PAGE 1 / 13

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		INDURSE Introduction			Of	ffice Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT	•	kample: If typing	, type	12FE4M5	
Lonegan for Congress						1
-						
ADDRESS (number and street)	5 Halifax Ct					
▼ Check if different						
than previously reported. (ACC)	Marlton				NJ 08	053
2. FEC IDENTIFICATION NU	IMBER ▼	CITY A		S	TATE A	ZIP CODE ▲
C C00555284		3. IS THIS REPORT	x NEW (N)	OR [AMENDED (A)	STATE ▼ DISTRICT NJ 03 □
4. TYPE OF REPORT (Cho	oose One)	(b) 12-Day PRE	E-Election Report	for the:		
(a) Quarterly Reports:		П	Primary (12P)	П	General (12G	Runoff (12R)
April 15 Quarterly R	eport (Q1)	Ä				
July 15 Quarterly Re	eport (Q2)	ш	Convention (12	2C)	Special (12S))
October 15 Quarterl	y Report (Q3)	Election on	M M /	D D /	YYYY	in the State of
January 31 Year-End	d Report (YE)	(c) 30-Day PO \$	ST-Election Repo	ort for the:		
			General (30G)		Runoff (30R)	Special (30S)
Termination Report ((TER)	Election on	M M /	D D /	Y	in the State of
5. Covering Period 10	/ DO1 /	Y Y Y Y 2021	through	м м 12	/ D D / Y	2021
I certify that I have examined this	s Report and to Curtis, Elizabet	•	nowledge and be	elief it is tru	e, correct and c	omplete.
Type or Print Name of Treasurer						
Curti. Signature of Treasurer	s, Elizabeth, , ,		[Electronically Fi	led] Da	nte 01	01 / Y Y Y Y Y 2022
NOTE: Submission of false, errone	ous, or incomplete	e information may	subject the perso	on signing th	is Report to the p	penalties of 52 U.S.C. §30109
Office Use Only						FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

2021

10

01

PAGE 2 / 13

2021

12

FEC Form 3 (Revised 05/2016)

Nrite o	r Type	Coi	nmitte	е	Name
Lone	gan	for	Con	gı	ess

Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 741348.94 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 12375.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 728973.94 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 0.00 1241932.28 (from Line 17) (b) Total Offsets to Operating 722.29 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 0.00 1241209.99 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 0.00 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 342452.23 Schedule C and/or Schedule D).....

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)

PAGE 3 / 13

Write or Type Committee Name

Lonegan for Congress

10 12 01 2021 31 2021 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 0.00 275000.48 (i) Itemized (use Schedule A)..... 448933.46 0.00 (ii) Unitemized (iii) TOTAL of contributions 0.00 723933.94 from individuals 0.00 65.00 Political Party Committees..... Other Political Committees 0.00 14750.00 (such as PACs) 0.00 2600.00 The Candidate..... (d) TOTAL CONTRIBUTIONS (other than loans) 0.00 741348.94 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES 13. LOANS: (a) Made or Guaranteed by the 0.00 496500.00 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 0.00 496500.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 722.29 (Refunds, Rebates, etc.) 15. OTHER RECEIPTS 0.00 25100.59 (Dividends, Interest, etc.) 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) 0.00 1263671.82 (Carry Total to Line 24, page 4).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 13

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	0.00	1241932.28
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	0.00	12375.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	12375.00
1.	OTHER DISBURSEMENTS	0.00	0.00
2.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	0.00	1254307.28
	III. CASH SU	JMMARY	
3.	CASH ON HAND AT BEGINNING OF REPOR	rting period	0.00
4	TOTAL RECEIPTS THIS PERIOD (from Line 1	16, page 3)	0.00
5.	SUBTOTAL (add Line 23 and Line 24)		0.00
6.	TOTAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	0.00
7.	CASH ON HAND AT CLOSE OF REPORTING	G PERIOD	0.00

SCHEDULE C (FEC Form 3) LOANS

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

PAGE 5
FOR LINE NUMBER: (check only one)

13a

		Detailed outlinary rage				
NAME OF COMMITTEE (In Full)		Transaction ID : SC/10.4502				
Lonegan for Congress						
LOAN SOURCE Full Name (Last, Fi	st, Middle Initial)	Memo Item Election: 2014				
Lonegan, Steven, , ,	_					
	General					
Mailing Address 212 Larch Ave		Other (specify) ▼				
City	State	ZIP Code Personal Funds of the Candid				
Bogota	NJ	07603				
Original Amount of Loan	Cumulative Pa	Payment To Date Balance Outstanding at Close of This Pe				
100000.0)	0.00 50000.00				
2 2						
TERMS Date Incurred		Date Due Interest Rate Secured: (If none, enter 0)				
M05 ^M / D09 ^D / Y Z014	M M / D	0.00 % (apr) Yes				
List All Endorsers or Guarantors (if	anv) to Loan Source	0				
Full Name (Last, First, Middle Init		Name of Employer				
	,					
Mailing Address		Occupation				
		Amount				
City	tate ZIP Code	Guaranteed Outstanding:				
2. Full Name (Last, First, Middle Initia	al)	Name of Employer				
Mailing Address		Occupation				
		Accord				
011		Amount Guaranteed				
City	tate ZIP Code	Outstanding:				
3. Full Name (Last, First, Middle Initia	al)	Name of Employer				
Mailing Address		Occupation				
		Amount				
City	tate ZIP Code	Guaranteed				
5.19		Outstanding:				
4. Full Name (Last, First, Middle Initia	al)	Name of Employer				
Mailing Address		Occupation				
		Amount				
City	tate ZIP Code	Guaranteed				
5,		Outstanding:				
SUBTOTALS This Period This Page (op	tional)	50000.00				
TOTALS This Period (last page in this li	ne only)	······································				
Carry outstanding halance only to LINE	3 Schedule D for th	nis line. If no Schedule D, carry forward to appropriate line of Summa				
Carry outstanding Dataffee Utily to LINE	o, ochequie D, IUI (II	no mie, ii no ochedule b, carry lorwaru to appropriate illie di oumimal				

: 97 'A - G7 9 @ 5 B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC F H Z G7 < 98 I @ 'C F' + H9 A - N5 H-C B

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:

SCHEDULE C (FEC Form 3) LOANS

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

PAGE 7
FOR LINE NUMBER: (check only one)

13a

OF

		100
NAME OF COMMITTEE (In Full) Lonegan for Congress		Transaction ID : SC/10.4499
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Lonegan, Steven, , ,	Memo Item Clection: 2014	
Mailing Address 212 Larch Ave	Other (specify)	
City	State	ZIP Code Personal Funds of the Candidate
Bogota	NJ	07603
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
100000.00		0.00 100000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M05M / D16D / Y Ž01Ă Y	M M / D D	/ ^Y 12/31/2014
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	-	Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
	T	Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optiona)	
COLUMN TOTAL TIME TOTAL TIME TOTAL TOTAL TOTAL TIME TOT	7	100000.00
TOTALS This Period (last page in this line of	nly)	······································
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

Use separate schedule(s)

PAGE OF FOR LINE NUMBER:

13

for each category of the **x** 13a (check only one) Detailed Summary Page 13b Transaction ID: SC/10.4501 NAME OF COMMITTEE (In Full) Lonegan for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Lonegan, Steven, , , General Mailing Address Other (specify) \blacktriangledown 212 Lărch Ave City State ZIP Code Personal Funds of the Candidate NJ 07603 Bogota Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 100000.00 0.00 100000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D23^D M 05M ž014 Y12/31/2014 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 100000.00 TOTALS This Period (last page in this line only)..... 250000.00

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

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 9 OF FOR LINE NUMBER: (check only one)

	9
X	10

13

NAME OF COMMITTEE (In Full)

Lonegan for Congres	S			
A. Full Name (Last, First, Middle Initial) of De Base Connect, Inc.	Nature of Debt (Purpose): Fundraising			
Mailing Address 1155 15th St NW Suite 410				
City Washington	City State Zip Code			
Outstanding Balance Beginning This Period			Transaction ID : SD10.4539	
5725.37				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	5725.37	
B. Full Name (Last, First, Middle Initial) of Del Base Connect, Inc.	otor or Credi	tor	Nature of Debt (Purpose): Fundraising	
Mailing Address 1155 15th St NW Suite 410				
City Washington	State DC	Zip Code 20005		
30605.27 Amount Incurred This Period 0.00	Amount Incurred This Period Payment This Period			
		···		
C. Full Name (Last, First, Middle Initial) of De Consolidated Mailing Services		ditor	Nature of Debt (Purpose): Fundraising	
Mailing Address 504 Shaw Rd Suite 206				
City Sterling	State VA	Zip Code 20166		
Outstanding Balance Beginning This Period	Transaction ID : SD10.4541			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00	L	7 0.00	225.62	
) SUBTOTALS This Period This Page (optiona)		36556.26	
) TOTALS This Period (last page this line num				
) TOTAL OUTSTANDING LOANS from Sched				

Exc

(Use separate schedule(s) for each

PAGE 10 OF FOR LINE NUMBER: (check only one)

	9
X	10

13

ХC	cluding Loans			numbered line)	 X 10	
NA	ME OF COMMITTEE (In Full)					
L	onegan for Congress	S				
	A. Full Name (Last, First, Middle Initial) of De		Nature of Debt (Purpose):			
	Consolidated Mailing Services	Fundraisin	9			
	Mailing Address 504 Shaw Rd					
ŀ	Suite 206 City	State	Zip Code			
	Sterling	VA	20166			
	Outstanding Balance Beginning This Period		·	Transacti	on ID : SD10.4552	
	5769.48					
	Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period	
	0.00		0.0	0	5769.48	
ŀ	B. Full Name (Last, First, Middle Initial) of Deb	otor or Cred	ditor	Nature of D	Debt (Purpose):	
	Consolidated Mailing Services			Fundraisin	, , ,	
ľ	Mailing Address 504 Shaw Rd Suite 206					
l	City	State	Zip Code			
	Sterling	VA	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		0.0	0	5532.90	
	7 7		, , ,		, , , , , , , , , , , , , , , , , , , ,	
Ī	C. Full Name (Last, First, Middle Initial) of De		editor		Nature of Debt (Purpose):	
	Consolidated Mailing Services			Fundraisin	g	
-	Mailing Address 504 Shaw Rd Suite 206					
ŀ	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	Outstandi	ng Balance at Close of This Period	
	0.00		0.0	0	9421.05	
1)	SUBTOTALS This Period This Page (optional))			20723.43	
2)	TOTALS This Period (last page this line numb	oer only) ····		· •	, , , , , , , , , , , , , , , , , , , ,	
3)	TOTAL OUTSTANDING LOANS from Schedu	ıle C (last r	page only)			

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

Excluding Loans

1)

2)

3)

4)

NAI

luding Loans			numbered line)	x 10
ME OF COMMITTEE (In Full)				-
onegan for Congres	S			
A. Full Name (Last, First, Middle Initial) of D	Nature of	Debt (Purpose):		
Consolidated Mailing Services	Fundrais	ing		
Mailing Address 504 Shaw Rd Suite 206				
City	State	Zip Code		
Sterling	VA	20166		
Outstanding Balance Beginning This Period	i		Transac	etion ID : SD10.4811
14548.45				
Amount Incurred This Period		Payment This Period	Outstan	ding Balance at Close of This Period
0.00		0.0	10	14548.45
0.00		,		14340.43
B. Full Name (Last, First, Middle Initial) of De	btor or Credit	or	Nature of	Debt (Purpose):
Integram			Fundrais	, , ,
Mailing Address 22695 Commerce Center Ct				
City	State	Zip Code		
Dulles	VA	20166		
Outstanding Balance Beginning This Period	i		Transac	etion ID : SD10.4548
7661.09				
Amount Incurred This Period		Payment This Period	Outstan	ding Balance at Close of This Period
0.00		0.0	00	7661.09
C. Full Name (Last, First, Middle Initial) of D	ebtor or Cred	itor	N	5.1.(5.)
Legacy Lists Inc - Brokerage			Nature of Fundrais	Debt (Purpose): sing
Mailing Address 1155 - 15th Street NW				
Suite 410 City	State	Zip Code		
Washington	DC	20005		
Outstanding Balance Beginning This Period	l	·	Transa	ction ID : SD10.4514
1199.54				
Amount Incurred This Period		Payment This Period	Outstan	ding Balance at Close of This Period
0.00		0.0	00	1199.54
SUBTOTALS This Period This Page (optional	ıl)		•	23409.08
TOTALS This Period (last page this line num	•			
TOTAL OUTSTANDING LOANS from Sched	ule C (last pa	ge only)	▶	7 7 7
ADD 2) and 3) and carry forward to approp	riate line of Su	ummary Page (last page or	nly) 🕨	

PAGE 11 OF

FOR LINE NUMBER:

(check only one)

(Use separate schedule(s)

for each

numbered line)

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 12 OF FOR LINE NUMBER: (check only one)

	9
v	10

13

NAME OF COMMITTEE (In Full)

Outstanding Balance Beginning This Period

Amount Incurred This Period

1884.93

onegan for Congress	5		
A. Full Name (Last, First, Middle Initial) of De Legacy Lists Inc - Brokerage	Nature of Debt (Purpose): Fundraising		
Mailing Address 1155 - 15th Street NW Suite 410			
City Washington	Zip Code 20005		
Outstanding Balance Beginning This Period 5793.47		1	Transaction ID : SD10.4538
Amount Incurred This Period 0.00	Outstanding Balance at Close of This Period 5793.47		
B. Full Name (Last, First, Middle Initial) of Deb 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 1813.69			Transaction ID : SD10.4547
Amount Incurred This Period	P	ayment This Period	Outstanding Balance at Close of This Period
0.00	0.00	1813.69	
C. Full Name (Last, First, Middle Initial) of De	btor or Creditor	ſ	Nature of Debt (Purpose):
Legacy Lists Inc Mgmt	Fundraising		
Mailing Address 1155- 15th St NW			
City	State	Zip Code	
Washington	DC	20005	

1)	SUBTOTALS This Period This Page (optional)	•	Ξ	7	I	I	7	_	9492	2.09	
2)	TOTALS This Period (last page this line number only)	•	Ξ	,	Ι	Ι	7	Ξ			
3)	TOTAL OUTSTANDING LOANS from Schedule C (last page only)	•		,			7	_			
4)	ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	•	_	7	Ξ	_	7	_			

Payment This Period

0.00

Transaction ID: SD10.4535

Outstanding Balance at Close of This Period

1884.93

Excluding L

	_ `	_	
Lonegan	for	Cond	ress

	BTS AND OBLIGATIONS luding Loans			for	each red line)	(check only one)	9 10				
	ME OF COMMITTEE (In Full)			1	·		1. 1.2				
L	onegan for Congress	S									
	A. Full Name (Last, First, Middle Initial) of De 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 2271.37		Transaction ID : SD10.4540								
	Amount Incurred This Period		Payment This Period		Outstandi	ng Balance at Close	of This Period				
	0.00		0.0	00		, ,	2271.37				
	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor					Nature of Debt (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				
	,		7			, , , , , ,					
•	. Full Name (Last, First, Middle Initial) of Debtor or Creditor					ebt (Purpose):					
	Mailing Address										
(City	State	Zip Code								
	Outstanding Balance Beginning This Period	L									
	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7										
	Amount Incurred This Period		Payment This Period		Outstandi	ng Balance at Close	of This Period				
			7		L	7 7					
1)	SUBTOTALS This Period This Page (optional)		•		7	2271.37				
2)	TOTALS This Period (last page this line num	ber only) ·····		····· •		, , , ,	2452.23				
3)	TOTAL OUTSTANDING LOANS from Schedu	ıle C (last p	age only)	···· •		, 25	0000.00				
4)	ADD 2) and 3) and carry forward to appropri	ate line of S	Summary Page (last page or	nly) 🕨		34	2452.23				

PAGE 13 OF

FOR LINE NUMBER:

(Use separate schedule(s)

13