

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

Joey Nations for Congress

ADDRESS (number and street)

1130 Nebraska Court NE

Check if different than previously reported. (ACC)

Salem

OR

97301

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00672477

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

OR

05

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

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

M M / D D / Y Y Y Y

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

M M / D D / Y Y Y Y

5. Covering Period

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

through

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Nations, Charlotte, , ,

Type or Print Name of Treasurer

Nations, Charlotte, , ,

Signature of Treasurer

[Electronically Filed]

Date

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Joey Nations for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	18939.38	35212.58
(b) Total Contribution Refunds (from Line 20(d))	0.00	4.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	18939.38	35208.58
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	16241.77	29730.32
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	16241.77	29730.32
8. Cash on Hand at Close of Reporting Period (from Line 27).....	5478.26	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Joey Nations for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	16146.53	24972.73
(ii) Unitemized	2792.85	10239.85
(iii) TOTAL of contributions from individuals	18939.38	35212.58
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	18939.38	35212.58
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	128.90
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	128.90
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	18939.38	35341.48

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	16241.77	29730.32
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	128.90
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	128.90
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	4.00
(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	4.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	16241.77	29863.22

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2780.65
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	18939.38
25. SUBTOTAL (add Line 23 and Line 24).....	21720.03
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	16241.77
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	5478.26

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 51
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Joey Nations for Congress

A. Full Name (Last, First, Middle Initial)
Booth, Sportsmans Warehouse, , ,

Mailing Address 1260 Lancaster Dr SE

City Salem State OR Zip Code 97317

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

Name of Employer Small Donor Fundraiser Occupation Small Donor Fundraiser

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
870.18

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 23 2019

Transaction ID : SA11AI.4801

Amount of Each Receipt this Period
870.18

Memo Item
Small Donor Fundraiser

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

Mailing Address 458 Eaglet St NW

City Salem State OR Zip Code 97304

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

Name of Employer State of Oregon Occupation Legal Assistant

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 01 2019

Transaction ID : SA11AI.4133

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 458 Eaglet St NW

City Salem State OR Zip Code 97304

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

Name of Employer State of Oregon Occupation Legal Assistant

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 01 2019

Transaction ID : SA11AI.4134

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 970.18

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.4801

No single contribution was over \$50.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 51
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

A. Full Name (Last, First, Middle Initial)
Brunhaver, Brad, , ,

Mailing Address 4845 83rd St SE

City Salem State OR Zip Code 97317

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

Name of Employer Marion County Fire District Occupation Firefighter

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 07 2019

Transaction ID : SA11AI.4135

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 4845 83rd St SE

City Salem State OR Zip Code 97317

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

Name of Employer Marion County Fire District Occupation Firefighter

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 18 2019

Transaction ID : SA11AI.4136

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 3069 NW Jewell Way

City Bend State OR Zip Code 97703

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

Name of Employer Owner Occupation Self-Employed

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 25 2019

Transaction ID : SA11AI.4148

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 51
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

A. Full Name (Last, First, Middle Initial)
Coleman, James, , ,

Mailing Address 376 Luther Street S

City Salem State OR Zip Code 97302

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

Name of Employer Owner Occupation Self-Employed

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
672.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 02 2019

Transaction ID : SA11AI.4150

Amount of Each Receipt this Period
372.00

Memo Item
In-kind - Engraving

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

Mailing Address 376 Luther Street S

City Salem State OR Zip Code 97302

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

Name of Employer Owner Occupation Self-Employed

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
672.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 31 2019

Transaction ID : SA11AI.4154

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 15121 S. Dales Ave

City Beaver creek State OR Zip Code 97004

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

Name of Employer Retired Occupation Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
370.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 18 2019

Transaction ID : SA11AI.4160

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 572.00

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

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

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

FOR LINE NUMBER: PAGE 9 OF 51
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

A. Full Name (Last, First, Middle Initial)
Coufal, Richard, , ,

Mailing Address 15121 S. Dales Ave

City: Beavercreek State: OR Zip Code: 97004

FEC ID number of contributing federal political committee: C

Name of Employer: Retired Occupation: Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 470.00

Date of Receipt: 08 / 16 / 2019

Transaction ID : SA11AI.4161

Amount of Each Receipt this Period: 100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Fair, Clackamas County, , ,

Mailing Address 694 NE 4th Ave

City: Canby State: OR Zip Code: 97013

FEC ID number of contributing federal political committee: C

Name of Employer: Small Donor Fundraiser Occupation: Small Donor Fundraiser

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 1269.60

Date of Receipt: 08 / 19 / 2019

Transaction ID : SA11AI.4794

Amount of Each Receipt this Period: 1269.60

Memo Item
Small Donor Fundraiser

C. Full Name (Last, First, Middle Initial)
Fair, Marion County, , ,

Mailing Address 2330 17th St NE

City: Salem State: OR Zip Code: 97301

FEC ID number of contributing federal political committee: C

Name of Employer: Small Donor Fundraiser Occupation: Small Donor Fundraiser

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 360.18

Date of Receipt: 07 / 13 / 2019

Transaction ID : SA11AI.4791

Amount of Each Receipt this Period: 360.18

Memo Item
Small Donor Fundraiser

SUBTOTAL of Receipts This Page (optional) ▶ 1729.78

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.4794

No single contribution was over \$50.

Form/Schedule: SA11AI

Transaction ID: SA11AI.4791

No single contribution was over \$50.

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 51
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

A. Full Name (Last, First, Middle Initial)
Fair, Oregon State, , ,

Mailing Address 2330 17th Street NE

City Salem State OR Zip Code 97301

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

Name of Employer Small Donor Fundraiser Occupation Small Donor Fundraiser

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1936.99

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 03 / 2019

Transaction ID : SA11AI.4799

Amount of Each Receipt this Period
1936.99

Memo Item
Small Donor Fundraiser

B. Full Name (Last, First, Middle Initial)
Festival, Toledo Summer, , ,

Mailing Address PO Box 717

City Toledo State OR Zip Code 97391

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

Name of Employer Small Donor Fundraiser Occupation Small Donor Fundraiser

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
553.99

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 29 / 2019

Transaction ID : SA11AI.4792

Amount of Each Receipt this Period
553.99

Memo Item
Small Donor Fundraiser

C. Full Name (Last, First, Middle Initial)
Fundraiser, 'Murica Drawing, , ,

Mailing Address 1656 S Beaver Creek Rd

City Oregon City State OR Zip Code 97045

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

Name of Employer Small Donor Fundraiser Occupation Small Donor Fundraiser

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
273.53

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 24 / 2019

Transaction ID : SA11AI.4795

Amount of Each Receipt this Period
273.53

Memo Item
Small Donor Fundraiser

SUBTOTAL of Receipts This Page (optional) ▶ 2764.51

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.4799

No single contribution was over \$50.

Form/Schedule: SA11AI

Transaction ID: SA11AI.4792

No single contribution was over \$50.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.4795

No single contribution was over \$50.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 51
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

A. Full Name (Last, First, Middle Initial)
Fundraiser, 12 Bridge Ciderworks, , ,

Mailing Address 19376 Molalla Ave
#130

City Oregon City State OR Zip Code 97045

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

Name of Employer Small Donor Fundraiser Occupation Small Donor Fundraiser

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2689.37

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 12 / 2019

Transaction ID : SA11AI.4793

Amount of Each Receipt this Period
2689.37

Memo Item
Small Donor Fundraiser

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

Mailing Address 6836 SE 134th Ave

City Portland State OR Zip Code 97236

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

Name of Employer Retired Occupation Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 10 / 2019

Transaction ID : SA11AI.4164

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 6836 SE 134th Ave

City Portland State OR Zip Code 97236

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

Name of Employer Retired Occupation Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
310.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 31 / 2019

Transaction ID : SA11AI.4171

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3389.37

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.4793

No single contribution was over \$50.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 51
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

A. Full Name (Last, First, Middle Initial)
Gemmell, Mary, , ,
 Mailing Address 6836 SE 134th Ave
 City Portland State OR Zip Code 97236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 330.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 23 / 2019
Transaction ID : SA11AI.4172
 Amount of Each Receipt this Period
 20.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Gemmell, Mary, , ,
 Mailing Address 6836 SE 134th Ave
 City Portland State OR Zip Code 97236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2019
Transaction ID : SA11AI.4173
 Amount of Each Receipt this Period
 20.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Hardiman, Rebecca, , ,
 Mailing Address 24850 NE Prairie View Drive
 City Aurora State OR Zip Code 97002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Owner Occupation Self-Employed
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 16 / 2019
Transaction ID : SA11AI.4177
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 90.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 51
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

A. Full Name (Last, First, Middle Initial)
Hardiman, Rebecca, , ,

Mailing Address 24850 NE Prairie View Drive

City Aurora State OR Zip Code 97002

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

Name of Employer Owner Occupation Self-Employed

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1400.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 29 2019

Transaction ID : SA11AI.4178

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 1851 Harvey St SE

City Jefferson State OR Zip Code 97352

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

Name of Employer Fred Meyer Occupation Retail Sales

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
404.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 17 2019

Transaction ID : SA11AI.4182

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 1851 Harvey St SE

City Jefferson State OR Zip Code 97352

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

Name of Employer Fred Meyer Occupation Retail Sales

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
454.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 26 2019

Transaction ID : SA11AI.4183

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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

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

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

FOR LINE NUMBER: PAGE 18 OF 51
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

A. Full Name (Last, First, Middle Initial)
Koloen, Alan, , ,
 Mailing Address P.O. Box 4171
 City Salem State OR Zip Code 97302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 02 / 2019
Transaction ID : SA11AI.4185
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Main, Margaret, , ,
 Mailing Address 5445 NW Burning Tree Court
 City Portland State OR Zip Code 97229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 09 / 2019
Transaction ID : SA11AI.4205
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Main, Margaret, , ,
 Mailing Address 5445 NW Burning Tree Court
 City Portland State OR Zip Code 97229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 16 / 2019
Transaction ID : SA11AI.4206
 Amount of Each Receipt this Period
 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 560.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 19 OF 51
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

A. Full Name (Last, First, Middle Initial)
Main, Margaret, , ,

Mailing Address 5445 NW Burning Tree Court

City: Portland State: OR Zip Code: 97229

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
235.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 22 / 2019

Transaction ID : SA11AI.4207

Amount of Each Receipt this Period
15.00

Memo Item

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

Mailing Address 5445 NW Burning Tree Court

City: Portland State: OR Zip Code: 97229

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 13 / 2019

Transaction ID : SA11AI.4208

Amount of Each Receipt this Period
15.00

Memo Item

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

Mailing Address 5445 NW Burning Tree Court

City: Portland State: OR Zip Code: 97229

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
265.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2019

Transaction ID : SA11AI.4209

Amount of Each Receipt this Period
15.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00

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

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

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

FOR LINE NUMBER: PAGE 20 OF 51
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

A. Full Name (Last, First, Middle Initial)
Manners, Steve, , ,

Mailing Address 6509 Littler Drve N

City Keizer State OR Zip Code 97303

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

Name of Employer Retired Occupation Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 30 2019

Transaction ID : SA11AI.4213

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 5850 Dove Court

City Lake Oswego State OR Zip Code 97035

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

Name of Employer Retired Occupation Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
925.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 08 2019

Transaction ID : SA11AI.4218

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 5850 Dove Court

City Lake Oswego State OR Zip Code 97035

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

Name of Employer Retired Occupation Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1025.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 12 2019

Transaction ID : SA11AI.4219

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 OF 51
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

A. Full Name (Last, First, Middle Initial)
McMillan, Diane, , ,

Mailing Address P.O. Box 3670

City: Sunriver State: OR Zip Code: 97707

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
265.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 01 / 2019

Transaction ID : SA11AI.4225

Amount of Each Receipt this Period
25.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Minato, David, P, ,

Mailing Address 11711 NE Brazee Street

City: Portland State: OR Zip Code: 97220

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
580.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 01 / 2019

Transaction ID : SA11AI.4235

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Minato, David, P, ,

Mailing Address 11711 NE Brazee Street

City: Portland State: OR Zip Code: 97220

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
780.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 24 / 2019

Transaction ID : SA11AI.4236

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 22 OF 51	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

A. Full Name (Last, First, Middle Initial)
Minato, David, P, ,

Mailing Address 11711 NE Brazee Street

City Portland	State OR	Zip Code 97220
------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
830.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 29 / 2019

Transaction ID : SA11AI.4237

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Minato, David, P, ,

Mailing Address 11711 NE Brazee Street

City Portland	State OR	Zip Code 97220
------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
930.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 08 / 2019

Transaction ID : SA11AI.4238

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Minato, David, P, ,

Mailing Address 11711 NE Brazee Street

City Portland	State OR	Zip Code 97220
------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1130.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 26 / 2019

Transaction ID : SA11AI.4239

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 23 OF 51
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

A. Full Name (Last, First, Middle Initial)
Minato, David, P, ,
Mailing Address 11711 NE Brazee Street

City Portland	State OR	Zip Code 97220
------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1230.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2019

Transaction ID : SA11AI.4240

Amount of Each Receipt this Period
 100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Oktoberfest, Mt. Angel, , ,
Mailing Address 5 N Garfield Street

City Mt. Angel	State OR	Zip Code 97362
-------------------	-------------	-------------------

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

Name of Employer Small Donor Fundraiser	Occupation Small Donor Fundraiser
--	--------------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1451.29

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 17 / 2019

Transaction ID : SA11AI.4800

Amount of Each Receipt this Period
 1451.29

Memo Item
Small Donor Fundraiser

C. Full Name (Last, First, Middle Initial)
Ortega, Sandra, , ,
Mailing Address 18921 S. Grasle Road

City Oregon City	State OR	Zip Code 97045
---------------------	-------------	-------------------

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

Name of Employer Owner	Occupation Self-Employed
---------------------------	-----------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2019

Transaction ID : SA11AI.4245

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1601.29
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.4800

No single contribution was over \$50.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 25 OF 51
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

A. Full Name (Last, First, Middle Initial)
Ortega, Sandra, , ,

Mailing Address 18921 S. Grasle Road

City Oregon City State OR Zip Code 97045

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

Name of Employer Owner Occupation Self-Employed

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
290.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 03 / 2019

Transaction ID : SA11AI.4246

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 18921 S. Grasle Road

City Oregon City State OR Zip Code 97045

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

Name of Employer Owner Occupation Self-Employed

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
340.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 06 / 2019

Transaction ID : SA11AI.4247

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 18921 S. Grasle Road

City Oregon City State OR Zip Code 97045

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

Name of Employer Owner Occupation Self-Employed

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
780.65

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 20 / 2019

Transaction ID : SA11AI.4248

Amount of Each Receipt this Period
440.65

Memo Item
In-kind - Travel

SUBTOTAL of Receipts This Page (optional)..... ▶ 540.65

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 26 OF 51	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

A. Full Name (Last, First, Middle Initial)
Rodeo Booth, St. Paul, , ,

Mailing Address P.O. Box 175

City St. Paul	State OR	Zip Code 97137
------------------	-------------	-------------------

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

Name of Employer Small Donor Fundraiser	Occupation Small Donor Fundraiser
--	--------------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1 2 3 4 5 6 7 8 9 0

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 05 / 2019

Transaction ID : SA11AI.4790

Amount of Each Receipt this Period
 , , . **1269.75**

Memo Item
Small Donor Fundraiser

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

Mailing Address 4652 Westlawn Ct SE

City Salem	State OR	Zip Code 97317
---------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1 2 3 4 5 6 7 8 9 0

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2019

Transaction ID : SA11AI.4258

Amount of Each Receipt this Period
 , , . **25.00**

Memo Item

C. Full Name (Last, First, Middle Initial)
Sutherland, B., Susan, ,

Mailing Address P.O. Box 564

City Dallas	State OR	Zip Code 97338
----------------	-------------	-------------------

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

Name of Employer Owner	Occupation Self-Employed
---------------------------	-----------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1 2 3 4 5 6 7 8 9 0

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 09 / 2019

Transaction ID : SA11AI.4263

Amount of Each Receipt this Period
 , , . **200.00**

Memo Item

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

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

, , . **1494.75**

, , .

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.4790

No single contribution was over \$50.

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 OF 51
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

A. Full Name (Last, First, Middle Initial)
Wellman, Mary, , ,

Mailing Address 3440 Cordon Rd NE

City Salem State OR Zip Code 97305

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

Name of Employer Healthy Back Chiropractic Occupation Massage Therapist

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
314.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 06 / 2019

Transaction ID : SA11AI.4271

Amount of Each Receipt this Period
314.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	314.00
TOTAL This Period (last page this line number only)..... ▶	16146.53

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 51	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

Full Name (Last, First, Middle Initial) A. 7-Eleven		Date of Disbursement
Mailing Address 1690 Market St NE		M M / D D / Y Y Y Y 07 / 04 / 2019
City Salem	State OR	Zip Code 97301
Purpose of Disbursement Office Supplies	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 7.39	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4932
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. 7-Eleven		Date of Disbursement
Mailing Address 1690 Market St NE		M M / D D / Y Y Y Y 07 / 19 / 2019
City Salem	State OR	Zip Code 97301
Purpose of Disbursement Food and/or beverage(s)	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 11.09	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4816
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. 7-Eleven		Date of Disbursement
Mailing Address 1690 Market St NE		M M / D D / Y Y Y Y 08 / 03 / 2019
City Salem	State OR	Zip Code 97301
Purpose of Disbursement Food and/or beverage(s)	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 11.74	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4833
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	30.22
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 51	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

Full Name (Last, First, Middle Initial) A. 7-Eleven			Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2019	
Mailing Address 1690 Market St NE			FEC Identification Number C	
City Salem	State OR	Zip Code 97301	Amount of Each Disbursement this Period 11.59	
Purpose of Disbursement Food and/or beverage(s)		Category/ Type	Transaction ID : SB17.4901	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Amazon.com			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2019	
Mailing Address 2111 7th Ave			FEC Identification Number C	
City Seattle	State WA	Zip Code 98121	Amount of Each Disbursement this Period 77.23	
Purpose of Disbursement Fundraising Supplies		Category/ Type	Transaction ID : SB17.4804	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Amazon.com			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2019	
Mailing Address 2111 7th Ave			FEC Identification Number C	
City Seattle	State WA	Zip Code 98121	Amount of Each Disbursement this Period 144.80	
Purpose of Disbursement Fundraising Supplies		Category/ Type	Transaction ID : SB17.4842	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	233.62
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 51	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

Full Name (Last, First, Middle Initial) A. Amazon.com		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2019
Mailing Address 2111 7th Ave		FEC Identification Number C
City Seattle	State WA	Zip Code 98121
Purpose of Disbursement Fundraising Supplies		Amount of Each Disbursement this Period 189.15
Candidate Name		Transaction ID : SB17.4892
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. AN Signs & Designs		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2019
Mailing Address 2990 Pringle Rd SE Suite 102		FEC Identification Number C
City Salem	State OR	Zip Code 97302
Purpose of Disbursement Printing: stickers		Amount of Each Disbursement this Period 150.00
Candidate Name		Transaction ID : SB17.4850
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) c. AN Signs & Designs		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2019
Mailing Address 2990 Pringle Rd SE Suite 102		FEC Identification Number C
City Salem	State OR	Zip Code 97302
Purpose of Disbursement Printing: stickers		Amount of Each Disbursement this Period 50.00
Candidate Name		Transaction ID : SB17.4907
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	389.15
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 51	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

Full Name (Last, First, Middle Initial) A. ARCO		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2019
Mailing Address 2979 Market Street NE		FEC Identification Number C
City Salem	State OR	Zip Code 97301
Purpose of Disbursement Travel;		Amount of Each Disbursement this Period 43.59
Candidate Name	Category/ Type	Transaction ID : SB17.4820
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. ARCO		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2019
Mailing Address 2979 Market Street NE		FEC Identification Number C
City Salem	State OR	Zip Code 97301
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 40.00
Candidate Name	Category/ Type	Transaction ID : SB17.4853
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. BLT Prime by David Burke		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2019
Mailing Address 1100 Pennsylvania Ave NW		FEC Identification Number C
City Washington	State DC	Zip Code 20004
Purpose of Disbursement Meal		Amount of Each Disbursement this Period 275.00
Candidate Name	Category/ Type	Transaction ID : SB17.4964
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	358.59
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 51	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

Full Name (Last, First, Middle Initial) A. Clackamas County Fair and Event Center			Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2019	
Mailing Address 694 NE 4th Ave			FEC Identification Number C	
City Canby	State OR	Zip Code 97013	Amount of Each Disbursement this Period 575.00	
Purpose of Disbursement Booth Fee		Category/ Type	Transaction ID : SB17.4809	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Coat of Arms			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2019	
Mailing Address 4190 River Road N			FEC Identification Number C	
City Keizer	State OR	Zip Code 97303	Amount of Each Disbursement this Period 76.37	
Purpose of Disbursement Fundraising Supplies		Category/ Type	Transaction ID : SB17.4848	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Coat of Arms			Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2019	
Mailing Address 4190 River Road N			FEC Identification Number C	
City Keizer	State OR	Zip Code 97303	Amount of Each Disbursement this Period 1310.00	
Purpose of Disbursement Fundraising Supplies		Category/ Type	Transaction ID : SB17.4868	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1961.37
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 51	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

Full Name (Last, First, Middle Initial) A. Coat of Arms			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2019	
Mailing Address 4190 River Road N			FEC Identification Number C	
City Keizer	State OR	Zip Code 97303	Amount of Each Disbursement this Period 103.14	
Purpose of Disbursement Fundraising Supplies		Category/Type	Transaction ID : SB17.4875	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Coleman, James, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2019	
Mailing Address 376 Luther Street S			FEC Identification Number C	
City Salem	State OR	Zip Code 97302	Amount of Each Disbursement this Period 372.00	
Purpose of Disbursement In-kind - Engraving		Category/Type	Transaction ID : SB17.4151	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Costco Wholesale			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2019	
Mailing Address 1010 Hawthorne Ave SE			FEC Identification Number C	
City Salem	State OR	Zip Code 97301	Amount of Each Disbursement this Period 358.97	
Purpose of Disbursement Campaign Event: Food and/or beverage(s)		Category/Type	Transaction ID : SB17.4959	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	834.11
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 51	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

Full Name (Last, First, Middle Initial) A. Costco Wholesale			Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2019	
Mailing Address 1010 Hawthorne Ave SE			FEC Identification Number C	
City Salem	State OR	Zip Code 97301	Amount of Each Disbursement this Period 56.94	
Purpose of Disbursement Office Supplies		Category/Type	Transaction ID : SB17.4878	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Costco Wholesale			Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2019	
Mailing Address 1010 Hawthorne Ave SE			FEC Identification Number C	
City Salem	State OR	Zip Code 97301	Amount of Each Disbursement this Period 300.00	
Purpose of Disbursement Campaign Event: Food and/or beverage(s)		Category/Type	Transaction ID : SB17.4961	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Creativity On!			Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2019	
Mailing Address 2686 Cherry Ave NE			FEC Identification Number C	
City Salem	State OR	Zip Code 97306	Amount of Each Disbursement this Period 750.00	
Purpose of Disbursement Embroidery: Hats		Category/Type	Transaction ID : SB17.4808	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1106.94
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 51	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

Full Name (Last, First, Middle Initial) A. Creativity On!			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2019	
Mailing Address 2686 Cherry Ave NE			FEC Identification Number C	
City Salem	State OR	Zip Code 97306	Amount of Each Disbursement this Period 750.00	
Purpose of Disbursement Embroidery: Hats		Category/ Type	Transaction ID : SB17.4839	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Creativity On!			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2019	
Mailing Address 2686 Cherry Ave NE			FEC Identification Number C	
City Salem	State OR	Zip Code 97306	Amount of Each Disbursement this Period 750.00	
Purpose of Disbursement Embroidery: Hats		Category/ Type	Transaction ID : SB17.4891	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. FedEx Office			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2019	
Mailing Address 2595 Commercial Street SE			FEC Identification Number C	
City Salem	State OR	Zip Code 97302	Amount of Each Disbursement this Period 26.19	
Purpose of Disbursement Office Supplies		Category/ Type	Transaction ID : SB17.4948	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1526.19
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 51	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

Full Name (Last, First, Middle Initial) A. FedEx Office			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2019	
Mailing Address 2595 Commercial Street SE			FEC Identification Number C	
City Salem	State OR	Zip Code 97302	Amount of Each Disbursement this Period 36.65	
Purpose of Disbursement Shipping		Category/ Type	Transaction ID : SB17.4811	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. FedEx Office			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2019	
Mailing Address 2595 Commercial Street SE			FEC Identification Number C	
City Salem	State OR	Zip Code 97302	Amount of Each Disbursement this Period 72.03	
Purpose of Disbursement Office Supplies		Category/ Type	Transaction ID : SB17.4950	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. FedEx Office			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2019	
Mailing Address 2595 Commercial Street SE			FEC Identification Number C	
City Salem	State OR	Zip Code 97302	Amount of Each Disbursement this Period 48.12	
Purpose of Disbursement Office Supplies		Category/ Type	Transaction ID : SB17.4949	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	156.80
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 51	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

Full Name (Last, First, Middle Initial) A. Fred Meyer Canby			Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2019	
Mailing Address 1401 SE 1st Ave			FEC Identification Number C	
City Canby	State OR	Zip Code 97013	Amount of Each Disbursement this Period 287.23	
Purpose of Disbursement Campaign Event: Food and/or beverage(s)		Category/ Type	Transaction ID : SB17.4955	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Fred Meyer Fuel			Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2019	
Mailing Address 3740 Market St NE			FEC Identification Number C	
City Salem	State OR	Zip Code 97301	Amount of Each Disbursement this Period 20.00	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : SB17.4857	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Fred Meyer Fuel			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2019	
Mailing Address 3740 Market St NE			FEC Identification Number C	
City Salem	State OR	Zip Code 97301	Amount of Each Disbursement this Period 88.88	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : SB17.4854	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	396.11
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 51	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

Full Name (Last, First, Middle Initial) A. Fred Meyer Salem			Date of Disbursement M M / D D / Y Y Y Y 07 / 04 / 2019	
Mailing Address 3740 Market Street NE			FEC Identification Number C	
City Salem	State OR	Zip Code 97301	Amount of Each Disbursement this Period 27.99	
Purpose of Disbursement Office Supplies		Category/Type	Transaction ID : SB17.4935	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Fred Meyer Salem			Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2019	
Mailing Address 3740 Market Street NE			FEC Identification Number C	
City Salem	State OR	Zip Code 97301	Amount of Each Disbursement this Period 244.86	
Purpose of Disbursement Campaign Event: Food and/or beverage(s)		Category/Type	Transaction ID : SB17.4958	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Fred Meyer Salem			Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2019	
Mailing Address 3740 Market Street NE			FEC Identification Number C	
City Salem	State OR	Zip Code 97301	Amount of Each Disbursement this Period 228.86	
Purpose of Disbursement Campaign Event: Food and/or beverage(s)		Category/Type	Transaction ID : SB17.4936	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	501.71
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 51	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

Full Name (Last, First, Middle Initial) A. Fred Meyer Salem			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2019	
Mailing Address 3740 Market Street NE			FEC Identification Number C	
City Salem	State OR	Zip Code 97301	Amount of Each Disbursement this Period 316.03	
Purpose of Disbursement Campaign Event: Food and/or beverage(s)			Transaction ID : SB17.4966	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Gameday Media			Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2019	
Mailing Address P.O. Box 2269			FEC Identification Number C	
City Lake Oswego	State OR	Zip Code 97035	Amount of Each Disbursement this Period 395.00	
Purpose of Disbursement Event Sponsor			Transaction ID : SB17.4871	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Godaddy.com			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2019	
Mailing Address 14455 N Hayden Road Suite 100			FEC Identification Number C	
City Scottsdale	State AZ	Zip Code 85260	Amount of Each Disbursement this Period 56.49	
Purpose of Disbursement Web Hosting			Transaction ID : SB17.4865	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	767.52
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 51	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

Full Name (Last, First, Middle Initial) A. Nations, Joey, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2019
Mailing Address 1130 Nebraska Court NE		FEC Identification Number C H8OR05206
City Salem	State OR	Zip Code 97301
Purpose of Disbursement Lodging reimbursement		Amount of Each Disbursement this Period 875.00
Candidate Name		Transaction ID : SB17.4968
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: OR	District: 05	

Full Name (Last, First, Middle Initial) B. Holiday Inn		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2019
Mailing Address 550 C. Street SW		FEC Identification Number C
City Washington	State DC	Zip Code 20024
Purpose of Disbursement Lodging for Campaign Event		Amount of Each Disbursement this Period 875.00
Candidate Name		Transaction ID : SB17.4968.0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) c. Ortega, Sandra, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2019
Mailing Address 18921 S. Grasl Road		FEC Identification Number C
City Oregon City	State OR	Zip Code 97045
Purpose of Disbursement In-kind - Travel		Amount of Each Disbursement this Period 440.65
Candidate Name		Transaction ID : SB17.4249
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	1315.65
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 51			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

Full Name (Last, First, Middle Initial) A. Rich's Gun Shop			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2019		
Mailing Address 10791 Oak St			FEC Identification Number C		
City Donald	State OR	Zip Code 97020	Amount of Each Disbursement this Period 534.99		
Purpose of Disbursement Fundraising Supplies		Category/Type	Transaction ID : SB17.4886		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Roth's Fresh Catering			Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2019		
Mailing Address 4895 Indian School Rd NE			FEC Identification Number C		
City Salem	State OR	Zip Code 97305	Amount of Each Disbursement this Period 250.00		
Purpose of Disbursement Room Rental Fee		Category/Type	Transaction ID : SB17.4837		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Roth's Fresh Catering			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2019		
Mailing Address 4895 Indian School Rd NE			FEC Identification Number C		
City Salem	State OR	Zip Code 97305	Amount of Each Disbursement this Period 250.00		
Purpose of Disbursement Campaign Event: Food and/or beverage(s)		Category/Type	Transaction ID : SB17.4963		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1034.99
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 51	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

Full Name (Last, First, Middle Initial) A. Safeway		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2019
Mailing Address 1265 Center Street		FEC Identification Number C
City Salem	State OR	Zip Code 97301
Purpose of Disbursement Campaign Event: Food and/or beverage(s)		Amount of Each Disbursement this Period 314.00
Candidate Name		Transaction ID : SB17.4953
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Safeway		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2019
Mailing Address 1265 Center Street		FEC Identification Number C
City Salem	State OR	Zip Code 97301
Purpose of Disbursement Office Supplies		Amount of Each Disbursement this Period 184.99
Candidate Name		Transaction ID : SB17.4937
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Safeway		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2019
Mailing Address 1265 Center Street		FEC Identification Number C
City Salem	State OR	Zip Code 97301
Purpose of Disbursement Office Supplies		Amount of Each Disbursement this Period 47.77
Candidate Name		Transaction ID : SB17.4938
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	546.76
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 51	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

Full Name (Last, First, Middle Initial) A. Safeway		Date of Disbursement
Mailing Address 1265 Center Street		M M / D D / Y Y Y Y 07 / 25 / 2019
City Salem	State OR	Zip Code 97301
Purpose of Disbursement Food and/or beverage(s)		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 11.48
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4934
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Safeway		Date of Disbursement
Mailing Address 1265 Center Street		M M / D D / Y Y Y Y 07 / 26 / 2019
City Salem	State OR	Zip Code 97301
Purpose of Disbursement Office Supplies		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 40.75
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4940
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) c. Safeway		Date of Disbursement
Mailing Address 1265 Center Street		M M / D D / Y Y Y Y 08 / 13 / 2019
City Salem	State OR	Zip Code 97301
Purpose of Disbursement Office Supplies		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 67.15
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4941
State: District:		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	119.38
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 51	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

Full Name (Last, First, Middle Initial) A. Safeway		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2019
Mailing Address 1265 Center Street		FEC Identification Number C
City Salem	State OR	Zip Code 97301
Purpose of Disbursement Office Supplies		Amount of Each Disbursement this Period 26.05
Candidate Name		Transaction ID : SB17.4933
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Safeway		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2019
Mailing Address 1265 Center Street		FEC Identification Number C
City Salem	State OR	Zip Code 97301
Purpose of Disbursement Campaign Event: Food and/or beverage(s)		Amount of Each Disbursement this Period 386.13
Candidate Name		Transaction ID : SB17.4962
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Safeway		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2019
Mailing Address 1265 Center Street		FEC Identification Number C
City Salem	State OR	Zip Code 97301
Purpose of Disbursement Office Supplies		Amount of Each Disbursement this Period 68.59
Candidate Name		Transaction ID : SB17.4908
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	480.77
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 51	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2019
Mailing Address 6305 Ulali Dr		FEC Identification Number C
City Keizer	State OR	Zip Code 97303
Purpose of Disbursement Office Supplies	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 62.89	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4946
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2019
Mailing Address 6305 Ulali Dr		FEC Identification Number C
City Keizer	State OR	Zip Code 97303
Purpose of Disbursement Office Supplies	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 68.17	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4952
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2019
Mailing Address 6305 Ulali Dr		FEC Identification Number C
City Keizer	State OR	Zip Code 97303
Purpose of Disbursement Office Supplies	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 58.21	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4869
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	189.27
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 51	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2019
Mailing Address 6305 Ulali Dr		FEC Identification Number C
City Keizer	State OR	Zip Code 97303
Purpose of Disbursement Office Supplies		Amount of Each Disbursement this Period 88.02
Candidate Name		Transaction ID : SB17.4947
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. T-Mobile		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2019
Mailing Address P.O. Box 37380		FEC Identification Number C
City Albuquerque	State NM	Zip Code 87176
Purpose of Disbursement Cell Phone Service		Amount of Each Disbursement this Period 218.50
Candidate Name		Transaction ID : SB17.4806
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. T-Mobile		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2019
Mailing Address P.O. Box 37380		FEC Identification Number C
City Albuquerque	State NM	Zip Code 87176
Purpose of Disbursement Web Services		Amount of Each Disbursement this Period 173.20
Candidate Name		Transaction ID : SB17.4831
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	479.72
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 51	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

Full Name (Last, First, Middle Initial) A. T-Mobile		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2019
Mailing Address P.O. Box 37380		FEC Identification Number C
City Albuquerque	State NM	Zip Code 87176
Purpose of Disbursement Cell Phone Service		Amount of Each Disbursement this Period 173.20
Candidate Name		Transaction ID : SB17.4889
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Tammy Mittig Kustom Shirtz with Attitude		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2019
Mailing Address 1930 Hampden Lane NE #19		FEC Identification Number C
City Salem	State OR	Zip Code 97305
Purpose of Disbursement Printing: Shirts		Amount of Each Disbursement this Period 139.89
Candidate Name		Transaction ID : SB17.4874
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Tammy Mittig Kustom Shirtz with Attitude		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2019
Mailing Address 1930 Hampden Lane NE #19		FEC Identification Number C
City Salem	State OR	Zip Code 97305
Purpose of Disbursement Printing: Shirts		Amount of Each Disbursement this Period 83.72
Candidate Name		Transaction ID : SB17.4894
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	396.81
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 51	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

Full Name (Last, First, Middle Initial) A. The Home Depot		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2019
Mailing Address 3021 Cherry Ave NE		FEC Identification Number C
City Salem	State OR	Zip Code 97303
Purpose of Disbursement Office Supplies		Amount of Each Disbursement this Period 56.62
Candidate Name		Transaction ID : SB17.4873
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. The Wild Hare Saloon		Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2019
Mailing Address 1656 S Beavercreek Rd		FEC Identification Number C
City Oregon City	State OR	Zip Code 97045
Purpose of Disbursement Campaign Event		Amount of Each Disbursement this Period 254.07
Candidate Name		Transaction ID : SB17.4823
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. Walmart		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2019
Mailing Address 1940 Turner Road		FEC Identification Number C
City Salem	State OR	Zip Code 97302
Purpose of Disbursement Office Supplies		Amount of Each Disbursement this Period 67.19
Candidate Name		Transaction ID : SB17.4942
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	377.88
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 51			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

Full Name (Last, First, Middle Initial) A. Walmart			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2019		
Mailing Address 1940 Turner Road			FEC Identification Number C		
City Salem	State OR	Zip Code 97302	Amount of Each Disbursement this Period 280.06		
Purpose of Disbursement Campaign Event: Food and/or beverage(s)		Category/Type	Transaction ID : SB17.4943		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Walmart			Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2019		
Mailing Address 1940 Turner Road			FEC Identification Number C		
City Salem	State OR	Zip Code 97302	Amount of Each Disbursement this Period 223.68		
Purpose of Disbursement Campaign Event: Food and/or beverage(s)		Category/Type	Transaction ID : SB17.4944		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Walmart			Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2019		
Mailing Address 1940 Turner Road			FEC Identification Number C		
City Salem	State OR	Zip Code 97302	Amount of Each Disbursement this Period 73.41		
Purpose of Disbursement Office Supplies		Category/Type	Transaction ID : SB17.4945		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	577.15
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 51			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Joey Nations for Congress

Full Name (Last, First, Middle Initial) A. Walmart			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2019		
Mailing Address 1940 Turner Road			FEC Identification Number C		
City Salem	State OR	Zip Code 97302	Amount of Each Disbursement this Period 169.62		
Purpose of Disbursement Office Supplies		Category/ Type	Transaction ID : SB17.4906		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	169.62
TOTAL This Period (last page this line number only).....▶	13950.33