

# 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

KATHY LANDING FOR CONGRESS

ADDRESS (number and street)

PO BOX 31338

Check if different than previously reported. (ACC)

CHARLESTON

SC

29417

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C C00708875

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

SC

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

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

07 / 01 / 2019

through

M M / D D / Y Y Y Y

09 / 30 / 2019

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

DATWYLER, THOMAS, , ,

Type or Print Name of Treasurer

Signature of Treasurer

DATWYLER, THOMAS, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y

10 / 15 / 2019

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

Write or Type Committee Name  
**KATHY LANDING FOR CONGRESS**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	45337.60	74578.40
(b) Total Contribution Refunds (from Line 20(d)) .....	1000.00	1000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	44337.60	73578.40
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	48184.11	48995.12
(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)).....	48184.11	48995.12
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<b>303837.77</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>279000.00</b>	

**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

**KATHY LANDING 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).....	42107.60	68157.60
(ii) Unitemized .....	3230.00	6420.80
(iii) TOTAL of contributions from individuals .....	45337.60	74578.40
(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))..	45337.60	74578.40
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	29000.00	279000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	29000.00	279000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	246.25	254.49
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....</b>	74583.85	353832.89

**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.....	48184.11	48995.12
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 .....	1000.00	1000.00
(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)).....	1000.00	1000.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	49184.11	49995.12

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	278438.03
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	74583.85
25. SUBTOTAL (add Line 23 and Line 24).....	353021.88
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	49184.11
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	303837.77

**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 45  
(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)  
**KATHY LANDING FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ARMSTRONG, PETER, , ,**  
Mailing Address 128 ESSEX DRIVE

City: SUMMERVILLE State: SC Zip Code: 29485

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: 300.00

Date of Receipt: 09 / 24 / 2019  
Transaction ID : SA11AI.4472

Amount of Each Receipt this Period: 200.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ASKINS, TIM, , ,**  
Mailing Address 628 CAIN DRIVE

City: MOUNT PLEASANT State: SC Zip Code: 29464

FEC ID number of contributing federal political committee: C

Name of Employer: SELF-EMPLOYED Occupation: CONSTRUCTION

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 850.00

Date of Receipt: 09 / 30 / 2019  
Transaction ID : SA11AI.4497

Amount of Each Receipt this Period: 750.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BAKER, TOMMY, , ,**  
Mailing Address 1511 SAVANNAH HIGHWAY

City: CHARLESTON State: SC Zip Code: 29407

FEC ID number of contributing federal political committee: C

Name of Employer: BAKER MOTOR COMPANY Occupation: ONWER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 30 / 2019  
Transaction ID : SA11AI.4431

Amount of Each Receipt this Period: 1000.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1950.00

**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 45  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**KATHY LANDING FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BARNES, KENNETH, , ,**

Mailing Address 2664 COOPER RIVER DRIVE

City MOUNT PLEASANT State SC Zip Code 29464

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 ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 25 2019

Transaction ID : SA11AI.4386

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BENNETT, MICHAEL, , ,**

Mailing Address PO BOX 1707

City CHARLESTON State SC Zip Code 29412

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

Name of Employer SOUTH HAMPTON VENTURES Occupation OWNER

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  
09 16 2019

Transaction ID : SA11AI.4532

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BENNETT HOSPITALITY**

Mailing Address PO BOX 1707

City CHARLESTON State SC Zip Code 29402

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

Name of Employer Occupation

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  
08 30 2019

Transaction ID : SA11AI.4403

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2500.00

**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 45  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**KATHY LANDING FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BERLINSKY, PHILIP, , ,**

Mailing Address 210 HADDELL STREET

City MOUNT PLEASANT State SC Zip Code 29464

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

Name of Employer RIESEN LAW FIRM, LLP Occupation ATTORNEY

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 30 2019

Transaction ID : SA11AI.4429

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BINGHAM, BRUCE, , ,**

Mailing Address 3040 LINKSLAND ROAD

City MOUNT PLEASANT State SC Zip Code 29466

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 ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 30 2019

Transaction ID : SA11AI.4424

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BOESCH, DOYCE, , ,**

Mailing Address 4515 W STREET NW

City WASHINGTON State DC Zip Code 20007

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

Name of Employer SELF-EMPLOYED Occupation GOVERNMENT RELATIONS

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 14 2019

Transaction ID : SA11AI.4309

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00

**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 8 OF 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**KATHY LANDING FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BUCK, EDDIE, JR., ,**

Mailing Address 78 ASHLEY POINTE DRIVE  
SUITE 300

City CHARLESTON State SC Zip Code 29407

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

Name of Employer JUNIPER HOLDINGS Occupation COMMERCIAL REAL ESTATE

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2019

Transaction ID : SA11AI.4433

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BUNCH, DAVID, , ,**

Mailing Address 6605 SEEWEE ROAD

City AWENDAW State SC Zip Code 29429

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

Name of Employer BUNCH TRUCK GROUP Occupation OWNER

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  
 08 / 05 / 2019

Transaction ID : SA11AI.4354

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BUNCH, DAVID, , ,**

Mailing Address 6605 SEEWEE ROAD

City AWENDAW State SC Zip Code 29429

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

Name of Employer BUNCH TRUCK GROUP Occupation OWNER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2019

Transaction ID : SA11AI.4423

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶

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

2000.00



**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 45  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**KATHY LANDING FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BYRNES, JOHN, , ,**

Mailing Address 2110 SEWEE INDIAN CT

City MOUNT PLEASANT State SC Zip Code 29466

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

Name of Employer JMB VENTURES, LLC Occupation OWNER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 18 / 2019

Transaction ID : SA11AI.4319

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BYRNES, JOHN, , ,**

Mailing Address 2110 SEWEE INDIAN CT

City MOUNT PLEASANT State SC Zip Code 29466

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

Name of Employer JMB VENTURES, LLC Occupation OWNER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2019

Transaction ID : SA11AI.4410

Amount of Each Receipt this Period  
200.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BYRNES, JOHN, , ,**

Mailing Address 2110 SEWEE INDIAN CT

City MOUNT PLEASANT State SC Zip Code 29466

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

Name of Employer JMB VENTURES, LLC Occupation OWNER

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  
09 / 23 / 2019

Transaction ID : SA11AI.4511

Amount of Each Receipt this Period  
300.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00

**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 10 OF 45  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**KATHY LANDING FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CALDWELL, ROBERT, , ,**

Mailing Address PO BOX 1504

City MOUNT PLEASANT State SC Zip Code 29465

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

Name of Employer CALDWELL COMMERCIAL, LLC Occupation EXECUTIVE

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  
08 / 30 / 2019

Transaction ID : SA11AI.4435

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CARLISLE, TAMMY, , ,**

Mailing Address 346 PINCKNEY ROAD

City GEORGETOWN State SC Zip Code 29440

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 13 / 2019

Transaction ID : SA11AI.4444

Amount of Each Receipt this Period  
400.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CARMODY, CHARLES, , ,**

Mailing Address 107 NEW STREET

City MOUNT PLEASANT State SC Zip Code 29464

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

Name of Employer CBRE INC. Occupation REAL ESTATE

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2019

Transaction ID : SA11AI.4419

Amount of Each Receipt this Period  
250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1650.00

**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 11 OF 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**KATHY LANDING FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**COLLETT, MARCIA, , ,**  
 Mailing Address 15 WILD LAUREL LANE  
 City HILTON HEAD ISLAND State SC Zip Code 29926  
 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 ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2019  
**Transaction ID : SA11AI.4498**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**COOMBS, HANK, , ,**  
 Mailing Address 2101 SEWEE INDIAN CT  
 City MOUNT PLEASANT State SC Zip Code 29466  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CHAS PILOTS Occupation PILOT  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 04 / 2019  
**Transaction ID : SA11AI.4352**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**COSTA, CYNTHIA, , ,**  
 Mailing Address 909 PARROT CREEK WAY  
 City CHARLESTON State SC Zip Code 29412  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SOUTHEASTERN FACIAL Occupation PLASTIC SURGERY, PA  
 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  
 09 / 23 / 2019  
**Transaction ID : SA11AI.4530**  
 Amount of Each Receipt this Period  
 750.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶  
**TOTAL** This Period (last page this line number only)..... ▶

1750.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 12 OF 45  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**KATHY LANDING FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DICKINSON, RAY, , ,**  
Mailing Address 447 ANSLEY CT

City MOUNT PLEASANT    State SC    Zip Code 29464

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 ▼  
 \_\_\_\_\_ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09    23    2019

Transaction ID : SA11AI.4512

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**EDWARDS, GARY, , ,**  
Mailing Address 3485 COLONEL VANDERHORST CIRCLE

City MOUNT PLEASANT    State SC    Zip Code 29466

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

Name of Employer MSI    Occupation PRINCIPAL

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  
 08    08    2019

Transaction ID : SA11AI.4363

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**FLACK, ELEANOR, , ,**  
Mailing Address 1820 ION AVENUE

City SULLIVANS ISLAND    State SC    Zip Code 29482

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

Name of Employer HOMEMAKER    Occupation HOMEMAKER

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08    30    2019

Transaction ID : SA11AI.4411

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ \_\_\_\_\_ 1350.00

**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: (check only one)		PAGE 13 OF 45	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**KATHY LANDING FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**FLOWERS, GARRY, , ,**

Mailing Address 309 PALM BLVD

City ISLE OF PALMS	State SC	Zip Code 29451
-----------------------	-------------	-------------------

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

Name of Employer FLUOR	Occupation EXECUTIVE
---------------------------	-------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2019

**Transaction ID : SA11AI.4417**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**GARRETT, TODD, , ,**

Mailing Address 1315 ASHLEY RIVER ROAD

City CHARLESTON	State SC	Zip Code 29407
--------------------	-------------	-------------------

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

Name of Employer AVISON YOUNG	Occupation PRINCIPLE
----------------------------------	-------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 29 / 2019

**Transaction ID : SA11AI.4338**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**HALL, WILLIAM, , ,**

Mailing Address 27 WRAGGBOROUGH LANE

City CHARLESTON	State SC	Zip Code 29403
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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 ▼  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2019

**Transaction ID : SA11AI.4413**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	_____ 750.00
<b>TOTAL</b> 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)		PAGE 14 OF 45	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**KATHY LANDING FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**HARDWICK, RAYMON, , ,**

Mailing Address 116 SOUTH BATTERY STREET

City CHARLESTON	State SC	Zip Code 29104
--------------------	-------------	-------------------

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 ▼  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2019

**Transaction ID : SA11AI.4421**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**HUEY, JAMES, , ,**

Mailing Address 828 MIDDLE STREET

City SULLIVANS ISLAND	State SC	Zip Code 29482
--------------------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED	Occupation ACCOUNTANT
-----------------------------------	--------------------------

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  
 08 / 06 / 2019

**Transaction ID : SA11AI.4361**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JACKSON, MARYLEN, , ,**

Mailing Address 635 WOODLAND DRIVE

City WILLSTON	State SC	Zip Code 29853
------------------	-------------	-------------------

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 ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2019

**Transaction ID : SA11AI.4332**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 2500.00
<b>TOTAL</b> 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)		PAGE 15 OF 45	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**KATHY LANDING FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JENSEN, ELIZABETH, , ,**

Mailing Address 2808 RIVER VISTA WAY

City MOUNT PLEASANT	State SC	Zip Code 29466
------------------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED	Occupation NURSE PRACTITIONER
-----------------------------------	----------------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
08 / 28 / 2019

**Transaction ID : SA11AI.4394**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JONES, JOANNE, , ,**

Mailing Address 1806 TENNYSON ROW

City MOUNT PLEASANT	State SC	Zip Code 29466
------------------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED	Occupation MARKETING
-----------------------------------	-------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
09 / 30 / 2019

**Transaction ID : SA11AI.4500**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**KOOPMAN, JOHN, , ,**

Mailing Address 131 STERRY DRIVE

City GREENE	State NY	Zip Code 13778
----------------	-------------	-------------------

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

Name of Employer UHS BINGHAMPTON GENERAL	Occupation CHAPLAIN
---	------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
09 / 27 / 2019

**Transaction ID : SA11AI.4536**

Amount of Each Receipt this Period  
200.00

Memo Item  
REATTRIBUTE TO SPOUCE

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	1450.00
<b>TOTAL</b> 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 16 OF 45  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**KATHY LANDING FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KOOPMAN, LESILE, , ,**

Mailing Address 131 STERRY DRIVE

City GREENE State NY Zip Code 13778

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 ▼  
3800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 02 / 2019

Transaction ID : SA11AI.4350

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**KOOPMAN, LESILE, , ,**

Mailing Address 131 STERRY DRIVE

City GREENE State NY Zip Code 13778

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 ▼  
5800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 27 / 2019

Transaction ID : SA11AI.4518

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**KOOPMAN, LESILE, , ,**

Mailing Address 131 STERRY DRIVE

City GREENE State NY Zip Code 13778

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 ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 27 / 2019

Transaction ID : SA11AI.4535

Amount of Each Receipt this Period  
- 200.00

Memo Item  
Reattribute: CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2800.00

**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 17 OF 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**KATHY LANDING FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LANDING, FRANK, , ,**  
 Mailing Address 3009 SCOUT TRAIL  
 City JAMESTOWN State NC Zip Code 27282  
 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 ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2019  
**Transaction ID : SA11AI.4481**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**LANDING, JEFF, , ,**  
 Mailing Address 13102 GROVETON CIRCLE  
 City MIDLOTHIAN State VA Zip Code 23114  
 FEC ID number of contributing federal political committee. C  
 Name of Employer PROMIUS PHARMA Occupation PHARMACEUTICAL  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 22 / 2019  
**Transaction ID : SA11AI.4325**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LANDING, TINA, , ,**  
 Mailing Address 3009 SCOUT TRAIL  
 City JAMESTOWN State NC Zip Code 27282  
 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 ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2019  
**Transaction ID : SA11AI.4482**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1500.00  
**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: (check only one)		PAGE 18 OF 45	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**KATHY LANDING FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LANDING, TINA, , ,**

Mailing Address 3009 SCOUT TRAIL

City JAMESTOWN	State NC	Zip Code 27282
-------------------	-------------	-------------------

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 ▼  
1020.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
09 / 30 / 2019

**Transaction ID : SA11AI.4503**

Amount of Each Receipt this Period  
20.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**LEASK, LISA, , ,**

Mailing Address 2705 PARKER'S LANDING ROAD

City MOUNT PLEASANT	State SC	Zip Code 29466
------------------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED	Occupation BUSINESS OWNER
-----------------------------------	------------------------------

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
07 / 05 / 2019

**Transaction ID : SA11AI.4292**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LEASK, LISA, , ,**

Mailing Address 2705 PARKER'S LANDING ROAD

City MOUNT PLEASANT	State SC	Zip Code 29466
------------------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED	Occupation BUSINESS OWNER
-----------------------------------	------------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
09 / 23 / 2019

**Transaction ID : SA11AI.4454**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	2020.00
<b>TOTAL</b> 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 19 OF 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**KATHY LANDING FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LEASK, NOAH, , ,**  
 Mailing Address 2705 PARKER'S LANDING ROAD  
 City MOUNT PLEASANT State SC Zip Code 29466  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation BUSINESS OWNER  
 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  
 07 / 05 / 2019  
**Transaction ID : SA11AI.4294**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**LEASK, NOAH, , ,**  
 Mailing Address 2705 PARKER'S LANDING ROAD  
 City MOUNT PLEASANT State SC Zip Code 29466  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation BUSINESS OWNER  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2019  
**Transaction ID : SA11AI.4378**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**LEASK, NOAH, , ,**  
 Mailing Address 2705 PARKER'S LANDING ROAD  
 City MOUNT PLEASANT State SC Zip Code 29466  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation BUSINESS OWNER  
 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  
 09 / 23 / 2019  
**Transaction ID : SA11AI.4455**  
 Amount of Each Receipt this Period  
 800.00  
 Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2800.00  
**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 20 OF 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**KATHY LANDING FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LEASK, NOAH, , ,**

Mailing Address 2705 PARKER'S LANDING ROAD

City MOUNT PLEASANT State SC Zip Code 29466

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

Name of Employer SELF-EMPLOYED Occupation BUSINESS OWNER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2019

Transaction ID : SA11AI.4540

Amount of Each Receipt this Period  
 1000.00

Memo Item Contribution

**B.** Full Name (Last, First, Middle Initial)  
**MAGALDI, CHRISTOPHER, , ,**

Mailing Address 1725 CANYON OAKS DRIVE

City MOUNT PLEASANT State SC Zip Code 29464

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

Name of Employer THOMAS AND HUTTON ENGINEERING Occupation ENGINEER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 12 / 2019

Transaction ID : SA11AI.4375

Amount of Each Receipt this Period  
 500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MARINO, CHRISTOPHER, , ,**

Mailing Address 1588 CAPEL STREET

City MOUNT PLEASANT State SC Zip Code 29466

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

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  
 08 / 30 / 2019

Transaction ID : SA11AI.4426

Amount of Each Receipt this Period  
 1000.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶

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

2500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 21 OF 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**KATHY LANDING FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MARINO, CHRISTOPHER, , ,**  
 Mailing Address 1588 CAPEL STREET  
 City MOUNT PLEASANT State SC Zip Code 29466  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2019  
**Transaction ID : SA11AI.4428**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MARLOWE, SUSAN, , ,**  
 Mailing Address 280 MOSSY OAK WAY  
 City MOUNT PLEASANT State SC Zip Code 29464  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 19 / 2019  
**Transaction ID : SA11AI.4382**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MORGAN, DAVID, , ,**  
 Mailing Address 844 ALLBRITTON BLVD.  
 SUITE 200  
 City MOUNT PLEASANT State SC Zip Code 29464  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LITTON ENTERTAINMENT Occupation CEO  
 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  
 08 / 06 / 2019  
**Transaction ID : SA11AI.4358**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2250.00  
**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 22 OF 45  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**KATHY LANDING FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NEUMEYER, MARK, , ,**

Mailing Address 4261 COOLIDGE STREET

City MOUNT PLEASANT State SC Zip Code 29466

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

Name of Employer JEAR LOGISTICS, LLC Occupation SALES

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 29 2019

Transaction ID : SA11AI.4397

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**PARDIECK, MATTHEW, , ,**

Mailing Address 821 HIGH BATTERY CIRCLE

City MOUNT PLEASANT State SC Zip Code 29466

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

Name of Employer RAYMOND JAMES Occupation FINANCIAL ADVISOR

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 08 2019

Transaction ID : SA11AI.4527

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**PARKER, DANIEL, , ,**

Mailing Address 202 NORTH SHELMORE BLVD.

City MOUNT PLEASANT State SC Zip Code 29464

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

Name of Employer RAYMOND JAMES Occupation MANAGING DIRECTOR

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 23 2019

Transaction ID : SA11AI.4458

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶

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

1000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 23 OF 45  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**KATHY LANDING FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**PARSONS, CHARLES, , ,**

Mailing Address 440 FIELD CV

City MOUNT PLEASANT State SC Zip Code 29464

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

Name of Employer RAYMOND JAMES Occupation FINANCIAL ADVISOR

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 30 2019

Transaction ID : SA11AI.4437

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**RAYMOND JAMES BANK**

Mailing Address 880 CARILLON PARKWAY

City SAINT PETERSBURG State FL Zip Code 33716

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

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
342.09

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 30 2019

Transaction ID : SA11AI.4492

Amount of Each Receipt this Period  
87.60

Memo Item  
INTEREST INCOME

**C.** Full Name (Last, First, Middle Initial)  
**RHYNE, LINDA, , ,**

Mailing Address 901 SIMMONS STREET

City MOUNT PLEASANT State SC Zip Code 29464

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

Name of Employer RAYMOND JAMES Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 30 2019

Transaction ID : SA11AI.4415

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 587.60

**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 24 OF 45  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**KATHY LANDING FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**SARKIS, GEORGE, , ,**

Mailing Address 17 IRON BOTTOM LANE

City CHARLESTON State SC Zip Code 29492

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 ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 26 / 2019

Transaction ID : SA11AI.4330

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SARKIS, GEORGE, , ,**

Mailing Address 17 IRON BOTTOM LANE

City CHARLESTON State SC Zip Code 29492

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 ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 29 / 2019

Transaction ID : SA11AI.4396

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SHIMP, DAVID, , ,**

Mailing Address 1551 BEN SAWYER BLVD  
4B

City MOUNT PLEASANT State SC Zip Code 29464

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 ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 23 / 2019

Transaction ID : SA11AI.4460

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1250.00

**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 25 OF 45  
(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)  
**KATHY LANDING FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**SIMON, MARSHALL, , ,**

Mailing Address 916 HOUSTON NORTHCUTT BLVD.

City MOUNT PLEASANT	State SC	Zip Code 29464
------------------------	-------------	-------------------

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

Name of Employer GWYNN'S OF MOUNT PLEASANT	Occupation PRESIDENT
---	-------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2019

**Transaction ID : SA11AI.4440**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SMALL, ROBERT, , ,**

Mailing Address 111 COLEMAN BLVD  
SUITE 403

City MOUNT PLEASANT	State SC	Zip Code 29464
------------------------	-------------	-------------------

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

Name of Employer AVTEX	Occupation OWNER
---------------------------	---------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 27 / 2019

**Transaction ID : SA11AI.4391**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**STAPLETON, CAROLINE, , ,**

Mailing Address 509 10TH STREET SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

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

Name of Employer BUCKLEY LLP	Occupation LAWYER
---------------------------------	----------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 29 / 2019

**Transaction ID : SA11AI.4336**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	_____ 3250.00
<b>TOTAL</b> 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 26 OF 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**KATHY LANDING FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**SUMMERFORD, TED, , ,**  
 Mailing Address 1656 FAIRWAY PLACE LANE  
 City MOUNT PLEASANT State SC Zip Code 29464  
 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 ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 26 / 2019  
**Transaction ID : SA11AI.4389**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTUION

**B.** Full Name (Last, First, Middle Initial)  
**THOMPSON, ANN, , ,**  
 Mailing Address 3137 PIGNATELLI CRESCENT  
 City MOUNT PLEASANT State SC Zip Code 29466  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CREATIVE BILLING SOLUTIONS Occupation MANAGER  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 19 / 2019  
**Transaction ID : SA11AI.4449**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**THOMPSON, BRUCE, , ,**  
 Mailing Address 3137 PIGNATELLI CRESCENT  
 City MOUNT PLEASANT State SC Zip Code 29466  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CREATIVE WORKSITE SOLUTIONS Occupation OWNER  
 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  
 07 / 16 / 2019  
**Transaction ID : SA11AI.4316**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1500.00  
**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: (check only one)		PAGE 27 OF 45	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**KATHY LANDING FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**THOMPSON, BRUCE, , ,**

Mailing Address 3137 PIGNATELLI CRESCENT

City MOUNT PLEASANT	State SC	Zip Code 29466
------------------------	-------------	-------------------

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

Name of Employer CREATIVE WORKSITE SOLUTIONS	Occupation OWNER
---	---------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 19 / 2019

**Transaction ID : SA11AI.4451**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**WALKER, JEFF, , ,**

Mailing Address 1787 SHELL RING CIRCLE

City MOUNT PLEASANT	State SC	Zip Code 29466
------------------------	-------------	-------------------

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

Name of Employer HEALTHY GOAT, LLC	Occupation OWNER
---------------------------------------	---------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2019

**Transaction ID : SA11AI.4456**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**WAMSLEY, PATRICK, , ,**

Mailing Address 3126 SAND MARSH LANE

City MOUNT PLEASANT	State SC	Zip Code 29466
------------------------	-------------	-------------------

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

Name of Employer MUSC	Occupation ACCOUNTANT
--------------------------	--------------------------

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  
 08 / 11 / 2019

**Transaction ID : SA11AI.4368**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 1500.00
<b>TOTAL</b> 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 28 OF 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**KATHY LANDING FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**YOUMANS, JAMES, , ,**

Mailing Address 3509 HENRIETTA HARTFORD ROAD

City MOUNT PLEASANT State SC Zip Code 29466

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

Name of Employer XO BUNCH ORGANIZATIONS Occupation CFO

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2019

**Transaction ID : SA11AI.4478**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item  
**CONTRIBUTIONS**

**B.** Full Name (Last, First, Middle Initial)  
**ZIMMER, JANET, , ,**

Mailing Address 129 COOPER RIVER DRIVE

City MOUNT PLEASANT State SC Zip Code 29464

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 ▼  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2019

**Transaction ID : SA11AI.4510**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item  
**CONTRIBUTION**

**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).....▶	_____ 500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	_____ 42107.60

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 29 OF 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**KATHY LANDING FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LANDING, KATHERINE, DUBEAU, ,**

Mailing Address 2114 SEWEE INDIAN COURT

City MOUNT PLEASANT	State SC	Zip Code 29466
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** H0SC01386

Name of Employer LANDING FOR CONGRESS	Occupation CANDIDATE
--	-------------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
279000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
09 / 30 / 2019

**Transaction ID : SA13A.4513**

Amount of Each Receipt this Period  

29000.00
----------

Memo Item  
CANDIDATE 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).....▶	29000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	29000.00

**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)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**KATHY LANDING FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RAYMOND JAMES BANK**

Mailing Address 880 CARILLON PARKWAY

City SAINT PETERSBURG State FL Zip Code 33716

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 254.49

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 30 2019

Transaction ID : SA15.4401

Amount of Each Receipt this Period  
 102.67

Memo Item  
 INTEREST INCOME

**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).....▶	102.67
<b>TOTAL</b> This Period (last page this line number only).....▶	102.67

**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 31 OF 45	
	<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)  
**KATHY LANDING FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. 9SEVEN CONSULTING</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2019
Mailing Address 499 SOUTH CAPITOL STREET SW #405		FEC Identification Number C C00708875
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement COMPLIANCE CONSULTING	Category/ Type 001	Amount of Each Disbursement this Period 500.00
Candidate Name <b>KATHY LANDING 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: SC	District: 01	Transaction ID : SB17.4304 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. 9SEVEN CONSULTING</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2019
Mailing Address 499 SOUTH CAPITOL STREET SW #405		FEC Identification Number C C00708875
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement COMPLIANCE CONSULTING	Category/ Type 001	Amount of Each Disbursement this Period 690.10
Candidate Name <b>KATHY LANDING 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: SC	District: 01	Transaction ID : SB17.4402 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. 9SEVEN CONSULTING</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2019
Mailing Address 499 SOUTH CAPITOL STREET SW #405		FEC Identification Number C C00708875
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement COMPLIANCE CONSULTING	Category/ Type 001	Amount of Each Disbursement this Period 1030.00
Candidate Name <b>KATHY LANDING 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: SC	District: 01	Transaction ID : SB17.4377 <input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2220.10
<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 32 OF 45	
	<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)  
**KATHY LANDING FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. 9SEVEN CONSULTING</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2019
Mailing Address 499 SOUTH CAPITOL STREET SW #405		FEC Identification Number C C00708875
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement COMPLIANCE CONSULTING	Category/Type 001	Amount of Each Disbursement this Period 1030.00
Candidate Name <b>KATHY LANDING 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: SC	District: 01	Transaction ID : SB17.4446 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2019
Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR		FEC Identification Number C C00708875
City DALLAS	State TX	Zip Code 75201
Purpose of Disbursement CREDIT CARD FEES	Category/Type 001	Amount of Each Disbursement this Period 80.60
Candidate Name <b>KATHY LANDING 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: SC	District: 01	Transaction ID : SB17.4313 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2019
Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR		FEC Identification Number C C00708875
City DALLAS	State TX	Zip Code 75201
Purpose of Disbursement CREDIT CARD FEES	Category/Type 001	Amount of Each Disbursement this Period 10.30
Candidate Name <b>KATHY LANDING 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: SC	District: 01	Transaction ID : SB17.4314 <input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1120.90
<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 33 OF 45			
	<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)  
**KATHY LANDING FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2019
Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR		FEC Identification Number C C00708875
City DALLAS	State TX	Zip Code 75201
Purpose of Disbursement CREDIT CARD FEES	Category/Type 001	Amount of Each Disbursement this Period 2.30
Candidate Name <b>KATHY LANDING 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: SC	District: 01	Transaction ID : SB17.4315 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2019
Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR		FEC Identification Number C C00708875
City DALLAS	State TX	Zip Code 75201
Purpose of Disbursement CREDIT CARD FEES	Category/Type 001	Amount of Each Disbursement this Period 24.60
Candidate Name <b>KATHY LANDING 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: SC	District: 01	Transaction ID : SB17.4323 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2019
Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR		FEC Identification Number C C00708875
City DALLAS	State TX	Zip Code 75201
Purpose of Disbursement CREDIT CARD FEES	Category/Type 001	Amount of Each Disbursement this Period 24.60
Candidate Name <b>KATHY LANDING 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: SC	District: 01	Transaction ID : SB17.4324 <input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	51.50
<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 34 OF 45	
	<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)  
**KATHY LANDING FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2019
Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR		FEC Identification Number C C00708875
City DALLAS	State TX	Zip Code 75201
Purpose of Disbursement CREDIT CARD FEES	Category/Type 001	Amount of Each Disbursement this Period 20.30
Candidate Name <b>KATHY LANDING 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: SC	District: 01	Transaction ID : SB17.4329 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2019
Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR		FEC Identification Number C C00708875
City DALLAS	State TX	Zip Code 75201
Purpose of Disbursement CREDIT CARD FEES	Category/Type 001	Amount of Each Disbursement this Period 40.30
Candidate Name <b>KATHY LANDING 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: SC	District: 01	Transaction ID : SB17.4347 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2019
Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR		FEC Identification Number C C00708875
City DALLAS	State TX	Zip Code 75201
Purpose of Disbursement CREDIT CARD FEES	Category/Type 001	Amount of Each Disbursement this Period 20.60
Candidate Name <b>KATHY LANDING 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: SC	District: 01	Transaction ID : SB17.4340 <input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	81.20
<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 35 OF 45	
	<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)  
**KATHY LANDING FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2019	
Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR			FEC Identification Number C C00708875	
City DALLAS	State TX	Zip Code 75201	Amount of Each Disbursement this Period 60.60	
Purpose of Disbursement CREDIT CARD FEES		Category/Type 001	Transaction ID : SB17.4351	
Candidate Name KATHY LANDING 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: SC District: 01				

Full Name (Last, First, Middle Initial) <b>B. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2019	
Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR			FEC Identification Number C C00708875	
City DALLAS	State TX	Zip Code 75201	Amount of Each Disbursement this Period 80.60	
Purpose of Disbursement CREDIT CARD FEES		Category/Type 001	Transaction ID : SB17.4360	
Candidate Name KATHY LANDING 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: SC District: 01				

Full Name (Last, First, Middle Initial) <b>C. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2019	
Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR			FEC Identification Number C C00708875	
City DALLAS	State TX	Zip Code 75201	Amount of Each Disbursement this Period 40.30	
Purpose of Disbursement CREDIT CARD FEES		Category/Type 001	Transaction ID : SB17.4365	
Candidate Name KATHY LANDING 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: SC District: 01				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	181.50
<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 36 OF 45	
	<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)  
**KATHY LANDING FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2019
Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR		FEC Identification Number C C00708875
City DALLAS	State TX	Zip Code 75201
Purpose of Disbursement CREDIT CARD FEES	Category/Type 001	Amount of Each Disbursement this Period 44.60
Candidate Name <b>KATHY LANDING 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: SC	District: 01	Transaction ID : SB17.4367 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2019
Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR		FEC Identification Number C C00708875
City DALLAS	State TX	Zip Code 75201
Purpose of Disbursement CREDIT CARD FEES	Category/Type 001	Amount of Each Disbursement this Period 4.30
Candidate Name <b>KATHY LANDING 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: SC	District: 01	Transaction ID : SB17.4372 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2019
Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR		FEC Identification Number C C00708875
City DALLAS	State TX	Zip Code 75201
Purpose of Disbursement CREDIT CARD FEES	Category/Type 001	Amount of Each Disbursement this Period 40.30
Candidate Name <b>KATHY LANDING 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: SC	District: 01	Transaction ID : SB17.4379 <input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	89.20
<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 37 OF 45	
	<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)  
**KATHY LANDING FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2019	
Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR			FEC Identification Number C C00708875	
City DALLAS	State TX	Zip Code 75201	Amount of Each Disbursement this Period 2.30	
Purpose of Disbursement CREDIT CARD FEES		Category/Type 001	Transaction ID : SB17.4380	
Candidate Name KATHY LANDING 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: SC	District: 01			

Full Name (Last, First, Middle Initial) <b>B. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2019	
Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR			FEC Identification Number C C00708875	
City DALLAS	State TX	Zip Code 75201	Amount of Each Disbursement this Period 20.30	
Purpose of Disbursement CREDIT CARD FEES		Category/Type 001	Transaction ID : SB17.4385	
Candidate Name KATHY LANDING 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: SC	District: 01			

Full Name (Last, First, Middle Initial) <b>C. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2019	
Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR			FEC Identification Number C C00708875	
City DALLAS	State TX	Zip Code 75201	Amount of Each Disbursement this Period 50.90	
Purpose of Disbursement CREDIT CARD FEES		Category/Type 001	Transaction ID : SB17.4393	
Candidate Name KATHY LANDING 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: SC	District: 01			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	73.50
<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 38 OF 45			
	<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)  
**KATHY LANDING FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2019		
Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR			FEC Identification Number <b>C</b> C00708875		
City DALLAS	State TX	Zip Code 75201	Amount of Each Disbursement this Period 20.30		
Purpose of Disbursement CREDIT CARD FEES		Category/ Type 001	Transaction ID : <b>SB17.4441</b>		
Candidate Name <b>KATHY LANDING FOR CONGRESS</b>		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: SC	District: 01				

Full Name (Last, First, Middle Initial) <b>B. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2019		
Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR			FEC Identification Number <b>C</b> C00708875		
City DALLAS	State TX	Zip Code 75201	Amount of Each Disbursement this Period 28.90		
Purpose of Disbursement CREDIT CARD FEES		Category/ Type 001	Transaction ID : <b>SB17.4452</b>		
Candidate Name <b>KATHY LANDING FOR CONGRESS</b>		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: SC	District: 01				

Full Name (Last, First, Middle Initial) <b>C. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2019		
Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR			FEC Identification Number <b>C</b> C00708875		
City DALLAS	State TX	Zip Code 75201	Amount of Each Disbursement this Period 171.30		
Purpose of Disbursement CREDIT CARD FEES		Category/ Type 001	Transaction ID : <b>SB17.4453</b>		
Candidate Name <b>KATHY LANDING FOR CONGRESS</b>		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: SC	District: 01				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	220.50
<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 39 OF 45	
	<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)  
**KATHY LANDING FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2019
Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR		FEC Identification Number C C00708875
City DALLAS	State TX	Zip Code 75201
Purpose of Disbursement CREDIT CARD FEES	Category/Type 001	Amount of Each Disbursement this Period 10.80
Candidate Name <b>KATHY LANDING 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: SC	District: 01	Transaction ID : SB17.4477 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2019
Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR		FEC Identification Number C C00708875
City DALLAS	State TX	Zip Code 75201
Purpose of Disbursement CREDIT CARD FEES	Category/Type 001	Amount of Each Disbursement this Period 40.30
Candidate Name <b>KATHY LANDING 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: SC	District: 01	Transaction ID : SB17.4480 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2019
Mailing Address 1920 MCKINNEY AVENUE 7TH FLOOR		FEC Identification Number C C00708875
City DALLAS	State TX	Zip Code 75201
Purpose of Disbursement CREDIT CARD FEES	Category/Type 001	Amount of Each Disbursement this Period 119.10
Candidate Name <b>KATHY LANDING 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: SC	District: 01	Transaction ID : SB17.4485 <input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	170.20
<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 40 OF 45	
	<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)  
**KATHY LANDING FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. BEAUFORT COUNTY REPUBLICAN PARTY</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2019
Mailing Address 1913 MARION STREET		FEC Identification Number C C00708875
City COLUMBIA	State SC	Zip Code 29201
Purpose of Disbursement CONTRIBUTION	Category/Type 011	
Candidate Name <b>KATHY LANDING FOR CONGRESS</b>	Amount of Each Disbursement this Period 1000.00	
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) ▼	Transaction ID : SB17.4462
State: SC District: 01	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. MIX, AUSTIN, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2019
Mailing Address 801 O'RUNAWAY BAY LANE		FEC Identification Number C C00708875
City MOUNT PLEASANT	State SC	Zip Code 29464
Purpose of Disbursement CAMPAIGN CONSULTING	Category/Type 001	
Candidate Name <b>KATHY LANDING FOR CONGRESS</b>	Amount of Each Disbursement this Period 1500.00	
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) ▼	Transaction ID : SB17.4298
State: SC District: 01	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. MIX, AUSTIN, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2019
Mailing Address 801 O'RUNAWAY BAY LANE		FEC Identification Number C C00708875
City MOUNT PLEASANT	State SC	Zip Code 29464
Purpose of Disbursement CAMPAIGN CONSULTING	Category/Type 001	
Candidate Name <b>KATHY LANDING FOR CONGRESS</b>	Amount of Each Disbursement this Period 1500.00	
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) ▼	Transaction ID : SB17.4366
State: SC District: 01	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4000.00
<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 41 OF 45	
	<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)  
**KATHY LANDING FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MIX, AUSTIN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2019	
Mailing Address 801 O'RUNAWAY BAY LANE			FEC Identification Number <b>C</b> C00708875	
City MOUNT PLEASANT	State SC	Zip Code 29464	Amount of Each Disbursement this Period 2052.44	
Purpose of Disbursement CAMPAIGN CONSULTING		Category/ Type 001	Transaction ID : <b>SB17.4439</b>	
Candidate Name <b>KATHY LANDING FOR CONGRESS</b>		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: SC District: 01				

Full Name (Last, First, Middle Initial) <b>B. UPT STRATEGIES</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2019	
Mailing Address PO BOX 31403			FEC Identification Number <b>C</b> C00708875	
City CHARLESTON	State SC	Zip Code 29417	Amount of Each Disbursement this Period 25992.61	
Purpose of Disbursement CAMPAIGN CONSULTING		Category/ Type 001	Transaction ID : <b>SB17.4345</b>	
Candidate Name <b>KATHY LANDING FOR CONGRESS</b>		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: SC District: 01				

Full Name (Last, First, Middle Initial) <b>C. VOTER CONTACT SOLUTIONS, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2019	
Mailing Address 300 HICKORY LANE			FEC Identification Number <b>C</b> C00708875	
City MAULDIN	State SC	Zip Code 29662	Amount of Each Disbursement this Period 362.88	
Purpose of Disbursement WEB ADS		Category/ Type 001	Transaction ID : <b>SB17.4306</b>	
Candidate Name <b>KATHY LANDING FOR CONGRESS</b>		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: SC District: 01				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	28407.93
<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 42 OF 45	
	<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)  
**KATHY LANDING FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. VOTER CONTACT SOLUTIONS, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2019
Mailing Address 300 HICKORY LANE		FEC Identification Number C C00708875
City MAULDIN	State SC	Zip Code 29662
Purpose of Disbursement DATA	Category/Type 001	
Candidate Name <b>KATHY LANDING FOR CONGRESS</b>		Amount of Each Disbursement this Period 7500.00
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: SC District: 01	Transaction ID : SB17.4308 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. WILLIAMS STRATEGY GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2019
Mailing Address PO BOX 216		FEC Identification Number C C00708875
City CROSS HILL	State SC	Zip Code 29332
Purpose of Disbursement CAMPAIGN CONSULTING	Category/Type 001	
Candidate Name <b>KATHY LANDING FOR CONGRESS</b>		Amount of Each Disbursement this Period 3500.00
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: SC District: 01	Transaction ID : SB17.4348 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. WILLIAMS STRATEGY GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2019
Mailing Address PO BOX 216		FEC Identification Number C C00708875
City CROSS HILL	State SC	Zip Code 29332
Purpose of Disbursement CAMPAIGN CONSULTING	Category/Type 001	
Candidate Name <b>KATHY LANDING FOR CONGRESS</b>		Amount of Each Disbursement this Period 567.58
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: SC District: 01	Transaction ID : SB17.4384 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	11567.58
<b>TOTAL</b> This Period (last page this line number only).....▶	48184.11

**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 43 OF 45			
	<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)  
**KATHY LANDING FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. BENNETT HOSPITALITY</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2019		
Mailing Address PO BOX 1707			FEC Identification Number C C00708875		
City CHARLESTON	State SC	Zip Code 29402	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Transaction ID : SB20A.4405		
Candidate Name KATHY LANDING 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: SC	District: 01				

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 <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:				

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 <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).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1000.00

# SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **KATHY LANDING FOR CONGRESS** Transaction ID : **SC/10.4291**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) LANDING, KATHERINE, DUBEAU, ,		<input type="checkbox"/> Memo Item	Election: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 2114 SEWEE INDIAN COURT			
City MOUNT PLEASANT	State SC	ZIP Code 29466	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 250000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 250000.00
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<b>TERMS</b>	Date Incurred M 06 / D 29 / Y 2019	Date Due M M / D D / Y 12/31/2020	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input checked="" type="checkbox"/> Yes <input 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).....▶	250000.00
<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) **KATHY LANDING FOR CONGRESS** Transaction ID : **SC/10.4513**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) LANDING, KATHERINE, DUBEAU, ,		<input type="checkbox"/> Memo Item	Election: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 2114 SEWEE INDIAN COURT			
City MOUNT PLEASANT	State SC	ZIP Code 29466	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 29000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 29000.00
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<b>TERMS</b>	Date Incurred M 09 / D 30 / Y 2019	Date Due M M / D D / Y 12/31/2020	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input checked="" type="checkbox"/> Yes <input 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).....▶	29000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	279000.00

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