01/04/2021 08 : 57

PAGE 1 / 13

FEC FORM 3		ND DIS	OF RE BURSE	MENTS			Office Use Only
1. NAME OF COMMITTEE (in	full)	PE OR PRINT		xample: If typin ver the lines.	g, type	12FE4M5	
	ongress						
ADDRESS (number ar	1	5 Halifax Ct					
Check if dir than previo reported. (A	usly	Marlton				NJ	D8053
2. FEC IDENTIFIC	CATION NUM	BER V	CITY 🔺		S	STATE 🔺	ZIP CODE
C C0055528			3. IS THIS REPORT	× NEW (N)	OR	AMENDE (A)	ED STATE ▼ DISTRICT
	eports: 5 Quarterly Rep	ort (Q1)	(b) 12-Day PR	E -Election Repo Primary (12P) Convention (General (12 Special (12	
	Quarterly Rep r 15 Quarterly		Election or	n M M /	D D /	Y Y Y Y	in the State of
X January	/ 31 Year-End I	Report (YE)	(c) 30-Day PO	ST -Election Rep General (30G		Runoff (30F	R) Special (30S)
Termina	ation Report (TE	ER)	Election or	n/	D D /	Y Y Y Y	in the State of
5. Covering Period	M M 11	/ D D /	Y Y Y Y 2020	through	M M 12	/ D D / 31	Y Y Y Y 2020
I certify that I have e Type or Print Name		Report and to t Curtis, Elizabet		knowledge and i	belief it is tru	ue, correct and	complete.
Signature of Treasure		Elizabeth, , ,		[Electronically]	Filed] D	o1	/ D D / Y Y Y Y 04 / 2021
NOTE: Submission of	false, erroneou	s, or incomplete	information may	subject the per	son signing tl	his Report to the	e penalties of 52 U.S.C. §30109.
Office Use Only							FEC FORM 3 (Revised 05/2016)

Ima	age# 202101049394495672		
	FEC Form 3 (Revised 05/2016)	SUMMARY PAGE of Receipts and Disbursements	PAGE 2 / 13
	Vrite or Type Committee Name _onegan for Congress		
R	eport Covering the Period: From:	M / D D / Y Y Y Y 24 / 2020 To:	M 12 / D D / Y Y Y Y 31 / 2020
		COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net Contributions (other than loans)		
	(a) Total Contributions (other than loans) (from Line 11(e))	0.00	741348.94
	(b) Total Contribution Refunds (from Line 20(d))	0.00	12375.00
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	728973.94
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	0.00	1241932.28
	(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	722.29
	(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	0.00	1241209.99
8.	Cash on Hand at Close of Reporting Period (from Line 27)	0.00	
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		

For further information contact:

Schedule C and/or Schedule D).....

342452.23

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

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

Image# 202101049394495673		
	DETAILED SUMMARY PAGE	_
FEC Form 3 (Revised 05/2016)	of Receipts	PAGE 3 / 13
Write or Type Committee Name		
Lonegan for Congress		
Report Covering the Period: From:	M / D D / Y Y Y Y 1 24 2020 To:	M M / D D / Y Y Y Y 12 31 2020
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)	0.00	275000.48
(ii) Unitemized	0.00	448933.46
(iii) TOTAL of contributions		
from individuals	0.00	723933.94
(b) Political Party Committees	0.00	65.00
(c) Other Political Committees	, , , , , , , , , , , , , , , , , , , ,	
(such as PACs)	0.00	14750.00
(d) The Candidate	0.00	2600.00
(e) TOTAL CONTRIBUTIONS	, , ,	, ,
(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	741348.94
12. TRANSFERS FROM OTHER	0.00	0.00
AUTHORIZED COMMITTEES	7 7 7 0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	0.00	496500.00
Gandidate		
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	496500.00
		5 5 A
14. OFFSETS TO OPERATING		
EXPENDITURES (Refunds, Rebates, etc.)	0.00	722.29
i	7 7 7	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
15. OTHER RECEIPTS	0.00	25100.59
(Dividends, Interest, etc.)	y y w	
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15)		
(Carry Total to Line 24, page 4)	0.00	1263671.82

of Disbursements PAGE 4 / 13 FEC Form 3 (Revised 05/2016) COLUMN A COLUMN B **II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 0.00 1241932.28 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 0.00 by the Candidate..... 0.00 0.00 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 0.00 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other (a) 0.00 12375.00 Than Political Committees 0.00 0.00 (b) Political Party Committees..... Other Political Committees (c) 0.00 0.00 (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS 0.00 12375.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 0.00 1254307.28

DETAILED SUMMARY PAGE

(add Lines 17, 18, 19(c), 20(d), and 21)

Image# 202101049394495674

III. CASH SUMMARY

23.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD		7	_	7	_	0.00
24	TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)		7	_	7	-	0.00
25.	SUBTOTAL (add Line 23 and Line 24)		7		7	-	0.00
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	[]	7	_	7	-	0.00
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		7		7	_	0.00

huge# 2021010400044000				[
CHEDULE C (F	EC Form 3)			Use separate schedul for each category of Detailed Summary Pa	the (check only one) × 13a
AME OF COMMITTEE (_onegan for Cong	,			Transa	ction ID : SC/10.4502
LOAN SOURCE Full Lonegan, Steve	Name (Last, First, Mic N, , ,	ddle Initial)		Memo Item	Election: 2014
Mailing Address 212 Larch Ave					Other (specify)
City Bogota		State NJ	ZIP Cod 07603	e	Personal Funds of the Candidate
Original Amount of L	oan	Cumulative Pa	lyment To [Date Bal	ance Outstanding at Close of This Perio
	100000.00		,	0.00	50000.00
TERMS Date I	ncurred	[Date Due	Interest Rat (If none, ente	
^M 05 ^M / ^D 09 ^D	′ <u>Y</u> Ž01 <i>4</i> Y	M M / D D	[/] ^Y 12/	31/2Ŏ14 ^Ÿ 0	0.00 ₩ (apr) Yes ¥ No
List All Endorsers or	r Guarantors (if any) t	o Loan Source			
1. Full Name (Last, F	First, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y
2. Full Name (Last, F	irst, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
3. Full Name (Last, F	irst, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, F	irst, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y
SUBTOTALS This Period					50000.00
Carry outstanding balar	nce only to LINE 3, Sch	nedule D, for thi	s line. If n	o Schedule D, carry for	ward to appropriate line of Summary.

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: SC/10 Transaction ID : SC/10.4502

(Current loan amount of 50000.00 from a balance of 100000.00 has been forgiven per candidate letter dated 11/24/2014)

Form/Schedule: Transaction ID:

I

CHEDULE C (FEC For DANS ME OF COMMITTEE (In Full) onegan for Congress LOAN SOURCE Full Name (La Lonegan, Steven, , , Mailing Address 212 Larch Ave		dle Initial)		Use separate schedul for each category of t Detailed Summary Pa Transa	the (check only one) X 13a
onegan for Congress LOAN SOURCE Full Name (La Lonegan, Steven, , , Mailing Address	ast, First, Mic	Idle Initial)		Transa	ction ID : SC/10.4499
Lonegan, Steven, , ,	ast, First, Mic	Idle Initial)			
Mailing Address				Memo Item	Election: 2014
Mailing Address 212 Larch Ave					Y Primary General
					Other (specify)
City		State	ZIP Code	Э	
Bogota		NJ	07603		Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pa	ayment To D	Date Bala	ance Outstanding at Close of This Peric
	0000.00			0.00	100000.00
TERMS Date Incurred		I	Date Due	Interest Rat	
M05 ^M / D16 ^D / Y Ž0)14 ^Y	M M / D C	⁷ 12/3	(If none, ente š1/2Ŏ14 [×] 0	.00
List All Endorsers or Guarant	ors (if any) to	o Loan Source	•		
1. Full Name (Last, First, Mido	dle Initial)			Name of Employer	
Mailing Address				Occupation	
				Amount Guaranteed	
City	State	ZIP Code			- 19. I I 19. I I 19. I
2. Full Name (Last, First, Middl	e Initial)			Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State	ZIP Code		Guaranteed	y
3. Full Name (Last, First, Middl	e Initial)			Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State	ZIP Code		Guaranteed Outstanding:	g
4. Full Name (Last, First, Middl	e Initial)			Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State	ZIP Code		Guaranteed Outstanding:	9
UBTOTALS This Period This Pa	ge (optional)		·····	······ [100000.00
OTALS This Period (last page in	this line only	/)		······	· · · · · · · · · · ·

CHEDULE C (FEC	Form 3)			Use separate schedule for each category of th	
UANO				Detailed Summary Pag	
ME OF COMMITTEE (In Fu	,			Transact	tion ID : SC/10.4501
LOAN SOURCE Full Nan	•	dle Initial)		Memo Item	Election: 2014
Lonegan, Steven, ,	,				Y Primary General
Mailing Address 212 Larch Ave					Other (specify) v
City		State	ZIP Code)	
Bogota		NJ	07603		Personal Funds of the Candidate
Original Amount of Loan	100000.00	Cumulative Pay	yment To D	ate Balar 0.00	nce Outstanding at Close of This Perio 100000.00
TERMS Date Incurr	ed		Date Due	Interest Rate	
^M 05 ^M / ^D 23 ^D /	YŽ01Ă Y	M M / D D	[/] ^v 12/3	(If none, enter 0.00000000000000000000000000000000000	
List All Endorsers or Gua	arantors (if any) to	Loan Source			
1. Full Name (Last, First,	Middle Initial)		1	Name of Employer	
Mailing Address			(Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	7
2. Full Name (Last, First,	Middle Initial)		I	Name of Employer	
Mailing Address			(Occupation	
	I	1		Amount Guaranteed	
City	State	ZIP Code			y
3. Full Name (Last, First,	Middle Initial)		1	Name of Employer	
Mailing Address			(Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y
4. Full Name (Last, First,	Middle Initial)		1	Name of Employer	
Mailing Address			(Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 y 1 y 1
UBTOTALS This Period Thi	s Page (optional)				100000.00
				<u> </u>	, , , , , , , , , , , , , , , , , , , ,
OTALS This Period (last pa	ae in this line only	٠		N	250000.00

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS Excluding Loans NAME OF COMMITTEE (In Full) Lonegan for Congres A. Full Name (Last, First, Middle Initial) of De Base Connect, Inc. Mailing Address 1155 15th St NW Suite 410		ditor	(Use separate schedule(s) for each numbered line) Nature of D Fundraisin	PAGE 9 OF 13 FOR LINE NUMBER: (check only one) 9 X 10 Pebt (Purpose): 9
City	State	Zip Code		
Washington	DC	20005		
Outstanding Balance Beginning This Period	1		Iransacti	on ID : SD10.4539
5725.37				
Amount Incurred This Period		Payment This Period		ng Balance at Close of This Period
0.00		0.	00	5725.37
B. Full Name (Last, First, Middle Initial) of De Base Connect, Inc.	btor or Cred	litor	Nature of D Fundraisin	lebt (Purpose): g
Mailing Address 1155 15th St NW Suite 410	1			
City Washington	State DC	Zip Code 20005		
Outstanding Balance Beginning This Period 30605.27 Amount Incurred This Period 0.00		9 9		on ID : SD10.4524 ng Balance at Close of This Period 30605.27
C. Full Name (Last, First, Middle Initial) of D Consolidated Mailing Services Mailing Address 504 Shaw Rd		ditor	Nature of D Fundraisin	ebt (Purpose): g
Suite 206 City	State	Zip Code		
Sterling	VA	20166		
Outstanding Balance Beginning This Perioc 225.62	1		Transact	ion ID : SD10.4541
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
			00	225.62
1) SUBTOTALS This Period This Page (optiona	ll)		···· ►	36556.26
2) TOTALS This Period (last page this line num	ber only)		····· •	7
3) TOTAL OUTSTANDING LOANS from Sched	ule C (last p	age only)	···· •	7 7 7 7
4) ADD 2) and 3) and carry forward to appropriate the appropriate the second se	riate line of S	Summary Page (last page o		

FEC Schedule D (Form 3) (Revised 05/2016)

SCHEDULE D (FEC Form 3)			(Use separate	PAGE 10 OF 13
DEBTS AND OBLIGATIONS Excluding Loans			schedule(s) for each numbered line)	FOR LINE NUMBER: (check only one) 9 X 10
NAME OF COMMITTEE (In Full)				
Lonegan for Congres	S			
A. Full Name (Last, First, Middle Initial) of D Consolidated Mailing Services		itor	Nature of D Fundraisin	ebt (Purpose): g
Mailing Address 504 Shaw Rd Suite 206				
City Sterling	State VA	Zip Code 20166		
Outstanding Balance Beginning This Period	I		Transacti	on ID : SD10.4552
5769.48				
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
0.00			00	, 5769.48
B. Full Name (Last, First, Middle Initial) of De	btor or Credit	tor	Noture of D	habt (Durnaga);
Consolidated Mailing Services			Fundraising	lebt (Purpose): g
Mailing Address 504 Shaw Rd Suite 206				
City Sterling	State VA	Zip Code 20166		
Outstanding Balance Beginning This Period	 		Transacti	on ID : SD10.4555
5532.90				
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
0.00		7 7 7	00	5532.90
C. Full Name (Last, First, Middle Initial) of D Consolidated Mailing Services		itor	Nature of D Fundraisin	ebt (Purpose): g
Mailing Address 504 Shaw Rd Suite 206				
City	State	Zip Code		
Sterling	VA	20166	— ———————————————————————————————————	
Outstanding Balance Beginning This Period			Transact	ion ID : SD10.4583
9421.05 Amount Incurred This Period		Payment This Period	Qutatandi	ng Balance at Close of This Period
0.00			00	9421.05
1) SUBTOTALS This Period This Page (optiona	l)		···· • •	, 20723.43
2) TOTALS This Period (last page this line num	iber only) ·····		— ► <u> </u>	
3) TOTAL OUTSTANDING LOANS from Sched	ule C (last pa	age only)	···· • L	7
4) ADD 2) and 3) and carry forward to appropriate	riate line of S	ummary Page (last page o	only) 🕨	- y

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS Excluding Loans NAME OF COMMITTEE (In Full) Lonegan for Congress A. Full Name (Last, First, Middle Initial) of De Consolidated Mailing Services	btor or Cred	itor	(Use separate schedule(s) for each numbered line) Nature of D Fundraisin	PAGE 11 OF 13 FOR LINE NUMBER: (check only one) 9 X 10 Pebt (Purpose): g
Mailing Address 504 Shaw Rd Suite 206 City	State	Zip Code		
Sterling	VA	20166		
Outstanding Balance Beginning This Period			Transaction	on ID : SD10.4811
14548.45				
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
0.00		0.	00	14548.45
y y x		9 9 7		y y
B. Full Name (Last, First, Middle Initial) of Del Integram	otor or Credit	or	Nature of D Fundraisin	lebt (Purpose): g
Mailing Address 22695 Commerce Center Ct				
City Dulles	State VA	Zip Code 20166		
Outstanding Balance Beginning This Period 7661.09 Amount Incurred This Period 0.00		Payment This Period 0.		on ID : SD10.4548 ng Balance at Close of This Period 7661.09
C. Full Name (Last, First, Middle Initial) of De Legacy Lists Inc - Brokerage	ebtor or Cred	itor	Nature of D Fundraisin	ebt (Purpose): g
Mailing Address 1155 - 15th Street NW				
Suite 410 City	State	Zip Code		
Washington	DC	20005		
Outstanding Balance Beginning This Period			Transact	ion ID : SD10.4514
1199.54				
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
0.00		7 7 7	00	1199.54
1) SUBTOTALS This Period This Page (optional)			23409.08
2) TOTALS This Period (last page this line num	ber only) ······		… ▶	
3) TOTAL OUTSTANDING LOANS from Schedu	ule C (last pa	ige only)		
4) ADD 2) and 3) and carry forward to appropr	iate line of S	ummary Page (last page o		· · · · · · · · · · · · · · · · · · ·

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DEBTS AND OBLIGATIONS			(Use separate schedule(s)	PAGE 12 OF 13 FOR LINE NUMBER:	
			for each numbered line)	(check only one) 9 X 10	
NAME OF COMMITTEE (In Full)			-		
Lonegan for Congres	S				
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Legacy Lists Inc - Brokerage				Nature of Debt (Purpose): Fundraising	
Mailing Address 1155 - 15th Street NW Suite 410					
City Washington	State DC	Zip Code 20005			
Outstanding Balance Beginning This Period	Outstanding Balance Beginning This Period				
5793.47					
Amount Incurred This Period	F	ayment This Period	Outstandi	ng Balance at Close of This Period	
0.00	,	0.0	00	5793.47	
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor				ebt (Purpose):	
Legacy Lists Inc - Brokerage	Legacy Lists Inc - Brokerage			g	
Mailing Address 1155 - 15th Street NW Suite 410					
City Washington	State DC	Zip Code 20005			
Outstanding Balance Beginning This Period	I	1	Transacti	on ID : SD10.4547	
1813.69					
Amount Incurred This Period	F	ayment This Period	Outstandi	ng Balance at Close of This Period	
0.00		0.0	00	1813.69	
C. Full Name (Last, First, Middle Initial) of De	btor or Creditor	ſ	Nature of D	lebt (Purpose):	
Legacy Lists Inc Mgmt			Fundraisin		
Mailing Address 1155- 15th St NW					
City	State	Zip Code			
Washington	DC	20005			
Outstanding Balance Beginning This Period			Transact	ion ID : SD10.4535	
1884.93					
Amount Incurred This Period	F	ayment This Period	Outstandi	ng Balance at Close of This Period	
0.00		0.0	00	1884.93	
1) SUBTOTALS This Period This Page (optional)			9492.09	
2) TOTALS This Period (last page this line num	···· • [, ,			
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)					
4) ADD 2) and 3) and carry forward to appropri	ate line of Sum	mary Page (last page or		· · · · · · · · · · · · · · · · · · ·	

FEC Schedule D (Form 3) (Revised 05/2016)

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS Excluding Loans	(Use separate schedule(s) for each numbered line)	PAGE13OF13FOR LINE NUMBER: (check only one)99X10				
Lonegan for Congres	S					
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Legacy Lists Inc Mgmt				Nature of Debt (Purpose): Fundraising		
Mailing Address 1155- 15th St NW						
City Washington	State DC	Zip Code 20005				
Outstanding Balance Beginning This Period	d		Transactio	on ID : SD10.4540		
2271.37						
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Perioc		
0.00		0.0	00	, 2271.37		
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of D	ebt (Purpose):		
Mailing Address						
City	State	Zip Code				
Outstanding Balance Beginning This Period Amount Incurred This Period	 	Payment This Period	Outstandi	ng Balance at Close of This Perioc		
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor				ebt (Purpose):		
Mailing Address						
City	State	Zip Code				
Outstanding Balance Beginning This Period Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period		
1) SUBTOTALS This Period This Page (optional	al)		···· •	2271.37		
2) TOTALS This Period (last page this line number only)				92452.23		
B) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				250000.00		
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				342452.23		

FEC	Schedule	D	(Form	3)	(Revised	05/2016)
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