

2019 APR 16 AM 10: 06

(Revised 05/2016)

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ZIP CODE ▲
STATE ▼ DISTRICT
G) Runoff (12R)
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in the State of
Special (30S)
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complete.
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penalties of 52 U.S.C. §30109.

ļ			FEC Form	3 (Revised	03/2016)			MMARY ots and D	<b>PAGE</b> Disbursements				Page 2
-	W		r Type Cor	nmittee Nan	ne		i 5e,		•				
			ONY	pera	7.04								
	Re	port	Covering 1	he Period:	From:	Ø	r'Ø.	<u> </u>	œY9	То:	Ø \$	<u> </u>	<b>ʹ</b> ʹϨ <b>ʹ</b> ʹͿʹΫ
_									UMN A Period			COLUMN on Cycle	
- 6 	<b>5</b> .	Net	Contributio	ns (other th	an Ioans)								
2		(a)	Total Cont (other than	ributions n loans) (fron	n Line 11(e)	)		(1)	, <u>Ø</u>		(2)	(?)	<u>Ø.</u>
		(b)		ribution Refu 20(d))		•••••		())—li—_li—	, Ø,				ý.
() (1 _		(c)		butions (oth ine 6(b) fror				(1)	<u>,</u>				<u> </u>
7	7.	Net	Operating	Expenditures	·								
6		(a)	•	ating Expen				(7)					Ø.
03		(b)		ets to Opera res (from Lin				(1) <u> </u>	,Ø		· · · · · · · · · · · · · · · · · · ·		Ø.
002		(c)		ting Expend ine 7(b) fror		•••••		(3)	,Ø_				<u> </u>
4 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 -	3.			at Close of od (from Line	e 27)			(1)	,176,2	5			
٠ ١,	€.	the	Committee	igations Ow (Itemize all d/or Schedu	on	:		<i>(</i> )	,Ø				
1	10.	the	Committee	igations Ow (Itemize all d/or Schedu	on			(1)	],2,90,0	(ø		•	
•	Fo						or furthe	er inform	ation contac	t:			
							1050	First St	Commission reet, N.E.				
						•		Free 800- cal 202-6	424-9530 94-1100				

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 05/2016)

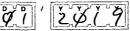
Write or Type Committee Name

DETORA TONY

Report Covering the Period:

From:





To:



' 3 1 ' Zø 19

Page 3

		I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
. ,	11.	CONTRIBUTIONS (other than loans) FROM:		
~0-40 : 04 : 40 : 0M : C		(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)		
00~74	12.	(add Lines 11(a)(iii), (b), (c), and (d))  TRANSFERS FROM OTHER  AUTHORIZED COMMITTEES		
T-MARCO	13.	LOANS:  (a) Made or Guaranteed by the Candidate		
	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)		

### **DETAILED SUMMARY PAGE**

FEC Form 3 (Revised 05/2016)

of Disbursements

Page 4

 	DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
<del></del>	ATING EXPENDITURES				
	SFERS TO OTHER ORIZED COMMITTEES				
(a) C b (b) C (c) T	REPAYMENTS:  If Loans Made or Guaranteed  y the Candidate  If All Other Loans  OTAL LOAN REPAYMENTS  add Lines 19(a) and (b))				
20. REFU (a) II (b) F (c) C (d) T	NDS OF CONTRIBUTIONS TO: ndividuals/Persons Other han Political Committees  political Party Committees  pother Political Committees such as PACs)  OTAL CONTRIBUTION REFUNDS add Lines 20(a), (b), and (c))				
<b>6</b>	R DISBURSEMENTS		·		
温!	L DISBURSEMENTS Lines 17, 18, 19(c), 20(d), and 21)				
	III. CASH SU	MMARY ·			
23. CASH	ON HAND AT BEGINNING OF REPOR	[,,i.7.6.25]			
24 TOTA	_ RECEIPTS THIS PERIOD (from Line				
25. SUBT	OTAL (add Line 23 and Line 24)		17.6.25		
26. TOTA	L DISBURSEMENTS THIS PERIOD (from	m Line 22)			
	ON HAND AT CLOSE OF REPORTING act Line 26 from Line 25)	G PERIOD	1,76.25		

CHEDULE C (FEC	Form 3)		Use separate schedule(s) FOR LINE NUMBER:	FOR LINE NUMBER:				
NAME OF COMMITTEE (In Fu								
LOAN SOURCE Full Nam	A FOR.	SENATE						
LOAN SOURCE Full Nam	ne (Last, First, Mide	dle Initial)	☐ Memo Item					
DeTORA,	ANTHON	· ·	Primary					
Mailing Address	1 (10 14010	<u>'                                      </u>	General Other (specify) ▼	•				
23 ASH	CROFT	DRIVE						
City	cs Burg	State, A ZIP	Code  Personal Funds of the Candidate					
Original Amount of Loan		Cumulative Payment		s Perioc				
, 6,	96000	7,8-	, 6,960 es					
TERMS Date Incurre	ed	Date 0	Due Interest Rate Secured: (If none, enter 0)					
Ø7 137 1	WY 37 / ZWYY MM / DD / NONE (Intolle enter s) Wes X							
List All Endorsers or Gua	arantors (if any) to	Loan Source						
1. Full Name (Last, First,	Middle Initial)	-	Name of Employer	Name of Employer				
Mailing Address			Occupation					
			Amount Guaranteed	1				
City	State	ZIP Code	Outstanding:	į				
2. Full Name (Last, First, I	Middle Initial)		Name of Employer					
Mailing Address	··	,	Occupation					
			Amount					
City	State	ZIP Code	Guaranteed Outstanding:					
3. Full Name (Last, First,	Middle Initial)		Name of Employer					
Mailing Address	<del> </del>		Occupation					
	•		Amount					
City	State	ZIP Code	Guaranteed Outstanding:					
4. Full Name (Last, First,	Middle Initial)		Name of Employer					
Mailing Address	· · · · · · · · · · · · · · · · · · ·		Occupation					
City	State	ZIP Code	Amount Guaranteed	1				
			Outstanding:					
SUBTOTALS This Period Thi	s Page (optional)							
TOTALS This Period (last pa	ge in this line only	)						
Carry outstanding balance of	only to LINE 3, Sch	edule D, for this line	b. If no Schedule D, carry forward to appropriate line of Sum	ımary.				

#### PAGE Z OF SCHEDULE C (FEC Form 3) Use separate schedule(s) FOR LINE NUMBER: for each category of the 又13a **LOANS** (check only one) **Detailed Summary Page** 13b NAME OF COMMITTEE (In Full) Election: ☐ Memo Item Primary General Mailing Address Other (specify) City ZIP Code Personal Funds of the Candidate REDERICKSBURG Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period Date Incurred **TERMS** Date Due Interest Rate Secured: (If none, enter 0) % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Occupation Mailing Address **Amount** Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Occupation Mailing Address Amount Guaranteed ZIP Code City State Outstanding: SUBTOTALS This Period This Page (optional)-----TOTALS This Period (last page in this line only).....

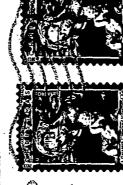
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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1056 FIRST STREET, N.E. WASHINGTON, DC 20463

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## **Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS** The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered** Postmarked **Date of Receipt USPS First Class Mail** 4-16-19 Postmarked (R/C) 4-12-19 **USPS** Registered/Certified Postmarked **USPS Priority Mail** Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): 4-16-19

DATE PREPARED

(3/2015)

PREPARER