

**FEC  
FORM 3**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

RECEIVED  
FEC MAIL CENTER  
2018 OCT 17 AM 7:56  
Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines.

12FE4M5

TONY DeTORA FOR SENATE

ADDRESS (number and street)

P.O. BOX 5026

Check if different than previously reported. (ACC)

FALMOUTH

VA

22406

CITY

STATE

ZIP CODE

2. **FEC IDENTIFICATION NUMBER**

C00555953

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE DISTRICT

VA

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

MM

DD

YYYYYY

in the State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

MM

DD

YYYYYY

in the State of

5. Covering Period

07

09

2018

through

09

30

2018

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

Type or Print Name of Treasurer

ANTHONY DeTORA

Signature of Treasurer

*[Handwritten Signature]*

Date

09

10

2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office Use Only

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

2018-10-17 09:17:00 DOCUMENT

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

TONY DeTORA FOR SENATE

Report Covering the Period: From:

To:

|  | COLUMN A<br>This Period               | COLUMN B<br>Election Cycle-to-Date |
|--|---------------------------------------|------------------------------------|
| 6. Net Contributions (other than loans)  |                                       |                                    |
| (a) Total Contributions (other than loans) (from Line 11(e))....                                   | <input type="text" value="0"/>        | <input type="text" value="0"/>     |
| (b) Total Contribution Refunds (from Line 20(d)).....  | <input type="text" value="0"/>        | <input type="text" value="0"/>     |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....                  | <input type="text" value="0"/>        | <input type="text" value="0"/>     |
| 7. Net Operating Expenditures  |                                       |                                    |
| (a) Total Operating Expenditures (from Line 17).....   | <input type="text" value="0"/>        | <input type="text" value="0"/>     |
| (b) Total Offsets to Operating Expenditures (from Line 14).....                                    | <input type="text" value="0"/>        | <input type="text" value="0"/>     |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....                            | <input type="text" value="0"/>        | <input type="text" value="0"/>     |
| 8. Cash on Hand at Close of Reporting Period (from Line 27).....                                   | <input type="text" value="176.25"/>   |                                    |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....  | <input type="text" value="0"/>        |                                    |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | <input type="text" value="9,200.00"/> |                                    |

**For further information contact:**

Federal Election Commission  
1050 First Street, N.E.  
Washington, DC 20463

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

NOTED TO THE COMMISSION

**DETAILED SUMMARY PAGE**

FEC Form 3 (Revised 05/2016)

of Receipts

Page 3

Write or Type Committee Name

Report Covering the Period: From:

MM ' DD ' YYYY  
07 ' 01 ' 2018

To:

MM ' DD ' YYYY  
09 ' 30 ' 2018

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

0

0

(ii) Unitemized.....

0

0

(iii) TOTAL of contributions from individuals ▶

0

0

(b) Political Party Committees.....

0

0

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

0

0

(d) The Candidate.....

0

0

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

0

0

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0

0

13. LOANS:

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

0

0

(b) All Other Loans.....

0

0

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0

0

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

0

0

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

0

0

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

0

0

UNION-1-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-100

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

Page 4

**II. DISBURSEMENTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

|   |   |   |
|---|---|---|
| 17. OPERATING EXPENDITURES.....                                     | 0 | 0 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....                  | 0 | 0 |
| 19. LOAN REPAYMENTS:  |   |   |
| (a) Of Loans Made or Guaranteed by the Candidate.....               | 0 | 0 |
| (b) Of All Other Loans .....  | 0 | 0 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....            | 0 | 0 |
| 20. REFUNDS OF CONTRIBUTIONS TO:                                    |   |   |
| (a) Individuals/Persons Other Than Political Committees .....       | 0 | 0 |
| (b) Political Party Committees.....                                 | 0 | 0 |
| (c) Other Political Committees (such as PACs).....                  | 0 | 0 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 0 | 0 |
| 21. OTHER DISBURSEMENTS.....  | 0 | 0 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►  | 0 | 0 |

**III. CASH SUMMARY**

|  |         |
|--|---------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                             | 1,762.5 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                         | 0       |
| 25. SUBTOTAL (add Line 23 and Line 24).....  | 1,762.5 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                            | 0       |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 1,762.5 |

NON-FEDERAL CAMPAIGN FINANCING

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full)

*TONY DeTORA FOR SENATE*

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

*DeTORA, ANTHONY*

Memo Item

Election:

Primary

General

Other (specify) ▼

Mailing Address

*23 ASHCROFT DRIVE*

City

*FREDERICKSBURG*

State

*VA*

ZIP Code

*22405*

Personal Funds of the Candidate

Original Amount of Loan

*696000*

Cumulative Payment To Date

*0*

Balance Outstanding at Close of This Period

*696000*

TERMS

Date Incurred

*MM* *DD* *YY*  
*01* *31* *2014*

*MM* *DD* *YY*

*MM* *DD* *YY*

*MM* *DD* *YY*

*MM* *DD* *YY*

*NONE*

Interest Rate

(If none, enter 0)

*0* % (apr)

% (apr)

Secured:

Yes

No

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

|  |       |          |   |  |  |
|--|-------|----------|---|--|--|
| 1. Full Name (Last, First, Middle Initial) |       |          | Name of Employer                        |  |  |
| Mailing Address                            |       |          | Occupation                              |  |  |
| City                                       | State | ZIP Code | Amount Guaranteed Outstanding: <i>0</i> |  |  |
| 2. Full Name (Last, First, Middle Initial) |       |          | Name of Employer                        |  |  |
| Mailing Address                            |       |          | Occupation                              |  |  |
| City                                       | State | ZIP Code | Amount Guaranteed Outstanding: <i>0</i> |  |  |
| 3. Full Name (Last, First, Middle Initial) |       |          | Name of Employer                        |  |  |
| Mailing Address                            |       |          | Occupation                              |  |  |
| City                                       | State | ZIP Code | Amount Guaranteed Outstanding: <i>0</i> |  |  |
| 4. Full Name (Last, First, Middle Initial) |       |          | Name of Employer                        |  |  |
| Mailing Address                            |       |          | Occupation                              |  |  |
| City                                       | State | ZIP Code | Amount Guaranteed Outstanding: <i>0</i> |  |  |

SUBTOTALS This Period This Page (optional).....▶

*0*

TOTALS This Period (last page in this line only).....▶

*0*

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

20140510 10:17:00 AM COMM-FORM

**SCHEDULE C (FEC Form 3)  
LOANS**

NAME OF COMMITTEE (In Full)  
*TONY DETORA FOR SENATE*

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  Memo Item **Election:**  
*DeTORA, ANTHONY*  Primary  
 Mailing Address  General  
*23 ASHCROFT DRIVE*  Other (specify) ▼  
 City State ZIP Code  Personal Funds of the Candidate  
*FREDERICKSBURG VA 22405*

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
*224000 0 224000*

**TERMS** Date Incurred Date Due Interest Rate (If none, enter 0) Secured:  
*06 06 2014 M M D D NONE 0 % (apr)*  Yes  No

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

| 1. Full Name (Last, First, Middle Initial) | Name of Employer                                    |
|--|---|
| Mailing Address                            | Occupation  |
| City State ZIP Code                        | Amount Guaranteed Outstanding: <input type="text"/> |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                                    |
| Mailing Address                            | Occupation  |
| City State ZIP Code                        | Amount Guaranteed Outstanding: <input type="text"/> |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                                    |
| Mailing Address                            | Occupation  |
| City State ZIP Code                        | Amount Guaranteed Outstanding: <input type="text"/> |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                                    |
| Mailing Address                            | Occupation  |
| City State ZIP Code                        | Amount Guaranteed Outstanding: <input type="text"/> |

**SUBTOTALS** This Period This Page (optional).....

**TOTALS** This Period (last page in this line only)..... *920000*

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

2018-10-17 10:00 AM 0000000000

P.O. Box 5026  
FARMINGTON, VA 22406

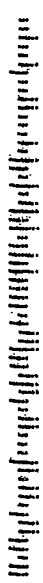
RECEIVED  
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2018 OCT 17 AM 7:54

FEDERAL ELECTION COMMISSION  
1050 FIRST ST, ~~NE~~ NE  
WASHINGTON, DC 20463

CAPITAL CITY  
13 OCT 2018



20463-



NOTES: INFORMATION DOCUMENT

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

20181017 08:00AM N200

|  |   |
|--|---|
| <input type="checkbox"/> Hand Delivered                                    | Date of Receipt   |
| <input checked="" type="checkbox"/> USPS First Class Mail                  | Postmarked <i>10/11/18</i><br>Date of Receipt <i>10/17/18</i> |
| <input type="checkbox"/> USPS Registered/Certified                         | Postmarked (R/C)  |
| <input type="checkbox"/> USPS Priority Mail                                | Postmarked  |
| <input type="checkbox"/> USPS Priority Mail Express                        | Postmarked  |
| <input type="checkbox"/> Postmark Illegible                                |   |
| <input type="checkbox"/> No Postmark                                       |   |
| <input type="checkbox"/> Overnight Delivery Service (Specify):             | Shipping Date   |
|  | Next Business Day Delivery <input type="checkbox"/>           |
| <input type="checkbox"/> Received from House Records & Registration Office | Date of Receipt   |
| <input type="checkbox"/> Received from Senate Public Records Office        | Date of Receipt   |
| <input type="checkbox"/> Received from Electronic Filing Office            | Date of Receipt   |
| <input type="checkbox"/> Other (Specify):                                  | Date of Receipt or Postmarked                                 |
| PREPARER <i>MP</i>   | <i>10/17/18</i><br>DATE PREPARED                              |