

# 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

FRIENDS OF MATT TRUONG

ADDRESS (number and street)

207 E STAUNTON AVE

Check if different than previously reported. (ACC)

STERLING

VA

20164

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00728808

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

VA

10

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

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y 2020

through

M M /

D D /

Y Y Y Y 2020

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

Jackson, Stephen, C, ,

Type or Print Name of Treasurer

Jackson, Stephen, C, ,

Signature of Treasurer

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y 2020

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  
**FRIENDS OF MATT TRUONG**

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))....	1695.00	110791.58
(b) Total Contribution Refunds (from Line 20(d)) .....	46351.00	46351.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	- 44656.00	64440.58
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	2968.25	11775.15
(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)).....	2968.25	11775.15
8. Cash on Hand at Close of Reporting Period (from Line 27).....	44924.20	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

**FRIENDS OF MATT TRUONG**

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).....	475.00	96536.00
(ii) Unitemized.....	1220.00	11955.58
(iii) TOTAL of contributions from individuals ▶	1695.00	108491.58
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2300.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	1695.00	110791.58
<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	9814.51
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	9814.51
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	800.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	1695.00	121406.09

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 21

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	2968.25	11775.15
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	7210.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	7000.00	9814.51
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	7000.00	9814.51
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	46351.00	46351.00
(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)).....	46351.00	46351.00
21. OTHER DISBURSEMENTS .....	1237.95	1331.23
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	57557.20	76481.89

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	100786.40
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1695.00
25. SUBTOTAL (add Line 23 and Line 24).....	102481.40
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	57557.20
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	44924.20

# 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 21  
(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)  
**FRIENDS OF MATT TRUONG**

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

Mailing Address 7263 Tinsley Way

City Manassas State VA Zip Code 20111

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

Name of Employer retired Occupation retired

Receipt For: 2020  
 Primary  General  
 Other (specify) **Convention**

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 08 2020

**Transaction ID : SA11AI.4689**

Amount of Each Receipt this Period  
 250.00

Memo Item  
 Donation via WinRed

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

Mailing Address 213 Dewberry Drive

City Winchester State VA Zip Code 22602

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

Name of Employer Self Occupation Physician

Receipt For: 2020  
 Primary  General  
 Other (specify) **Convention**

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 04 2020

**Transaction ID : SA11AI.4667**

Amount of Each Receipt this Period  
 50.00

Memo Item  
 Donation via WinRed

**C.** Full Name (Last, First, Middle Initial)  
**McPoland, Michael, E, ,**

Mailing Address 21240 Greenbrier Ct.

City Ashburn State VA Zip Code 20147

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

Name of Employer retired Occupation retired

Receipt For: 2020  
 Primary  General  
 Other (specify) **Convention**

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 07 2020

**Transaction ID : SA11AI.4683**

Amount of Each Receipt this Period  
 25.00

Memo Item  
 donation via WinRed

**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: PAGE 6 OF 21  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF MATT TRUONG**

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

Mailing Address 6150 Sunpatterns Trl

City Fairfax Station    State VA    Zip Code 22039

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

Name of Employer retired    Occupation retired

Receipt For: 2020  
 Primary     General  
 Other (specify) **Convention**

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 01 / 2020

**Transaction ID : SA11AI.4652**

Amount of Each Receipt this Period  
 100.00

Memo Item

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

Mailing Address 12855 Mountain Road

City Lovettsville    State VA    Zip Code 20180

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

Name of Employer Loudoun Wireless    Occupation not provided

Receipt For: 2020  
 Primary     General  
 Other (specify) **Convention**

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 16 / 2020

**Transaction ID : SA11AI.4700**

Amount of Each Receipt this Period  
 50.00

Memo Item  
 donation via Winred

**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).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	475.00

**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 7 OF 21			
	<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)  
**FRIENDS OF MATT TRUONG**

Full Name (Last, First, Middle Initial) <b>A. Callhub.io DBA Gaglers</b>		Date of Disbursement MM / DD / YYYY 06 / 04 / 2020
Mailing Address 123 No Physical Address hello@callhub.io		FEC Identification Number C C00728808
City Sterling	State VA	Zip Code 20167
Purpose of Disbursement Callhub call-center incremental payment		Category/Type 003
Candidate Name <b>FRIENDS OF MATT TRUONG</b>		Amount of Each Disbursement this Period 100.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention	Transaction ID : SB17.4659 <input type="checkbox"/> Memo Item
State: VA	District: 10	

Full Name (Last, First, Middle Initial) <b>B. Hotels.com</b>		Date of Disbursement MM / DD / YYYY 06 / 13 / 2020
Mailing Address 5400 LBJ Freeway		FEC Identification Number C C00728808
City Dallas	State TX	Zip Code 75240
Purpose of Disbursement La Quinta Inn - hospitality suite near convention site		Category/Type 007
Candidate Name <b>FRIENDS OF MATT TRUONG</b>		Amount of Each Disbursement this Period 203.68
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention	Transaction ID : SB17.4705 <input type="checkbox"/> Memo Item
State: VA	District: 10	

Full Name (Last, First, Middle Initial) <b>C. Infrared Productions</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2020
Mailing Address 3604 Kendall Pi.		FEC Identification Number C C00728808
City Alexandria	State VA	Zip Code 22303
Purpose of Disbursement Monthly website hosting fee June-July		Category/Type 001
Candidate Name <b>FRIENDS OF MATT TRUONG</b>		Amount of Each Disbursement this Period 20.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention	Transaction ID : SB17.4739 <input type="checkbox"/> Memo Item
State: VA	District: 10	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	▶	323.68
<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 8 OF 21	
	<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)  
**FRIENDS OF MATT TRUONG**

Full Name (Last, First, Middle Initial) <b>A. Lowes Home Centers</b>		Date of Disbursement MM / DD / YYYY 06 / 19 / 2020
Mailing Address 2200 S. Pleasant Valley Rd.		FEC Identification Number C
City Winchester	State VA	Zip Code 22601
Purpose of Disbursement Supplies for banner display at convention 2nd		Category/Type 004
Candidate Name		Amount of Each Disbursement this Period 91.87
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention	Transaction ID : SB17.4712
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. MadMimi - GoDaddy.com LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2020
Mailing Address 14455 N. Hayden Rd. Suite 219		FEC Identification Number C C00728808
City Scottsdale	State AZ	Zip Code 85260
Purpose of Disbursement MadMimi Pro - Email Blast monthly Subs. (10k addr)		Category/Type 003
Candidate Name <b>FRIENDS OF MATT TRUONG</b>		Amount of Each Disbursement this Period 42.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention	Transaction ID : SB17.4709
State: VA District: 10		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Pham, Diane, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2020
Mailing Address 600 UTTERBACK STORE ROAD		FEC Identification Number C
City GREAT FALLS	State VA	Zip Code 22066
Purpose of Disbursement Reimburse for food & bev for convention volunteers		Category/Type 007
Candidate Name		Amount of Each Disbursement this Period 273.67
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention	Transaction ID : SB17.4738
State: District:		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	407.54
<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 9 OF 21			
	<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)  
**FRIENDS OF MATT TRUONG**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement MM / DD / YYYY 06 / 19 / 2020
Mailing Address 21060 Southbank St		FEC Identification Number C
City Sterling	State VA	Zip Code 20165
Purpose of Disbursement Printing supplies for convention	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 478.96	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020	Transaction ID : SB17.4714
State: District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. We Know Mail LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2020
Mailing Address 23480 Rock Haven Way		FEC Identification Number C
City Sterling	State VA	Zip Code 20166
Purpose of Disbursement Mass Mailing - Convention Ad	Category/Type 004	
Candidate Name	Amount of Each Disbursement this Period 1475.13	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020	Transaction ID : SB17.4708
State: District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. WINRED</b>		Date of Disbursement MM / DD / YYYY 06 / 01 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C C00728808
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement Winred processing fees (on 6/1 thru Workman)	Category/Type 003	
Candidate Name <b>FRIENDS OF MATT TRUONG</b>	Amount of Each Disbursement this Period 9.45	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020	Transaction ID : SB17.4649
State: VA District: 10	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1963.54
<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 21	
	<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)  
**FRIENDS OF MATT TRUONG**

Full Name (Last, First, Middle Initial) <b>A. WINRED</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C C00728808
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement Winred processing fees (on 6/2 thru Hazqueal)	Category/ Type 003	Amount of Each Disbursement this Period 0.68
Candidate Name <b>FRIENDS OF MATT TRUONG</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention
State: VA District: 10	Transaction ID : SB17.4656 <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 06 / 03 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C C00728808
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement Winred processing fees (on 6/3 thru Aylestock)	Category/ Type 003	Amount of Each Disbursement this Period 5.16
Candidate Name <b>FRIENDS OF MATT TRUONG</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention
State: VA District: 10	Transaction ID : SB17.4662 <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 06 / 05 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C C00728808
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement Winred processing fees (on 6/4-5 thru Humph)	Category/ Type 003	Amount of Each Disbursement this Period 17.95
Candidate Name <b>FRIENDS OF MATT TRUONG</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention
State: VA District: 10	Transaction ID : SB17.4673 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	23.79
<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 21	
	<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)  
**FRIENDS OF MATT TRUONG**

Full Name (Last, First, Middle Initial) <b>A. WINRED</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C C00728808
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement Winred processing fees 2x50 (on 6/6 thru Smith)		Category/ Type 003
Candidate Name <b>FRIENDS OF MATT TRUONG</b>		Amount of Each Disbursement this Period 4.40
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention	Transaction ID : SB17.4682 <input type="checkbox"/> Memo Item
State: VA	District: 10	

Full Name (Last, First, Middle Initial) <b>B. WINRED</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C C00728808
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement Winred processing fees 25+2x50+250 (6/7-8 thru Laud.)		Category/ Type 003
Candidate Name <b>FRIENDS OF MATT TRUONG</b>		Amount of Each Disbursement this Period 15.45
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention	Transaction ID : SB17.4690 <input type="checkbox"/> Memo Item
State: VA	District: 10	

Full Name (Last, First, Middle Initial) <b>C. WINRED</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C C00728808
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement Winred processing fees 2x50 (on 6/10-11 thru McGrath)		Category/ Type 003
Candidate Name <b>FRIENDS OF MATT TRUONG</b>		Amount of Each Disbursement this Period 4.40
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention	Transaction ID : SB17.4697 <input type="checkbox"/> Memo Item
State: VA	District: 10	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	24.25
<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 21			
	<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)  
**FRIENDS OF MATT TRUONG**

Full Name (Last, First, Middle Initial) <b>A. WINRED</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C C00728808
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement Winred processing fees 2x50+25 (on 6/13-16 thru Workman)		Category/ Type 003
Candidate Name <b>FRIENDS OF MATT TRUONG</b>		Amount of Each Disbursement this Period 5.65
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention	Transaction ID : SB17.4701 <input type="checkbox"/> Memo Item
State: VA	District: 10	

Full Name (Last, First, Middle Initial) <b>B. WINRED</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C C00728808
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement Winred fee on refunded donation		Category/ Type 003
Candidate Name <b>FRIENDS OF MATT TRUONG</b>		Amount of Each Disbursement this Period 2.20
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention	Transaction ID : SB17.4740 <input type="checkbox"/> Memo Item
State: VA	District: 10	

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
Purpose of Disbursement		Category/ Type
Candidate Name		Amount of Each Disbursement this Period
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) <input type="checkbox"/> Convention	<input type="checkbox"/> Memo Item
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7.85
<b>TOTAL</b> This Period (last page this line number only).....	2750.65

**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 21	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF MATT TRUONG**

Full Name (Last, First, Middle Initial) <b>A. TRUONG, MATTHEW DO MR, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2020
Mailing Address 600 UTTERBACK STORE ROAD		FEC Identification Number C HOVA10194
City GREAT FALLS	State VA	Zip Code 22066
Purpose of Disbursement Loan repayment from filing fees		Category/Type 009
Candidate Name		Amount of Each Disbursement this Period 7000.00
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2020	Transaction ID : SB19A.4737
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Memo Item
<input type="checkbox"/> President	<input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention	
State: VA	District: 10	

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
Purpose of Disbursement		Category/Type
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Memo Item
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) <input type="checkbox"/> Convention	
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
Purpose of Disbursement		Category/Type
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Memo Item
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) <input type="checkbox"/> Convention	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	7000.00

**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 21			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF MATT TRUONG**

Full Name (Last, First, Middle Initial) <b>A. Bui, Thi, H, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2020		
Mailing Address 6115 Emmett Guards Ct.			FEC Identification Number C		
City Fairfax Station	State VA	Zip Code 22039	Amount of Each Disbursement this Period 2800.00		
Purpose of Disbursement Refund of General Election Contribution		Category/ Type 010	Transaction ID : SB20A.4727		
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Bui, Thu, A, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2020		
Mailing Address 9501 Daniel French Street			FEC Identification Number C		
City Lorton	State VA	Zip Code 22079	Amount of Each Disbursement this Period 2800.00		
Purpose of Disbursement Refund of General Election Contribution		Category/ Type 010	Transaction ID : SB20A.4731		
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Bui, Van, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2020		
Mailing Address 6115 Emmett Guards Ct.			FEC Identification Number C		
City Fairfax Station	State VA	Zip Code 22039	Amount of Each Disbursement this Period 2800.00		
Purpose of Disbursement Refund of General Election Contribution		Category/ Type 010	Transaction ID : SB20A.4726		
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8400.00
<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 21			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF MATT TRUONG**

Full Name (Last, First, Middle Initial) <b>A. George, Reagan, G, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2020		
Mailing Address 13918 Valley Country Dr.			FEC Identification Number C		
City Chantilly	State VA	Zip Code 20151	Amount of Each Disbursement this Period 2800.00		
Purpose of Disbursement Refund of General Election Contribution		Category/ Type 010	Transaction ID : SB20A.4717		
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. George, Suzanne, S, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2020		
Mailing Address 13918 Valley Country Dr.			FEC Identification Number C		
City Chantilly	State VA	Zip Code 20151	Amount of Each Disbursement this Period 2800.00		
Purpose of Disbursement Refund of General Election Contribution		Category/ Type 010	Transaction ID : SB20A.4718		
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Jackson, Helen, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2020		
Mailing Address 207 E Staunton Ave			FEC Identification Number C		
City Sterling	State VA	Zip Code 20164	Amount of Each Disbursement this Period 2800.00		
Purpose of Disbursement Refund of General Election Contribution		Category/ Type 010	Transaction ID : SB20A.4715		
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8400.00
<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 21			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF MATT TRUONG**

Full Name (Last, First, Middle Initial) <b>A. Jackson, Stephen, C, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2020		
Mailing Address 207 E Staunton Ave			FEC Identification Number C		
City Sterling	State VA	Zip Code 20164	Amount of Each Disbursement this Period 2800.00		
Purpose of Disbursement Refund of General Election Contribution		Category/ Type 010	Transaction ID : SB20A.4716		
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. McGlashan, Kym, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2020		
Mailing Address 1828 Wawaset Street			FEC Identification Number C		
City Wilmington	State DE	Zip Code 19806	Amount of Each Disbursement this Period 2800.00		
Purpose of Disbursement Refund of General Election Contribution		Category/ Type 010	Transaction ID : SB20A.4723		
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. McGlashan, William, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2020		
Mailing Address 1828 Wawaset Road			FEC Identification Number C		
City Wilmington	State DE	Zip Code 19806	Amount of Each Disbursement this Period 2800.00		
Purpose of Disbursement Refund of General Election Contribution		Category/ Type 010	Transaction ID : SB20A.4724		
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8400.00
<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 21			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF MATT TRUONG**

Full Name (Last, First, Middle Initial) <b>A. Nguyen, Ngan, Stephanie, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2020		
Mailing Address 6022 Makeley Dr.			FEC Identification Number C		
City Fairfax Station	State VA	Zip Code 22039	Amount of Each Disbursement this Period 2800.00		
Purpose of Disbursement Refund of General Election Contribution		Category/ Type 010	Transaction ID : SB20A.4732		
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Pham, Diane, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2020		
Mailing Address 600 UTTERBACK STORE ROAD			FEC Identification Number C		
City GREAT FALLS	State VA	Zip Code 22066	Amount of Each Disbursement this Period 2800.00		
Purpose of Disbursement Refund of General Election Contribution		Category/ Type 010	Transaction ID : SB20A.4733		
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Pham, Linh, D, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2020		
Mailing Address 19642 White Saddle Dr.			FEC Identification Number C		
City Germantown	State MD	Zip Code 20874	Amount of Each Disbursement this Period 2800.00		
Purpose of Disbursement Refund of General Election Contribution		Category/ Type 010	Transaction ID : SB20A.4729		
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8400.00
<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 18 OF 21			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF MATT TRUONG**

Full Name (Last, First, Middle Initial) <b>A. Pham, Thai, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2020		
Mailing Address 6115 Emmett Guards Ct.			FEC Identification Number C		
City Fairfax Station	State VA	Zip Code 22039	Amount of Each Disbursement this Period 2800.00		
Purpose of Disbursement Refund of General Election Contribution		Category/ Type 010	Transaction ID : SB20A.4728		
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Tran, Vivian, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2020		
Mailing Address 19642 White Saddle Dr.			FEC Identification Number C		
City Germantown	State MD	Zip Code 20874	Amount of Each Disbursement this Period 2800.00		
Purpose of Disbursement Refund of General Election Contribution		Category/ Type 010	Transaction ID : SB20A.4730		
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Truong, Devin, Q, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2020		
Mailing Address 600 UTTERBACK STORE ROAD			FEC Identification Number C		
City GREAT FALLS	State VA	Zip Code 22066	Amount of Each Disbursement this Period 2800.00		
Purpose of Disbursement Refund of General Election Contribution		Category/ Type 010	Transaction ID : SB20A.4734		
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8400.00
<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 19 OF 21			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF MATT TRUONG**

Full Name (Last, First, Middle Initial) <b>A. TRUONG, MATTHEW DO MR, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2020		
Mailing Address 600 UTTERBACK STORE ROAD			FEC Identification Number <b>C</b> HOVA10194		
City GREAT FALLS	State VA	Zip Code 22066	Amount of Each Disbursement this Period 2800.00		
Purpose of Disbursement Refund of General Election Contribution		Category/ Type 010	Transaction ID : <b>SB20A.4735</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: VA	District: 10				

Full Name (Last, First, Middle Initial) <b>B. Valker, Gregory, M, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2020		
Mailing Address PO Box 279			FEC Identification Number <b>C</b>		
City Bluemont	State VA	Zip Code 20135-0279	Amount of Each Disbursement this Period 1400.00		
Purpose of Disbursement Refund of General Election Contribution		Category/ Type 010	Transaction ID : <b>SB20A.4725</b>		
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 type="checkbox"/> Primary <input checked="" 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 <b>C</b>		
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).....▶	4200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	46200.00

**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 21			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF MATT TRUONG**

Full Name (Last, First, Middle Initial) <b>A. U.S. Internal Revenue Service</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2020		
Mailing Address P.O. Box 0035			FEC Identification Number C		
City Ogden	State UT	Zip Code 84201	Amount of Each Disbursement this Period 1237.95		
Purpose of Disbursement 2019 Federal Tax - Adj 1120 POL		Category/ Type 001	Transaction ID : SB21.4722		
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 type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Convention				
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		
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		
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).....▶	1237.95
<b>TOTAL</b> This Period (last page this line number only).....▶	1237.95

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

NAME OF COMMITTEE (In Full) **FRIENDS OF MATT TRUONG** Transaction ID : **SC/10.4156**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) TRUONG, MATTHEW DO MR, , ,		<input type="checkbox"/> Memo Item	Election: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Convention
Mailing Address 600 UTTERBACK STORE ROAD			
City GREAT FALLS	State VA	ZIP Code 22066	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
7000.00	7000.00	0.00

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 01 / D 04 / Y 2020	M M / D D / Y 11/2/2020	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	0.00
<b>TOTALS</b> This Period (last page in this line only).....▶	0.00

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