

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 JAMES HAYES FOR CONGRESS

ADDRESS (number and street) PO BOX 110157 Check if different than previously reported. (ACC) PITTSBURGH PA 15232 CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER C C00838185 3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE DISTRICT PA 12

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 11 / 05 / 2024 in the State of PA (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on / / in the State of

5. Covering Period 10 / 01 / 2024 through 10 / 16 / 2024

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Jukus, Joel, , , Signature of Treasurer Jukus, Joel, , , Date 10 / 22 / 2024

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**JAMES HAYES FOR CONGRESS**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	<input type="text" value="11887.20"/>	<input type="text" value="126878.16"/>
(b) Total Contribution Refunds (from Line 20(d)) .....	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	<input type="text" value="11887.20"/>	<input type="text" value="126878.16"/>
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	<input type="text" value="15233.22"/>	<input type="text" value="120826.30"/>
(b) Total Offsets to Operating Expenditures (from Line 14).....	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	<input type="text" value="15233.22"/>	<input type="text" value="120826.30"/>
8. Cash on Hand at Close of Reporting Period (from Line 27).....	<input type="text" value="4451.48"/>	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="12932.98"/>	

For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov).

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**JAMES HAYES FOR CONGRESS**

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	6190.00	90417.29
(ii) Unitemized .....	2897.20	27010.87
(iii) TOTAL of contributions from individuals .....	9087.20	117428.16
(b) Political Party Committees.....	0.00	5000.00
(c) Other Political Committees (such as PACs).....	2800.00	4450.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	11887.20	126878.16
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	11887.20	126878.16

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	15233.22	120826.30
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	1600.38
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	15233.22	122426.68

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	7797.50
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	11887.20
25. SUBTOTAL (add Line 23 and Line 24).....	19684.70
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	15233.22
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	4451.48

# 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 18  
(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)  
**JAMES HAYES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
Albensi, Donald, , ,

Mailing Address 9241 Riley Way

City Irwin State PA Zip Code 15642

FEC ID number of contributing federal political committee. C

Name of Employer retired Occupation retired

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 07 / 2024

Transaction ID : SA11AI.5607

Amount of Each Receipt this Period  
250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
Allen, Cheryl, , ,

Mailing Address 2535 Red Oak Ct

City Allison Park State PA Zip Code 15101

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 04 / 2024

Transaction ID : SA11AI.5579

Amount of Each Receipt this Period  
250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Bolas, James, , ,

Mailing Address 202 Brookside Blvd

City Pittsburgh State PA Zip Code 15241

FEC ID number of contributing federal political committee. C

Name of Employer Berkeley Research Group LLC Occupation Senior Managing Consultant

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 04 / 2024

Transaction ID : SA11AI.5577

Amount of Each Receipt this Period  
250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00

**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 18  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**JAMES HAYES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
Bonaroti, John, , ,

Mailing Address 5594 Field Stream Dr

City Export	State PA	Zip Code 15632
----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer retired	Occupation retired
-----------------------------	-----------------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.5581**

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 412 Luzerne Dr

City Monroeville	State PA	Zip Code 15146
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FEC ID number of contributing federal political committee.

Name of Employer BPMI	Occupation IT
--------------------------	------------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.5610**

Amount of Each Receipt this Period

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Delorenzo, Gary, , ,

Mailing Address 451 Colonial Dr

City Monroeville	State PA	Zip Code 15146
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FEC ID number of contributing federal political committee.

Name of Employer retired	Occupation retired
-----------------------------	-----------------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.5611**

Amount of Each Receipt this Period

Memo Item

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

**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 7 OF 18	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**JAMES HAYES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
Glick, Ira, , ,

Mailing Address 1427 Jefferson Heights Rd

City Pittsburgh	State PA	Zip Code 15235
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FEC ID number of contributing federal political committee.

Name of Employer Cowkad Construction LLC	Occupation Construction
---	----------------------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.5604**

Amount of Each Receipt this Period

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
Goldfine, Howard, , ,

Mailing Address 712 Southwark Lane

City Henrico	State VA	Zip Code 23229
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer retired	Occupation retired
-----------------------------	-----------------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.5548**

Amount of Each Receipt this Period

Memo Item  
EARMARKED THROUGH WINRED

**C.** Full Name (Last, First, Middle Initial)  
Goldfine, Howard, , ,

Mailing Address 712 Southwark Lane

City Henrico	State VA	Zip Code 23229
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer retired	Occupation retired
-----------------------------	-----------------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11AI.5549**

Amount of Each Receipt this Period

Memo Item  
EARMARKED THROUGH WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	<input type="text" value="390.00"/>
<b>TOTAL</b> This Period (last page this line number only)..... ▶	<input type="text" value=""/>

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 OF 18  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**JAMES HAYES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
LaMarca, Lou, , ,

Mailing Address 344 Greene Dr

City Jefferson State PA Zip Code 15025

FEC ID number of contributing federal political committee. C

Name of Employer Lamarca Construction Occupation Owner

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 07 / 2024

Transaction ID : SA11AI.5540

Amount of Each Receipt this Period  
1700.00

Memo Item  
EARMARKED THROUGH WINRED

**B.** Full Name (Last, First, Middle Initial)  
Manne, Beverly, , ,

Mailing Address 2137 Beechwood Blvd

City Pittsburgh State PA Zip Code 15217

FEC ID number of contributing federal political committee. C

Name of Employer Tucker Arensberger PC Occupation Attorney

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 15 / 2024

Transaction ID : SA11AI.5614

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
McGartland, Anthony, , ,

Mailing Address 2511 Covington Ct

City Murraysville State PA Zip Code 15668

FEC ID number of contributing federal political committee. C

Name of Employer retired Occupation retired

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 03 / 2024

Transaction ID : SA11AI.5531

Amount of Each Receipt this Period  
100.00

Memo Item  
EARMARKED THROUGH WINRED

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

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

2300.00



# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 18	
	<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)  
**JAMES HAYES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
Mock, John, , ,

Mailing Address 592 Meadowbrook Rd

City Trafford	State PA	Zip Code 15085
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FEC ID number of contributing federal political committee. **C**

Name of Employer JOHNNY MOCK'S AUTO BODY SHOP	Occupation Owner
--	---------------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 07 / 2024

**Transaction ID : SA11AI.5608**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer	Occupation
------------------	------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
43809.84

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 07 / 2024

**Transaction ID : SA11AI.5625**

Amount of Each Receipt this Period  
491.00

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer	Occupation
------------------	------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
46269.84

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 14 / 2024

**Transaction ID : SA11AI.5623**

Amount of Each Receipt this Period  
2460.00

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	250.00
<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 10 OF 18  
(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)  
**JAMES HAYES FOR CONGRESS**

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
46547.04

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 15 / 2024

Transaction ID : SA11AI.5626

Amount of Each Receipt this Period  
277.20

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED

**B.** Full Name (Last, First, Middle Initial)  
Young, Leonard, , ,

Mailing Address 656 Cooper Rd

City Monroeville State PA Zip Code 15146

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

Name of Employer Occupation  
Lens Landscaping Owner

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 07 / 2024

Transaction ID : SA11AI.5612

Amount of Each Receipt this Period  
1000.00

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).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6190.00

# 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 18  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**JAMES HAYES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**FINANCIAL SERVICES POLITICAL COMMITTEE**

Mailing Address **LIBERTY CENTER-27TH FLOOR**

City **PITTSBURGH** State **PA** Zip Code **15222**

FEC ID number of contributing federal political committee. **C C00162735**

Name of Employer Occupation

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**2500.00**

Date of Receipt  
**10 / 07 / 2024**

**Transaction ID : SA11C.5620**

Amount of Each Receipt this Period  
**2500.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Monroeville Republican Committee**

Mailing Address **118 Monticello Dr**

City **Monroeville** State **PA** Zip Code **15146**

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

Name of Employer Occupation

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**300.00**

Date of Receipt  
**10 / 07 / 2024**

**Transaction ID : SA11C.5618**

Amount of Each Receipt this Period  
**300.00**

Memo Item  
Federally Permissible funds

**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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>2800.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>2800.00</b>

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 18			
	<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)  
**JAMES HAYES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Lamar Companies**

Mailing Address PO Box 746966

City Atlanta State GA Zip Code 30374

Purpose of Disbursement Billboards

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 03 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 790.00

Transaction ID : SB17.5638

Memo Item

Full Name (Last, First, Middle Initial)

**B. Lamar Companies**

Mailing Address PO Box 746966

City Atlanta State GA Zip Code 30374

Purpose of Disbursement Billboards

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 10311.00

Transaction ID : SB17.5636

Memo Item

Full Name (Last, First, Middle Initial)

**C. Osage Research LLC**

Mailing Address 3 PPG Place

City Pittsburgh State PA Zip Code 15222

Purpose of Disbursement Polling and Research

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 03 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 1500.00

Transaction ID : SB17.5631

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 12601.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 18	
	<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)  
**JAMES HAYES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Penneco Outdoor Advertising</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2024
Mailing Address 6608 US-22 Ste 307		FEC Identification Number C
City Delmont	State PA	Zip Code 15626
Purpose of Disbursement Billboards	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 900.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.5633
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Rightway Compliance LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2024
Mailing Address 4075 Linglestown Rd #119		FEC Identification Number C
City Harrisburg	State PA	Zip Code 17112
Purpose of Disbursement Accounting and Compliance Service	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 750.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.5632
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. The Jewish Chronicle</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2024
Mailing Address 5915 Beacon Street		FEC Identification Number C
City Pittsburgh	State PA	Zip Code 15217
Purpose of Disbursement Newspaper Advertisement	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 565.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.5635
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2215.00
<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)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**JAMES HAYES FOR CONGRESS**

**A. The Jewish Chronicle**

Full Name (Last, First, Middle Initial)

Mailing Address 5915 Beacon Street

City Pittsburgh State PA Zip Code 15217

Purpose of Disbursement Newspaper Advertisement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 280.00

Transaction ID : SB17.5630

Memo Item

**B. Winred Technical Services LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 Wilson Blvd Suite 530

City Arlington State VA Zip Code 22219

Purpose of Disbursement Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 07 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 19.35

Transaction ID : SB17.5627

Memo Item

**C. Winred Technical Services LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 Wilson Blvd Suite 530

City Arlington State VA Zip Code 22219

Purpose of Disbursement Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 14 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 96.92

Transaction ID : SB17.5628

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 396.27

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 18	
	<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)  
**JAMES HAYES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Winred Technical Services LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2024	
Mailing Address 1776 Wilson Blvd Suite 530			FEC Identification Number C	
City Arlington	State VA	Zip Code 22219	Amount of Each Disbursement this Period 10.95	
Purpose of Disbursement Processing Fee		Category/ Type	Transaction ID : SB17.5629	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10.95
<b>TOTAL</b> This Period (last page this line number only).....▶	15223.22

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)

**JAMES HAYES FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HAYES, JAMES, , Dr.,

Nature of Debt (Purpose):

'Testing the Waters' Research/Polling Study

Mailing Address 508 ROSLYN PL

City

PITTSBURGH

State

PA

Zip Code

15232

Outstanding Balance Beginning This Period

9000.00

Transaction ID : SD10.4278

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HAYES, JAMES, , Dr.,

Nature of Debt (Purpose):

Travel

Mailing Address 508 ROSLYN PL

City

PITTSBURGH

State

PA

Zip Code

15232

Outstanding Balance Beginning This Period

1845.27

Transaction ID : SD10.4434

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1845.27

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HAYES, JAMES, , Dr.,

Nature of Debt (Purpose):

Trave-Mileage

Mailing Address 508 ROSLYN PL

City

PITTSBURGH

State

PA

Zip Code

15232

Outstanding Balance Beginning This Period

486.01

Transaction ID : SD10.4429

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

486.01

1) **SUBTOTALS** This Period This Page (optional) .....

11331.28

2) **TOTALS** This Period (last page this line number only) .....

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....

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



**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)

**JAMES HAYES FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>HAYES, JAMES, , Dr.,</b>			Nature of Debt (Purpose): Candidate Filing Fee
Mailing Address 508 ROSLYN PL			
City PITTSBURGH	State PA	Zip Code 15232	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="150.00"/>		<b>Transaction ID : SD10.4831</b>	
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="150.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>HAYES, JAMES, , Dr.,</b>			Nature of Debt (Purpose): Sponsorship
Mailing Address 508 ROSLYN PL			
City PITTSBURGH	State PA	Zip Code 15232	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="650.00"/>		<b>Transaction ID : SD10.4830</b>	
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="650.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>HAYES, JAMES, , Dr.,</b>			Nature of Debt (Purpose): Campaign Tshirts and hats
Mailing Address 508 ROSLYN PL			
City PITTSBURGH	State PA	Zip Code 15232	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="801.70"/>		<b>Transaction ID : SD10.5517</b>	
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="801.70"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input style="width: 100%;" type="text" value="1601.70"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input style="width: 100%;" type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input style="width: 100%;" type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input style="width: 100%;" type="text"/>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**JAMES HAYES FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Osage Research LLC</b>			Nature of Debt (Purpose): Polling and Research
Mailing Address 3 PPG Place			
City Pittsburgh	State PA	Zip Code 15222	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="1500.00"/>		<b>Transaction ID : SD10.5194</b>	
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="1500.00"/>	Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text"/>			
Amount Incurred This Period <input style="width:100%;" type="text"/>	Payment This Period <input style="width:100%;" type="text"/>	Outstanding Balance at Close of This Period <input style="width:100%;" type="text"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text"/>			
Amount Incurred This Period <input style="width:100%;" type="text"/>	Payment This Period <input style="width:100%;" type="text"/>	Outstanding Balance at Close of This Period <input style="width:100%;" type="text"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input style="width:100%;" type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input style="width:100%;" type="text" value="12932.98"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input style="width:100%;" type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input style="width:100%;" type="text" value="12932.98"/>