



**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**HUDSON FOR CONGRESS**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	4971.67	21204.03
(b) Total Contribution Refunds (from Line 20(d)) .....	1000.00	3200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	3971.67	18004.03
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	64012.28	136821.96
(b) Total Offsets to Operating Expenditures (from Line 14).....	383.04	383.07
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	63629.24	136438.89
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	230918.41	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	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

**HUDSON FOR CONGRESS**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1000.00	16450.00
(ii) Unitemized.....	1471.67	2254.03
(iii) TOTAL of contributions from individuals ▶	2471.67	18704.03
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2500.00	2500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	4971.67	21204.03
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	383.04	383.07
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	5354.71	21587.10

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	64012.28	136821.96
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	1000.00	1000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2200.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1000.00	3200.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	65012.28	140021.96

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	290575.98
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	5354.71
25. SUBTOTAL (add Line 23 and Line 24).....	295930.69
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	65012.28
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	230918.41

# 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 25  
(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)  
**HUDSON FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**HERSHEY CARR, JULIE, , ,**

Mailing Address 1735 FAIRVIEW AVE

City MC LEAN	State VA	Zip Code 22101-4709
-----------------	-------------	------------------------

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

Name of Employer KOUNToupES DENHAM CARR REID	Occupation CONSULTANT
---	--------------------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : A74DACC3B1C154DDD9BD**

Amount of Each Receipt this Period  
500.00

Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
15076.03

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : A36E7B5BC551E4BA198B**

Amount of Each Receipt this Period  
500.00

Memo Item  
INTERMEDIARY  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

**C.** Full Name (Last, First, Middle Initial)  
**SHAW, RHOD, , ,**

Mailing Address 524 FORT WILLIAMS PARKWAY

City ALEXANDRIA	State VA	Zip Code 22304-1849
--------------------	-------------	------------------------

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

Name of Employer ALPINE GROUP	Occupation CONSULTANT
----------------------------------	--------------------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : A2947682FCAC34F648A7**

Amount of Each Receipt this Period  
500.00

Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED

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

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

1000.00

# 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 6 OF 25	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)  
**HUDSON FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WINRED**

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
15076.03

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : A124E8E8941654021ACD**

Amount of Each Receipt this Period  
500.00

Memo Item  
INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1000.00

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

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

FOR LINE NUMBER: PAGE 7 OF 25  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**HUDSON FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BIOMARIN PHARMACEUTICAL INC. PAC (BIOMARIN PAC)**

Mailing Address 2350 KERNER BLVD  
STE 250

City SAN RAFAEL State CA Zip Code 94901-5596

FEC ID number of contributing federal political committee. **C** C00543371

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2020

Transaction ID : A54DA9931C3EB4FD2A1C

Amount of Each Receipt this Period  
2500.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2500.00

# 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 25  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 11d	<input type="checkbox"/> 15
<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)  
**HUDSON FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**FLS CONNECT**

Mailing Address 7300 HUDSON BOULEVARD N  
SUITE 270

City SAINT PAUL State MN Zip Code 55128-7143

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

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
383.04

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 16 / 2020

Transaction ID : A10D36313BCA94EB0BB3

Amount of Each Receipt this Period  
383.04

Memo Item  
REFUND

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	383.04
<b>TOTAL</b> This Period (last page this line number only).....▶	383.04



**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 9 OF 25			
	<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)  
**HUDSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ADP</b>		Date of Disbursement
Mailing Address 5860 NEW NORTHSIDE DRIVE		M M / D D / Y Y Y Y 11 / 30 / 2020
City ATLANTA	State GA	Zip Code 30328
Purpose of Disbursement PAYROLL TAXES	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 1157.02
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:	Transaction ID : B5F130D41DEF64551A3C <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ADP</b>		Date of Disbursement
Mailing Address 5860 NEW NORTHSIDE DRIVE		M M / D D / Y Y Y Y 12 / 15 / 2020
City ATLANTA	State GA	Zip Code 30328
Purpose of Disbursement PAYROLL TAXES	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 748.86
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:	Transaction ID : B5C33696DA9CB4813B98 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. ADP</b>		Date of Disbursement
Mailing Address 5860 NEW NORTHSIDE DRIVE		M M / D D / Y Y Y Y 12 / 28 / 2020
City ATLANTA	State GA	Zip Code 30328
Purpose of Disbursement PAYROLL FEES	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 32.00
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:	Transaction ID : B9706D3E335084213994 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1937.88
<b>TOTAL</b> 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 10 OF 25	
	<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)  
**HUDSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2020
Mailing Address 5860 NEW NORTHSIDE DRIVE		FEC Identification Number C
City ATLANTA	State GA	Zip Code 30328
Purpose of Disbursement PAYROLL TAXES	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 558.77
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. AMERICAN MEDIA &amp; ADVOCACY GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2020
Mailing Address 815 SLATERS LANE		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22314-1219
Purpose of Disbursement WEB HOSTING/E-MARKETING	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 530.89
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. ANDREWS, ROBERT, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2020
Mailing Address 401 OBERLIN RD APT 360		FEC Identification Number C
City RALEIGH	State NC	Zip Code 27605-1485
Purpose of Disbursement PAYROLL EXPENSE	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 2262.58
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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3352.24
<b>TOTAL</b> 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 11 OF 25			
	<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)  
**HUDSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ANDREWS, ROBERT, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2020		
Mailing Address 401 OBERLIN RD APT 360			FEC Identification Number C		
City RALEIGH	State NC	Zip Code 27605-1485	Amount of Each Disbursement this Period 1594.23		
Purpose of Disbursement PAYROLL EXPENSE		Category/ Type 001	Transaction ID : B97C1FBD5C8CC482F86E		
Candidate Name		Memo Item <input type="checkbox"/>			
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) <b>B. ANDREWS, ROBERT, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2020		
Mailing Address 401 OBERLIN RD APT 360			FEC Identification Number C		
City RALEIGH	State NC	Zip Code 27605-1485	Amount of Each Disbursement this Period 1594.23		
Purpose of Disbursement PAYROLL EXPENSE		Category/ Type 001	Transaction ID : B93A0DF22E14C415890C		
Candidate Name		Memo Item <input type="checkbox"/>			
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) <b>C. BEAVER, ASHLEY, MONROE, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2020		
Mailing Address 401 N CHURCH STREET APT. 501			FEC Identification Number C		
City CHARLOTTE	State NC	Zip Code 28202-1183	Amount of Each Disbursement this Period 15742.00		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : B0077E07B913544839E4		
Candidate Name		Memo Item <input type="checkbox"/>			
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	18930.46
<b>TOTAL</b> 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 12 OF 25	
	<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)  
**HUDSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2020	
Mailing Address 300 1ST STREET SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 390.01	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : BD3951298221C4333BE1	
Candidate Name		Memo Item <input type="checkbox"/>		
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) <b>B. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2020	
Mailing Address 300 1ST STREET SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 111.00	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : B3F1129F85D5B4537954	
Candidate Name		Memo Item <input type="checkbox"/>		
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) <b>C. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2020	
Mailing Address 300 1ST STREET SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 177.07	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : BB94309FB63714226BA5	
Candidate Name		Memo Item <input type="checkbox"/>		
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	678.08
<b>TOTAL</b> 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 13 OF 25			
	<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)  
**HUDSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CHICK-FIL-A</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2020		
Mailing Address 8020 CONCORD MILLS BOULEVARD			FEC Identification Number C		
City CONCORD	State NC	Zip Code 28027-4417	Amount of Each Disbursement this Period 20.68		
Purpose of Disbursement EVENT CATERING		Category/ Type 001	Transaction ID : BAD2EE584C2D24ADE91E		
Candidate Name		Memo Item <input type="checkbox"/>			
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) <b>B. CONVERGE COMMUNICATION TECHNOLOGIES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2020		
Mailing Address 8208 VILLAGE HARBOR DRIVE			FEC Identification Number C		
City CORNELIUS	State NC	Zip Code 28031-3706	Amount of Each Disbursement this Period 247.35		
Purpose of Disbursement PHONE SYSTEM		Category/ Type 001	Transaction ID : B2265E2E973544617806		
Candidate Name		Memo Item <input type="checkbox"/>			
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) <b>C. HOLTZMAN, VOGEL, JOSEFIK, PLLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2020		
Mailing Address 45 N HILL DRIVE			FEC Identification Number C		
City WARRENTON	State VA	Zip Code 20186-2676	Amount of Each Disbursement this Period 543.75		
Purpose of Disbursement LEGAL SERVICES		Category/ Type 001	Transaction ID : B98B76307BD2542089AE		
Candidate Name		Memo Item <input type="checkbox"/>			
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	811.78
<b>TOTAL</b> 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 14 OF 25			
	<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)  
**HUDSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. HUDSON, RICHARD, L., , JR.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2020		
Mailing Address PO BOX 5053			FEC Identification Number C		
City CONCORD	State NC	Zip Code 28027-1500	Amount of Each Disbursement this Period 1998.09		
Purpose of Disbursement SEE MEMO		Category/ Type 001	Transaction ID : <b>BBF8AD75E2E8C49088A6</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
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) <b>B. HERTZ RENTAL CAR</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2020		
Mailing Address 640 CONCORD PARKWAY N			FEC Identification Number C		
City CONCORD	State NC	Zip Code 28027-6034	Amount of Each Disbursement this Period 449.28		
Purpose of Disbursement GROUND TRANSPORTATION		Category/ Type 001	Transaction ID : <b>B8FA3B37B6EFB416994E</b>		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
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) <b>C. EMBASSY SUITES</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2020		
Mailing Address 201 HARRISON OAKS BOULEVARD			FEC Identification Number C		
City CARY	State NC	Zip Code 27513-5544	Amount of Each Disbursement this Period 739.73		
Purpose of Disbursement LODGING		Category/ Type 001	Transaction ID : <b>B0736E3AA15654018A49</b>		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1998.09
<b>TOTAL</b> 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 15 OF 25	
	<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)  
**HUDSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MARRIOTT HOTEL</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2020	
Mailing Address 500 E BROAD STREET			FEC Identification Number C	
City RICHMOND	State VA	Zip Code 23219-1812	Amount of Each Disbursement this Period 400.23	
Purpose of Disbursement LODGING		Category/ Type 001	Transaction ID : BA9011EE346914F89B12	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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) <b>B. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2020	
Mailing Address 5501 R C JOSH BIRMINGHAM PKWY			FEC Identification Number C	
City CHARLOTTE	State NC	Zip Code 28208	Amount of Each Disbursement this Period 404.10	
Purpose of Disbursement AIRFARE		Category/ Type 001	Transaction ID : B44320272576D496B8D0	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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) <b>C. HUDSON, RICHARD, L., , JR.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2020	
Mailing Address PO BOX 5053			FEC Identification Number C	
City CONCORD	State NC	Zip Code 28027-1500	Amount of Each Disbursement this Period 2139.77	
Purpose of Disbursement SEE MEMO		Category/ Type 001	Transaction ID : B55F4089E8D10487C97E	
Candidate Name		Memo Item <input type="checkbox"/>		
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2139.77
<b>TOTAL</b> 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 16 OF 25	
	<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)  
**HUDSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2020
Mailing Address 5501 R C JOSH BIRMINGHAM PKWY		FEC Identification Number C
City CHARLOTTE	State NC	Zip Code 28208
Purpose of Disbursement AIRFARE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 929.20	
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) ▼	Transaction ID : BF506CD3B912F479FA59
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. HERTZ RENTAL CAR</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2020
Mailing Address 640 CONCORD PARKWAY N		FEC Identification Number C
City CONCORD	State NC	Zip Code 28027-6034
Purpose of Disbursement GROUND TRANSPORTATION	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 1192.64	
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) ▼	Transaction ID : BE88C5553CE9542F0880
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. KS IMAGE SOLUTIONS LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2020
Mailing Address 4464 RACEWAY DR SW STE B		FEC Identification Number C
City CONCORD	State NC	Zip Code 28027-8911
Purpose of Disbursement OFFICE SUPPLIES	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 543.01	
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) ▼	Transaction ID : BE46C121D5EC34B2ABBB
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	543.01
<b>TOTAL</b> 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 17 OF 25			
	<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)  
**HUDSON FOR CONGRESS**

**A. MUST MEDIA**

Full Name (Last, First, Middle Initial)  
Mailing Address 4335 BIRDIE COURT

City MINT HILL State NC Zip Code 28227-9316

Purpose of Disbursement PRINTING & POSTAGE Category/Type 001

Candidate Name

Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 16 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 10982.57

Transaction ID : B4C4D4A71AD054EF8944

Memo Item

**B. ONMESSAGE INC.**

Full Name (Last, First, Middle Initial)  
Mailing Address 815 SLATERS LANE

City ALEXANDRIA State VA Zip Code 22314-1219

Purpose of Disbursement DIGITAL CONSULTING Category/Type 001

Candidate Name

Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 02 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 1000.00

Transaction ID : B918A09836D2749D4AD7

Memo Item

**C. PETTY OFFICERS MESS INC**

Full Name (Last, First, Middle Initial)  
Mailing Address 14900 PARK CENTRAL RD

City THURMONT State MD Zip Code 21788-1501

Purpose of Disbursement DONOR GIFTS - HATS AND SHIRTS Category/Type 001

Candidate Name

Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 14 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 868.35

Transaction ID : BB5430F253CE44707B32

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 12850.92

**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 18 OF 25			
	<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)  
**HUDSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
**A. PROFESSIONAL DATA SERVICES, INC.**

Mailing Address 824 S MILLEDGE AVE, STE 101

City ATHENS State GA Zip Code 30605-1332

Purpose of Disbursement COMPLIANCE SERVICES Category/Type 001

Candidate Name

Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 12 / 21 / 2020

FEC Identification Number C

Amount of Each Disbursement this Period 1853.35

Transaction ID : B2F4CFC4AB4BA4E13AE8

Memo Item

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

Mailing Address 3469 BLACK & DECKER ROAD

City HOPE MILLS State NC Zip Code 28348-9332

Purpose of Disbursement DIRECT MAIL PRODUCTION Category/Type 001

Candidate Name

Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 12 / 10 / 2020

FEC Identification Number C

Amount of Each Disbursement this Period 37.00

Transaction ID : B570C888A28B048B0BD3

Memo Item

Full Name (Last, First, Middle Initial)  
**C. STEELE, GREGORY, , ,**

Mailing Address 982 BREAKWATER DR

City ANNAPOLIS State MD Zip Code 21403-3494

Purpose of Disbursement PAYROLL EXPENSE Category/Type 001

Candidate Name

Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 11 / 30 / 2020

FEC Identification Number C

Amount of Each Disbursement this Period 617.28

Transaction ID : BCFD26477601B4A33855

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 2507.63

**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 19 OF 25			
	<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)  
**HUDSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. STEELE, GREGORY, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2020		
Mailing Address 982 BREAKWATER DR			FEC Identification Number C		
City ANNAPOLIS	State MD	Zip Code 21403-3494	Amount of Each Disbursement this Period 617.29		
Purpose of Disbursement PAYROLL EXPENSE		Category/ Type 001	Transaction ID : B8DC6A475F3CB4D99AE6		
Candidate Name		Memo Item <input type="checkbox"/>			
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) <b>B. TELLER, BRANDON, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2020		
Mailing Address 216 PIONEER WOODRUN ON TILLERY			FEC Identification Number C		
City MOUNT GILEAD	State NC	Zip Code 27306	Amount of Each Disbursement this Period 240.00		
Purpose of Disbursement FIELD CONSULTING		Category/ Type 001	Transaction ID : B0B8579DEEF6441C688A		
Candidate Name		Memo Item <input type="checkbox"/>			
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) <b>C. THE CONGRESSIONAL SPORTSMAN FOUNDATION</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2020		
Mailing Address 110 NORTH CAROLINA AVE SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003-1841	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement DUES & SUBSCRIPTIONS		Category/ Type 001	Transaction ID : B8A7725831B6D4CA1915		
Candidate Name		Memo Item <input type="checkbox"/>			
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1857.29
<b>TOTAL</b> 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 20 OF 25	
	<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)  
**HUDSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. THE LAYMONT GROUP</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2020	
Mailing Address 7 W MONROE AVE			FEC Identification Number C	
City ALEXANDRIA	State VA	Zip Code 22301-1919	Amount of Each Disbursement this Period 15000.00	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : B857B63B543BC4276B69	
Candidate Name		Memo Item <input type="checkbox"/>		
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) <b>B. USPS</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2020	
Mailing Address 455 CONCORD PARKWAY N			FEC Identification Number C	
City CONCORD	State NC	Zip Code 28027-6707	Amount of Each Disbursement this Period 45.35	
Purpose of Disbursement POSTAGE		Category/ Type 001	Transaction ID : B3FF3B706D4F3494E8D6	
Candidate Name		Memo Item <input type="checkbox"/>		
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) <b>C. USPS</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2020	
Mailing Address 455 CONCORD PARKWAY N			FEC Identification Number C	
City CONCORD	State NC	Zip Code 28027-6707	Amount of Each Disbursement this Period 150.00	
Purpose of Disbursement POSTAGE		Category/ Type 001	Transaction ID : BC53026FD19AB4938900	
Candidate Name		Memo Item <input type="checkbox"/>		
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	15195.35
<b>TOTAL</b> 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 21 OF 25	
	<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)  
**HUDSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2020
Mailing Address 455 CONCORD PARKWAY N		FEC Identification Number C
City CONCORD	State NC	Zip Code 28027-6707
Purpose of Disbursement POSTAGE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 150.35
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:	Transaction ID : B71518B90A5CE440C97E <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2020
Mailing Address 455 CONCORD PARKWAY N		FEC Identification Number C
City CONCORD	State NC	Zip Code 28027-6707
Purpose of Disbursement POSTAGE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 27.50
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:	Transaction ID : B37FC5FFB7B22485AA00 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2020
Mailing Address 8603 CONCORD MILLS BOULEVARD		FEC Identification Number C
City CONCORD	State NC	Zip Code 28027-5400
Purpose of Disbursement TELEPHONE SERVICES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 139.51
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:	Transaction ID : B76F4F24E3BDE4978BCA <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	317.36
<b>TOTAL</b> 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 22 OF 25	
	<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)  
**HUDSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219-1891
Purpose of Disbursement CC TRANSACTION FEES		001
Candidate Name WINRED		Category/ Type
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:	Amount of Each Disbursement this Period 3.43	
		Transaction ID : B8EF9065C341F418680E
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. WINRED</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219-1891
Purpose of Disbursement CC TRANSACTION FEES		001
Candidate Name WINRED		Category/ Type
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:	Amount of Each Disbursement this Period 20.48	
		Transaction ID : B580CBC07033E4BC287C
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. WINRED</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219-1891
Purpose of Disbursement CC TRANSACTION FEES		001
Candidate Name WINRED		Category/ Type
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:	Amount of Each Disbursement this Period 10.39	
		Transaction ID : B5D64C5A7C3894901AE5
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	34.30
<b>TOTAL</b> 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 23 OF 25	
	<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)  
**HUDSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219-1891
Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001	Amount of Each Disbursement this Period 40.37
Candidate Name WINRED	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:	Transaction ID : B9EF63CA8C8E442D08A9 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. WINRED</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219-1891
Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001	Amount of Each Disbursement this Period 14.18
Candidate Name WINRED	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:	Transaction ID : B2ED2C5C7B75E43B7BCE <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. WINRED</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219-1891
Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001	Amount of Each Disbursement this Period 13.83
Candidate Name WINRED	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:	Transaction ID : BA1110BCD1B0D43DFBF3 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	68.38
<b>TOTAL</b> 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 24 OF 25			
	<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)  
**HUDSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2020		
Mailing Address PO BOX 9891			FEC Identification Number C C00694323		
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Disbursement this Period 41.48		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : B2618C288DB3A4B37A1E		
Candidate Name WINRED		Memo Item <input type="checkbox"/>			
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) <b>B.</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	Memo Item <input type="checkbox"/>		
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) <b>C.</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	Memo Item <input type="checkbox"/>		
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: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	41.48
<b>TOTAL</b> This Period (last page this line number only).....▶	63264.02



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**HUDSON FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MDH HOLDINGS LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2020		
Mailing Address 210 MAGNOLIA SQUARE CT			FEC Identification Number C		
City ABERDEEN	State NC	Zip Code 28315-2226	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement REFUND		Category/ Type 010	Transaction ID : B345B675586314E5DB76		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:    District:					

Full Name (Last, First, Middle Initial) <b>B.</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	Memo Item <input type="checkbox"/>		
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) <b>C.</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	Memo Item <input type="checkbox"/>		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1000.00