



**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**DEVOLDER-SANTOS FOR CONGRESS**

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))....	7041.00	9061.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	7041.00	9061.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	31100.30	34122.49
(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)).....	31100.30	34122.49
8. Cash on Hand at Close of Reporting Period (from Line 27).....	54988.51	
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).....	80050.00	

**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

**DEVOLDER-SANTOS 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).....	6375.00	7525.00
(ii) Unitemized.....	666.00	1536.00
(iii) TOTAL of contributions from individuals ▶	7041.00	9061.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	7041.00	9061.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	74750.00	80050.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	74750.00	80050.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<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>	81791.00	89111.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	31100.30	34122.49
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	0.00
(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	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	31100.30	34122.49

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	4297.81
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	81791.00
25. SUBTOTAL (add Line 23 and Line 24).....	86088.81
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	31100.30
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	54988.51

**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 20  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DEVOLDER-SANTOS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Eisen, Josh, , ,**  
 Mailing Address 182 Union Avenue  
 City Harrison State NY Zip Code 10528  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Morningside Occupation Consultant  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 27 / 2020  
**Transaction ID : SA11AI.4183**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Eisen, Josh, , ,**  
 Mailing Address 182 Union Avenue  
 City Harrison State NY Zip Code 10528  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Morningside Occupation Consultant  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2020  
**Transaction ID : SA11AI.4171**  
 Amount of Each Receipt this Period  
 1300.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Murray, Joseph, , ,**  
 Mailing Address 245-20 Grand Central Parkway, 5M  
 City Bellerose State NY Zip Code 11426  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Employed Occupation Attorney  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 06 / 2020  
**Transaction ID : SA11AI.4202**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3050.00  
**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 20  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DEVOLDER-SANTOS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Neiman, Howard, , ,**  
 Mailing Address 71-42 171st Street  
 City Hillcrest State NY Zip Code 11365  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2020  
**Transaction ID : SA11AI.4179**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Sabba, Steve, , ,**  
 Mailing Address PO Box 1291  
 City Yorktown Heights State NY Zip Code 10598  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TaxPro Financial Network Inc. Occupation Tax Professional  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2020  
**Transaction ID : SA11AI.4168**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Tsanas, John, , ,**  
 Mailing Address 800 Third Avenue Suite 2800  
 City New York State NY Zip Code 10022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Excalibur Global Strategic Con Occupation Attorney  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 05 / 2020  
**Transaction ID : SA11AI.4163**  
 Amount of Each Receipt this Period  
 600.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1125.00  
**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 7 OF 20  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DEVOLDER-SANTOS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
Tsanas, John, , ,  
Mailing Address 800 Third Avenue Suite 2800  
City New York State NY Zip Code 10022  
FEC ID number of contributing federal political committee. C  
Name of Employer Excalibur Global Strategic Con Occupation Attorney  
Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
2800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 28 2020  
Transaction ID : SA11AI.4160  
Amount of Each Receipt this Period  
2200.00  
 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).....▶	2200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6375.00

**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 8 OF 20
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DEVOLDER-SANTOS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Devolder Santos, George, Anthony, ,**

Mailing Address 9002 Queens Blvd

City Elmhurst	State NY	Zip Code 11373
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FEC ID number of contributing federal political committee.

Name of Employer Self Employed	Occupation Self Employed
-----------------------------------	-----------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA13A.4305**

Amount of Each Receipt this Period

Memo Item  
 Loan

**B.** Full Name (Last, First, Middle Initial)  
**Devolder Santos, George, Anthony, ,**

Mailing Address 9002 Queens Blvd

City Elmhurst	State NY	Zip Code 11373
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FEC ID number of contributing federal political committee.

Name of Employer Self Employed	Occupation Self Employed
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Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA13A.4207**

Amount of Each Receipt this Period

Memo Item  
 Loan

**C.** Full Name (Last, First, Middle Initial)  
**Devolder Santos, George, Anthony, ,**

Mailing Address 9002 Queens Blvd

City Elmhurst	State NY	Zip Code 11373
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FEC ID number of contributing federal political committee.

Name of Employer Self Employed	Occupation Self Employed
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Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA13A.4276**

Amount of Each Receipt this Period

Memo Item  
 Loan

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	<input type="text" value="24750.00"/>
<b>TOTAL</b> This Period (last page this line number only)..... ▶	<input type="text" value=""/>



# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 20  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DEVOLDER-SANTOS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
Devolder Santos, George, Anthony, ,

Mailing Address 9002 Queens Blvd

City Elmhurst State NY Zip Code 11373

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed Occupation Self Employed

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
80050.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2020

Transaction ID : SA13A.4309

Amount of Each Receipt this Period  
50000.00

Memo Item  
 Loan

**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).....▶	50000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	74750.00

**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 10 OF 20	
	<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)  
**DEVOLDER-SANTOS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2020
Mailing Address 200 Vesey St		FEC Identification Number C C00721365
City New York	State NY	Zip Code 10285
Purpose of Disbursement Expenses Paid	Category/ Type 011	Amount of Each Disbursement this Period 6300.00
Candidate Name <b>DEVOLDER-SANTOS FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: NY District: 03	Transaction ID : SB17.4279 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. NASSAU COUNTY REPUBLICAN COMMITTEE (FEDERAL ACCOUNT)</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2019
Mailing Address 164 POST AVENUE		FEC Identification Number C C00721365
City WESTBURY	State NY	Zip Code 11590
Purpose of Disbursement Event	Category/ Type 011	Amount of Each Disbursement this Period 2000.00
Candidate Name <b>DEVOLDER-SANTOS FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: NY District: 03	Transaction ID : SB17.4279.0 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Town of Oyster Bay Republican Club</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2019
Mailing Address 164 Post Avenue		FEC Identification Number C C00721365
City Westbury	State NY	Zip Code 11590
Purpose of Disbursement Event	Category/ Type 011	Amount of Each Disbursement this Period 1500.00
Candidate Name <b>DEVOLDER-SANTOS FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: NY District: 03	Transaction ID : SB17.4279.1 <input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6300.00
<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 11 OF 20	
	<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)  
**DEVOLDER-SANTOS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. DONALD J. TRUMP FOR PRESIDENT, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2019	
Mailing Address 725 FIFTH AVENUE			FEC Identification Number C C00721365	
City NEW YORK	State NY	Zip Code 10022	Amount of Each Disbursement this Period 2800.00	
Purpose of Disbursement Event Donation		Category/ Type 011	Transaction ID : SB17.4279.2	
Candidate Name DEVOLDER-SANTOS FOR CONGRESS		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NY District: 03				

Full Name (Last, First, Middle Initial) <b>B. American Express</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2020	
Mailing Address 200 Vesey St			FEC Identification Number C C00721365	
City New York	State NY	Zip Code 10285	Amount of Each Disbursement this Period 535.01	
Purpose of Disbursement Expenses Paid		Category/ Type 001	Transaction ID : SB17.4292	
Candidate Name DEVOLDER-SANTOS FOR CONGRESS		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NY District: 03				

Full Name (Last, First, Middle Initial) <b>c. Campaigns Unlimited</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2019	
Mailing Address 47 Flintlock Drive			FEC Identification Number C C00721365	
City Shirley	State NY	Zip Code 11967	Amount of Each Disbursement this Period 505.00	
Purpose of Disbursement Event Expenses		Category/ Type 001	Transaction ID : SB17.4292.0	
Candidate Name DEVOLDER-SANTOS FOR CONGRESS		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NY District: 03				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	535.01
<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 12 OF 20			
	<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)  
**DEVOLDER-SANTOS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Arena Mail &amp; Digital</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2020
Mailing Address 1780 W Sequoia Vista Circle		FEC Identification Number C C00721365
City Salt Lake City	State UT	Zip Code 84104
Purpose of Disbursement Website	Category/ Type 001	Amount of Each Disbursement this Period 650.00
Candidate Name <b>DEVOLDER-SANTOS FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: NY District: 03	Transaction ID : SB17.4256 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Arena Mail &amp; Digital</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2020
Mailing Address 1780 W Sequoia Vista Circle		FEC Identification Number C C00721365
City Salt Lake City	State UT	Zip Code 84104
Purpose of Disbursement Facebook & Internet Services	Category/ Type 001	Amount of Each Disbursement this Period 1216.00
Candidate Name <b>DEVOLDER-SANTOS FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: NY District: 03	Transaction ID : SB17.4258 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. BPM Marketing LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2020
Mailing Address 358 Rector St		FEC Identification Number C C00721365
City Perth Amboy	State NJ	Zip Code 08861
Purpose of Disbursement Website Design	Category/ Type 001	Amount of Each Disbursement this Period 300.00
Candidate Name <b>DEVOLDER-SANTOS FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: NY District: 03	Transaction ID : SB17.4259 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2166.00
<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 13 OF 20			
	<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)  
**DEVOLDER-SANTOS FOR CONGRESS**

**A. Campaigns Unlimited**

Full Name (Last, First, Middle Initial)  
Mailing Address 47 Flintlock Drive

City Shirley State NY Zip Code 11967

Purpose of Disbursement Compliance/Accounting Category/Type 001

Candidate Name **DEVOLDER-SANTOS FOR CONGRESS**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: NY District: 03

Date of Disbursement 02 / 25 / 2020

FEC Identification Number C C00721365

Amount of Each Disbursement this Period 750.00

Transaction ID : SB17.4306

Memo Item

**B. Campaigns Unlimited**

Full Name (Last, First, Middle Initial)  
Mailing Address 47 Flintlock Drive

City Shirley State NY Zip Code 11967

Purpose of Disbursement Campaign Expenses/Advertising/Food & Beverage Category/Type 001

Candidate Name **DEVOLDER-SANTOS FOR CONGRESS**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: NY District: 03

Date of Disbursement 03 / 15 / 2020

FEC Identification Number C C00721365

Amount of Each Disbursement this Period 11664.99

Transaction ID : SB17.4302

Memo Item

**c. Campaigns Unlimited**

Full Name (Last, First, Middle Initial)  
Mailing Address 47 Flintlock Drive

City Shirley State NY Zip Code 11967

Purpose of Disbursement Compliance/Accounting Category/Type 001

Candidate Name **DEVOLDER-SANTOS FOR CONGRESS**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: NY District: 03

Date of Disbursement 03 / 20 / 2020

FEC Identification Number C C00721365

Amount of Each Disbursement this Period 2500.00

Transaction ID : SB17.4307

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 14914.99

**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 14 OF 20	
	<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)  
**DEVOLDER-SANTOS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2020
Mailing Address 1030 Delta Blvd		FEC Identification Number C C00721365
City Atlanta	State GA	Zip Code 30354
Purpose of Disbursement Air Fare	Category/Type 002	Amount of Each Disbursement this Period 504.00
Candidate Name <b>DEVOLDER-SANTOS FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: NY	District: 03	Transaction ID : SB17.4213 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. JW Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2020
Mailing Address 20-64 46th St		FEC Identification Number C C00721365
City Astoria	State NY	Zip Code 11105
Purpose of Disbursement Fundraiser	Category/Type 001	Amount of Each Disbursement this Period 1500.00
Candidate Name <b>DEVOLDER-SANTOS FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: NY	District: 03	Transaction ID : SB17.4267 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>c. Michael Lamy Graphic Design</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2020
Mailing Address 75 Britannia Dr		FEC Identification Number C C00721365
City Danbury	State CT	Zip Code 06811
Purpose of Disbursement Business Cards	Category/Type 001	Amount of Each Disbursement this Period 336.83
Candidate Name <b>DEVOLDER-SANTOS FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: NY	District: 03	Transaction ID : SB17.4263 <input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2340.83
<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 20			
	<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)  
**DEVOLDER-SANTOS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Michael Lamy Graphic Design</b>		Date of Disbursement MM / DD / YYYY 02 / 03 / 2020
Mailing Address 75 Britannia Dr		FEC Identification Number C C00721365
City Danbury	State CT	Zip Code 06811
Purpose of Disbursement Back drop Design	Category/ Type 001	Amount of Each Disbursement this Period 127.62
Candidate Name <b>DEVOLDER-SANTOS FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: NY District: 03	Transaction ID : <b>SB17.4270</b> <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Miller, Gabriel, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 10 / 2020
Mailing Address 94-30 60th Ave Apt 1K		FEC Identification Number C C00721365
City Elmhurst	State NY	Zip Code 11373
Purpose of Disbursement Field Representative	Category/ Type 001	Amount of Each Disbursement this Period 2900.00
Candidate Name <b>DEVOLDER-SANTOS FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: NY District: 03	Transaction ID : <b>SB17.4261</b> <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. RHG.PICS</b>		Date of Disbursement MM / DD / YYYY 03 / 20 / 2020
Mailing Address 1731 2nd Ave, Apt 4RN		FEC Identification Number C C00721365
City New York	State NY	Zip Code 10128
Purpose of Disbursement Campaign Photos	Category/ Type 001	Amount of Each Disbursement this Period 500.00
Candidate Name <b>DEVOLDER-SANTOS FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: NY District: 03	Transaction ID : <b>SB17.4272</b> <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3527.62
<b>TOTAL</b> This Period (last page this line number only).....▶	29784.45

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

NAME OF COMMITTEE (In Full) **DEVOLDER-SANTOS FOR CONGRESS** Transaction ID : **SC/10.4149**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Devolder Santos, George, Anthony, ,		<input type="checkbox"/> Memo Item	Election: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 9002 Queens Blvd			
City Elmhurst	State NY	ZIP Code 11373	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 5300.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 5300.00
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<b>TERMS</b>	Date Incurred M 12 / D 31 / Y 2019	Date Due M / D / Y 0	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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).....▶	5300.00
<b>TOTALS</b> This Period (last page in this line only).....▶	

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



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

NAME OF COMMITTEE (In Full) **DEVOLDER-SANTOS FOR CONGRESS** Transaction ID : **SC/10.4305**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Devolder Santos, George, Anthony, ,		<input type="checkbox"/> Memo Item	Election: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 9002 Queens Blvd			
City Elmhurst	State NY	ZIP Code 11373	<input type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 18550.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 18550.00
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<b>TERMS</b>	Date Incurred M 01 / D 03 / Y 2020	Date Due M M / D D / Y Y Y Y	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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).....▶	18550.00
<b>TOTALS</b> This Period (last page in this line only).....▶	

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

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

NAME OF COMMITTEE (In Full) **DEVOLDER-SANTOS FOR CONGRESS** Transaction ID : **SC/10.4207**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Devolder Santos, George, Anthony, ,		<input type="checkbox"/> Memo Item	Election: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 9002 Queens Blvd			
City Elmhurst	State NY	ZIP Code 11373	<input type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 4200.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 4200.00
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<b>TERMS</b>	Date Incurred M 01 / D 10 / Y 2020	Date Due M M / D D / Y 0 Y Y	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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).....▶	4200.00
<b>TOTALS</b> This Period (last page in this line only).....▶	

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

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

NAME OF COMMITTEE (In Full) **DEVOLDER-SANTOS FOR CONGRESS** Transaction ID : **SC/10.4276**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Devolder Santos, George, Anthony, ,		<input type="checkbox"/> Memo Item	Election: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 9002 Queens Blvd			
City Elmhurst	State NY	ZIP Code 11373	<input type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 2000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 2000.00
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<b>TERMS</b>	Date Incurred M 03 / D 10 / Y 2020	Date Due M M / D D / Y 0 Y Y	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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).....▶	[ ] 2000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	[ ]

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

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

NAME OF COMMITTEE (In Full) **DEVOLDER-SANTOS FOR CONGRESS** Transaction ID : **SC/10.4309**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Devolder Santos, George, Anthony, ,		<input type="checkbox"/> Memo Item	Election: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 9002 Queens Blvd			
City Elmhurst	State NY	ZIP Code 11373	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 50000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 50000.00
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<b>TERMS</b>	Date Incurred M 03 / D 31 / Y 2020	Date Due M M / D D / Y Y Y Y	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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).....▶	50000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	80050.00

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