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

Bright for Congress

ADDRESS (number and street) ▼

PO Box 26141

☐ Check if different than previously reported. (ACC)

Alexandria | VA | 22313-6141 –

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00852053

3. IS THIS REPORT ☒ NEW (N) **OR** ☐ AMENDED (A)

STATE ▼ NH DISTRICT 01

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 MM / DD / YYYY in the State of

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

☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period 08 / 22 / 2024 through 09 / 30 / 2024

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

Type or Print Name of Treasurer Marston, Chris, , ,

Signature of Treasurer *Marston, Chris, , ,* Date 10 / 14 / 2024

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							

FEC **Form 3** (Revised 03/2016)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Bright for Congress

Report Covering the Period: From: 08 / 22 / 2024 To: 09 / 30 / 2024

	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))	1514.54	89049.64
(b) Total Contribution Refunds (from Line 20(d))	16600.00	16600.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	– 15085.46	72449.64
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	40061.77	241794.26
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	3.33
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	40061.77	241790.93
8. Cash on Hand at Close of Reporting Period (from Line 27).....	26906.60	
9. Debts and Obligations Owed **TO** the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed **BY** the Committee (Itemize all on Schedule C and/or Schedule D)	205000.00	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC **Form 3** (Revised 05/2016)

Write or Type Committee Name

Bright for Congress

Report Covering the Period: From: 08 / 22 / 2024 To: 09 / 30 / 2024

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	1114.00	63653.95
(ii) Unitemized	400.54	12117.42
(iii) TOTAL of contributions from individuals ▶	1514.54	75771.37
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	1500.00
(d) The Candidate	0.00	11778.27
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	1514.54	89049.64
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS: (a) Made or Guaranteed by the Candidate	0.00	205000.00
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	205000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	3.33
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.18	0.18
16. **TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) ▶	1514.72	294053.15

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3** (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES	40061.77	241794.26
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	16600.00	16600.00
(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))	16600.00	16600.00
21. OTHER DISBURSEMENTS	62.81	8752.29
22. **TOTAL DISBURSEMENTS** (add Lines 17, 18, 19(c), 20(d), and 21) ▶	56724.58	267146.55

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	82116.46
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	1514.72
25. SUBTOTAL (add Line 23 and Line 24)	83631.18
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	56724.58
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	26906.60

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)
[X] 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)
Bright for Congress

A.
Full Name (Last, First, Middle Initial): BRIGHT, LINDA, J., ,
Mailing Address: 17350 LONG RIDGE
City: SAINT ROBERT | State: MO | Zip Code: 65584-9451
FEC ID number of contributing federal political committee.: C
Name of Employer: NONE | Occupation: RETIRED
Receipt For: 2024
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 1099.01
Date of Receipt: 08 / 23 / 2024
Transaction ID : SA11A.370
Amount of Each Receipt this Period: 36.49
[ ] Memo Item
CONTRIBUTION

B.
Full Name (Last, First, Middle Initial): BRIGHT, LINDA, J., ,
Mailing Address: 17350 LONG RIDGE
City: SAINT ROBERT | State: MO | Zip Code: 65584-9451
FEC ID number of contributing federal political committee.: C
Name of Employer: NONE | Occupation: RETIRED
Receipt For: 2024
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 1099.01
Date of Receipt: 08 / 25 / 2024
Transaction ID : SA11A.372
Amount of Each Receipt this Period: 36.49
[ ] Memo Item
CONTRIBUTION

C.
Full Name (Last, First, Middle Initial): WINRED
Mailing Address: PO BOX 9891
City: ARLINGTON | State: VA | Zip Code: 22219-1891
FEC ID number of contributing federal political committee.: C C00694323
Name of Employer: | Occupation:
Receipt For: 2024
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 31299.83
Date of Receipt: 08 / 22 / 2024
Transaction ID : SA11C.354
Amount of Each Receipt this Period: 572.56
[x] Memo Item
CONTRIBUTION
SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

SUBTOTAL of Receipts This Page (optional) ▶ 72.98

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: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Bright for Congress

A.
Full Name (Last, First, Middle Initial): WHITE, CHRISTOPHER, , ,
Mailing Address: 28 PORTER STREET
City: PORTSMOUTH | State: NH | Zip Code: 03801-4059
FEC ID number of contributing federal political committee.: C
Name of Employer: RETIRED | Occupation: RETIRED
Receipt For: 2024
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 520.51

Date of Receipt: 08 / 22 / 2024
Transaction ID : SA11A.355
Amount of Each Receipt this Period: 520.51
[ ] Memo Item
CONTRIBUTION
EARMARKED FROM WINRED

B.
Full Name (Last, First, Middle Initial): WINRED
Mailing Address: PO BOX 9891
City: ARLINGTON | State: VA | Zip Code: 22219-1891
FEC ID number of contributing federal political committee.: C C00694323
Name of Employer: | Occupation:
Receipt For: 2024
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 31299.83

Date of Receipt: 08 / 23 / 2024
Transaction ID : SA11C.357
Amount of Each Receipt this Period: 624.61
[x] Memo Item
CONTRIBUTION
SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

C.
Full Name (Last, First, Middle Initial): HASTINGS, MARK, , ,
Mailing Address: 7 ERIK DRIVE
City: DOVER | State: NH | Zip Code: 03820-6005
FEC ID number of contributing federal political committee.: C
Name of Employer: RETIRED | Occupation: RETIRED
Receipt For: 2024
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 520.51

Date of Receipt: 08 / 23 / 2024
Transaction ID : SA11A.359
Amount of Each Receipt this Period: 520.51
[ ] Memo Item
CONTRIBUTION
EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional) ▶ 1041.02

TOTAL This Period (last page this line number only) ▶ 1114.00

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Bright for Congress

A. Full Name (Last, First, Middle Initial): ACCIARD, JULIAN, , ,
Mailing Address: 128 NORTH SHORE ROAD
City: DERRY | State: NH | Zip Code: 03038
Purpose of Disbursement: CAMPAIGN CONSULTING
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 23 / 2024
FEC Identification Number: C
Amount of Each Disbursement this Period: 4333.33
Transaction ID : SB17.I221
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): HENRY, TUCKER, , ,
Mailing Address: 51 SNELL ROAD
City: LEE | State: NH | Zip Code: 03861
Purpose of Disbursement: CAMPAIGN CONSULTING
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 23 / 2024
FEC Identification Number: C
Amount of Each Disbursement this Period: 1500.00
Transaction ID : SB17.I216
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): ASHLEY WILLIAMS
Mailing Address: 321 SUMMERCOURT DRIVE
City: SUMMERVILLE | State: SC | Zip Code: 29485
Purpose of Disbursement: NET PAY
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 29 / 2024
FEC Identification Number: C
Amount of Each Disbursement this Period: 1498.11
Transaction ID : SB17.I226
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 7331.44

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Bright for Congress

A. Full Name (Last, First, Middle Initial): CMDI
Mailing Address: 1593 SPRING HILL ROAD
City: VIENNA | State: VA | Zip Code: 22182
Purpose of Disbursement: DATABASE SERVICES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 09 / 11 / 2024
FEC Identification Number: C
Amount of Each Disbursement this Period: 800.00
Transaction ID : SB17.I220
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): CONSTANT CONTACT
Mailing Address: 1601 TRAPELO ROAD
City: WALTHAM | State: MA | Zip Code: 02451
Purpose of Disbursement: ONLINE SERVICES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 09 / 25 / 2024
FEC Identification Number: C
Amount of Each Disbursement this Period: 160.00
Transaction ID : SB17.I231
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): ELECTION CFO
Mailing Address: PO BOX 26141
City: ALEXANDRIA | State: VA | Zip Code: 22313
Purpose of Disbursement: COMPLIANCE CONSULTING
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 09 / 04 / 2024
FEC Identification Number: C
Amount of Each Disbursement this Period: 2193.80
Transaction ID : SB17.I219
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 3153.80

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Bright for Congress

A. Full Name (Last, First, Middle Initial): GUSTO
Mailing Address: 525 20TH STREET
City: SAN FRANCISCO | State: CA | Zip Code: 94107
Purpose of Disbursement: PAYROLL TAXES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 29 / 2024
FEC Identification Number: C
Amount of Each Disbursement this Period: 520.33
Transaction ID : SB17.I225
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): GUSTO
Mailing Address: 525 20TH STREET
City: SAN FRANCISCO | State: CA | Zip Code: 94107
Purpose of Disbursement: PAYROLL PROCESSING
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 09 / 05 / 2024
FEC Identification Number: C
Amount of Each Disbursement this Period: 46.00
Transaction ID : SB17.I229
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): MAJORITY STRATEGIES
Mailing Address: PO BOX 679219
City: DALLAS | State: TX | Zip Code: 75267
Purpose of Disbursement: MAILING
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 30 / 2024
FEC Identification Number: C
Amount of Each Disbursement this Period: 28085.10
Transaction ID : SB17.I217
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 28651.43

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Bright for Congress

A. Full Name (Last, First, Middle Initial): SPECTRUM MONTHLY INC.
Mailing Address: 95 EDDY ROAD, SUITE 101
City: MANCHESTER State: NH Zip Code: 03102
Purpose of Disbursement: PRINTING
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 09 / 04 / 2024
FEC Identification Number: C
Amount of Each Disbursement this Period: 660.00
Transaction ID : SB17.I218
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): WINRED TECHNICAL SERVICES LLC
Mailing Address: 1776 WILSON BOULEVARD, SUITE 530
City: ARLINGTON State: VA Zip Code: 22209
Purpose of Disbursement: FUNDRAISING FEES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 31 / 2024
FEC Identification Number: C
Amount of Each Disbursement this Period: 48.20
Transaction ID : SB17.I227
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): WINRED TECHNICAL SERVICES LLC
Mailing Address: 1776 WILSON BOULEVARD, SUITE 530
City: ARLINGTON State: VA Zip Code: 22209
Purpose of Disbursement: FUNDRAISING FEES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 09 / 30 / 2024
FEC Identification Number: C
Amount of Each Disbursement this Period: 52.03
Transaction ID : SB17.I232
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 760.23

TOTAL This Period (last page this line number only) ▶ 39896.90

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

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

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NAME OF COMMITTEE (In Full)
Bright for Congress

A. Full Name (Last, First, Middle Initial)
LIEH, ANGELA, , ,

Mailing Address 520 EAST MACON STREET

City: SAVANNAH | State: GA | Zip Code: 31401

Purpose of Disbursement: CONTRIBUTION REFUND

Candidate Name

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2024 ☐ Primary ☒ General ☐ Other (specify)

Date of Disbursement: 09 / 18 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 1700.00

Transaction ID : SB20A.I236

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
MILLER, AARON, , ,

Mailing Address 520 EAST MACON STREET

City: SAVANNAH | State: GA | Zip Code: 31401

Purpose of Disbursement: CONTRIBUTION REFUND

Candidate Name

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2024 ☐ Primary ☒ General ☐ Other (specify)

Date of Disbursement: 09 / 18 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 1700.00

Transaction ID : SB20A.I235

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
NIERLING, HEATHER, , ,

Mailing Address 110 TREASURE HILL ROAD

City: SOUTH KENT | State: CT | Zip Code: 06785

Purpose of Disbursement: CONTRIBUTION REFUND

Candidate Name

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2024 ☐ Primary ☒ General ☐ Other (specify)

Date of Disbursement: 09 / 18 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 3300.00

Transaction ID : SB20A.I240

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 6700.00

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)
☐ 17 ☐ 18 ☐ 19a ☐ 19b
☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Bright for Congress

A. Full Name (Last, First, Middle Initial)
RODDY, KATHERINE, , ,

Mailing Address 34984 VINTAGE PLACE

City: ROUND HILL | State: VA | Zip Code: 20141

Purpose of Disbursement: CONTRIBUTION REFUND

Candidate Name

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President

State: District:

Disbursement For: 2024 ☐ Primary ☒ General ☐ Other (specify)

Date of Disbursement: 09 / 18 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 3300.00

Transaction ID : SB20A.I234

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
RODDY, PATRICK, , ,

Mailing Address 34984 VINTAGE PLACE

City: ROUND HILL | State: VA | Zip Code: 20141

Purpose of Disbursement: CONTRIBUTION REFUND

Candidate Name

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President

State: District:

Disbursement For: 2024 ☐ Primary ☒ General ☐ Other (specify)

Date of Disbursement: 09 / 18 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 3300.00

Transaction ID : SB20A.I233

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
SCHNEEBERGER, NORM, , ,

Mailing Address 45 WELCOME HILL RD.

City: W. CHESTERFIELD | State: NH | Zip Code: 03466

Purpose of Disbursement: CONTRIBUTION REFUND

Candidate Name

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President

State: District:

Disbursement For: 2024 ☐ Primary ☒ General ☐ Other (specify)

Date of Disbursement: 09 / 18 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 3300.00

Transaction ID : SB20A.I239

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 9900.00

TOTAL This Period (last page this line number only) ▶ 16600.00

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one)
- [x] 13a
- [ ] 13b

NAME OF COMMITTEE (In Full)
Bright for Congress

Transaction ID : SC10.44

LOAN SOURCE Full Name (Last, First, Middle Initial)
BRIGHT, CHRIS, , ,

☐ Memo Item

Election: 2024
- [x] Primary Candidate Loan
- [ ] General
- [ ] Other (specify) ▼

Mailing Address
PO BOX 26141

City	State	ZIP Code
ALEXANDRIA	VA	22313

[x] Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
45000.00	0.00	45000.00

TERMS

Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
10 / 27 / 2023	On Demand	0% % (apr)	☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
Mailing Address
City | State | ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
Mailing Address
City | State | ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
Mailing Address
City | State | ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
Mailing Address
City | State | ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶ 45000.00

TOTALS 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

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

FOR LINE NUMBER: (check only one)
- [x] 13a
- [ ] 13b

NAME OF COMMITTEE (In Full): Bright for Congress

Transaction ID : SC10.80

LOAN SOURCE Full Name (Last, First, Middle Initial): BRIGHT, CHRIS, , ,

☐ Memo Item

Election: 2024
- [x] Primary Candidate Loan
- [ ] General
- [ ] Other (specify) ▼

Mailing Address: PO BOX 26141

City	State	ZIP Code
ALEXANDRIA	VA	22313

[x] Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
20000.00	0.00	20000.00

TERMS

Date Incurred (MM / DD / YYYY)	Date Due (MM / DD / YYYY)	Interest Rate (If none, enter 0)	Secured:
02 / 23 / 2024	ON DEMAND	0.00 % (apr)	☐ Yes ☒ 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:

SUBTOTALS This Period This Page (optional) ▶ 20000.00

TOTALS 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

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

FOR LINE NUMBER: (check only one)
- [x] 13a
- [ ] 13b

NAME OF COMMITTEE (In Full): Bright for Congress

Transaction ID : SC10.81

LOAN SOURCE Full Name (Last, First, Middle Initial): BRIGHT, CHRIS, , ,

☐ Memo Item

Election: 2024
- [x] Primary Candidate Loan
- [ ] General
- [ ] Other (specify) ▼

Mailing Address: PO BOX 26141

City	State	ZIP Code
ALEXANDRIA	VA	22313

[x] Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
40000.00	0.00	40000.00

TERMS

Date Incurred (MM / DD / YYYY)	Date Due (MM / DD / YYYY)	Interest Rate (If none, enter 0)	Secured:
03 / 27 / 2024	ON DEMAND	0.00 % (apr)	☐ Yes ☒ 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:

SUBTOTALS This Period This Page (optional) ▶ 40000.00

TOTALS 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

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

FOR LINE NUMBER: (check only one)
- [x] 13a
- [ ] 13b

NAME OF COMMITTEE (In Full): Bright for Congress

Transaction ID : SC10.121

LOAN SOURCE Full Name (Last, First, Middle Initial): BRIGHT, CHRIS, , ,

☐ Memo Item

Election: 2024
- [x] Primary
- [ ] General
- [ ] Other (specify) ▼

Mailing Address: PO BOX 26141

City	State	ZIP Code
ALEXANDRIA	VA	22313

☐ Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100000.00	0.00	100000.00

TERMS

Date Incurred (MM / DD / YYYY)	Date Due (MM / DD / YYYY)	Interest Rate (If none, enter 0)	Secured:
06 / 27 / 2024	On Demand	0% (apr)	☐ Yes ☒ 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:

SUBTOTALS This Period This Page (optional) ▶ 100000.00

TOTALS This Period (last page in this line only) ▶ 205000.00

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