

**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

CLYDE FOR CONGRESS INC

ADDRESS (number and street)

PO BOX 888



Check if different than previously reported. (ACC)

JEFFERSON

GA

30549-0888

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00740100

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

GA

09

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

11 / 05 / 2024

in the State of

GA

5. Covering Period

M M / D D / Y Y Y Y

10 / 17 / 2024

through

M M / D D / Y Y Y Y

11 / 25 / 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 KILGORE, PAUL, , ,

Signature of Treasurer

KILGORE, PAUL, , ,

Date

M M / D D / Y Y Y Y

12 / 05 / 2024

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

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

CLYDE FOR CONGRESS INC

Report Covering the Period: From: 10 / 17 / 2024 To: 11 / 25 / 2024

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	43447.75	509290.10
(b) Total Contribution Refunds (from Line 20(d))	0.00	1000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	43447.75	508290.10
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	19007.37	553908.66
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	120.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	19007.37	553788.66
8. Cash on Hand at Close of Reporting Period (from Line 27)	86217.15	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	1308863.64	

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

CLYDE FOR CONGRESS INC

Report Covering the Period: From: 10 / 17 / 2024 To: 11 / 25 / 2024

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of 11 / 05 / 2024 (date of general election)	COLUMN C Total for 11 / 06 / 2024 (date after general election) through 11 / 25 / 2024 (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
19353.12	358443.30	0.00
(ii) Unitemized		
1094.63	24596.80	20.00
(iii) Total of contributions from individuals		
20447.75	383040.10	20.00
(b) Political Party Committees		
0.00	0.00	0.00
(c) Other Political Committees		
23000.00	126250.00	0.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
43447.75	509290.10	20.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	6342.95	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	46500.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	46500.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	120.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.05	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
43447.75	562253.10	20.00

POST-ELECTION DETAILED SUMMARY PAGE
Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

Write or Type Committee Name

CLYDE FOR CONGRESS INC

Report Covering the Period: From: 10 / 17 / 2024 To: 11 / 25 / 2024

II. DISBURSEMENTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
19007.37	553908.66	60.00
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
0.00	1000.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00

0.00

0.00

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00

1000.00

0.00

21. OTHER DISBURSEMENTS

36000.00

44900.00

0.00

22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

55007.37

599808.66

60.00

III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

43447.75

508290.10

20.00

IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

19007.37

553788.66

60.00

V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....

25. SUBTOTAL (add Line 23 and Line 24).....

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)

97776.77

43447.75

141224.52

55007.37

86217.15

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 41
☒ 11a 12	☐ 11b 13a
☐ 11c 13b	☐ 11d 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) CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial) BECK, SAMUEL, , ,			Date of Receipt M M / D D / Y Y Y Y Y 10 24 2024	
Mailing Address 898 HIGHWAY 441 S			Transaction ID : A5A245DF8BD024F219E5	
City CLAYTON	State GA	Zip Code 30525-5423	Amount of Each Receipt this Period 3300.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer BECK FUNERAL HOME		Occupation FUNERAL DIRECTOR		
Receipt For: 2024 ☐ Primary ☒ General ☐ Other (specify) ▼		Election Cycle-to-Date 3300.00		

Full Name (Last, First, Middle Initial) CHURCH, NANCY, L., ,			Date of Receipt M M / D D / Y Y Y Y Y 11 05 2024	
Mailing Address 902 HOG CREEK RD			Transaction ID : AC3C0994D41CD4B4B84A	
City HIAWASSEE	State GA	Zip Code 30546-3026	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer NONE		Occupation HOMEMAKER		
Receipt For: 2024 ☐ Primary ☒ General ☐ Other (specify) ▼		Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) CIOCHETTI, HOLLY, W, ,			Date of Receipt M M / D D / Y Y Y Y Y 11 05 2024	
Mailing Address 460 ANDERSON DR			Transaction ID : A1F95FFEEC66042D9886	
City CLAYTON	State GA	Zip Code 30525-2897	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer SELF EMPLOYED		Occupation BOOKKEEPER		
Receipt For: 2024 ☐ Primary ☒ General ☐ Other (specify) ▼		Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	4300.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 41

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

FOWLER, CHARLES, W., , JR.

A.

Mailing Address 249 SPRINGSIDE RD

City

LONGWOOD

State

FL

Zip Code

32779-4985

FEC ID number of contributing
federal political committee.

C

Name of Employer

GLOBAL DEFENSE MGMT

Occupation

PRESIDENT

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
10		29		2024

Transaction ID : A26CE139492A8460099C

Amount of Each Receipt this Period

3.12

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

B.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

31809.92

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
10		29		2024

Transaction ID : A4EE1DB394C0B4A438C4

Amount of Each Receipt this Period

3.12

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

C.

Full Name (Last, First, Middle Initial)

FOWLER, CHARLES, W., , JR.

Mailing Address 249 SPRINGSIDE RD

City

LONGWOOD

State

FL

Zip Code

32779-4985

FEC ID number of contributing
federal political committee.

C

Name of Employer

GLOBAL DEFENSE MGMT

Occupation

PRESIDENT

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
10		29		2024

Transaction ID : A0BC5199EB7324F7B9E2

Amount of Each Receipt this Period

- 203.12

☒ Memo Item

REATTRIBUTION FROM

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

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

3.12

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: (check only one)	PAGE 9 OF 41			
☒ 11a 12	☐ 11b 13a	☐ 11c 13b	☐ 11d 14	☐ 15

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NAME OF COMMITTEE (In Full) CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial) FOWLER, AGATA, , ,			Date of Receipt M M / D D / Y Y Y Y Y 10 29 2024
Mailing Address 249 SPRINGSIDE RD			Transaction ID : A05C3CC83D54E4CFE8F6
City LONGWOOD	State FL	Zip Code 32779-4985	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 203.12
Name of Employer SELF EMPLOYED		Occupation MANAGER	☒ Memo Item REATTRIBUTION TO
Receipt For: 2024 ☐ Primary ☒ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼ 203.12	

Full Name (Last, First, Middle Initial) FOWLER, CHARLES, W., , JR.			Date of Receipt M M / D D / Y Y Y Y Y 10 29 2024
Mailing Address 249 SPRINGSIDE RD			Transaction ID : A8406E95056974148BBC
City LONGWOOD	State FL	Zip Code 32779-4985	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 3500.00
Name of Employer GLOBAL DEFENSE MGMT		Occupation PRESIDENT	☐ Memo Item EARMARKED (NON-DIRECTED) THROUGH WINRED
Receipt For: 2024 ☐ Primary ☒ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼ 3300.00	

Full Name (Last, First, Middle Initial) WINRED			Date of Receipt M M / D D / Y Y Y Y Y 10 29 2024
Mailing Address PO BOX 9891			Transaction ID : A154FB53D2EE84682BE2
City ARLINGTON	State VA	Zip Code 22219-1891	
FEC ID number of contributing federal political committee. C C00694323			Amount of Each Receipt this Period 3500.00
Name of Employer		Occupation	☒ Memo Item INTERMEDIARY TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.
Receipt For: 2024 ☐ Primary ☒ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼ 31809.92	

SUBTOTAL of Receipts This Page (optional)..... ▶	3500.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:		PAGE 10 OF 41	
(check only one)			
☒ 11a	☐ 11b	☐ 11c	☐ 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full) CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial) HARRISON, CAROL, J., ,			Date of Receipt M M / D D / Y Y Y Y Y 10 24 2024	
Mailing Address 1480 BRADLEY GIN RD			Transaction ID : A6D0376426B264FA79CE	
City MONROE	State GA	Zip Code 30656-4434	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer PUREFUN, INC.		Occupation OWNER		
Receipt For: 2024 ☐ Primary ☒ General ☐ Other (specify) ▼		Election Cycle-to-Date 2500.00		

Full Name (Last, First, Middle Initial) HARRISON, TODD, S., ,			Date of Receipt M M / D D / Y Y Y Y Y 10 24 2024	
Mailing Address 1480 BRADLEY GIN RD			Transaction ID : A6B6F23CBC8784FBDA65	
City MONROE	State GA	Zip Code 30656-4434	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer PUREFUN, INC.		Occupation OWNER		
Receipt For: 2024 ☐ Primary ☒ General ☐ Other (specify) ▼		Election Cycle-to-Date 2500.00		

Full Name (Last, First, Middle Initial) HINMAN, ROY, H, ,			Date of Receipt M M / D D / Y Y Y Y Y 11 05 2024	
Mailing Address 100 ARRICOLA AVE			Transaction ID : A40C37DC263EA4846B31	
City SAINT AUGUSTINE	State FL	Zip Code 32080-4515	Amount of Each Receipt this Period 3300.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer SELF EMPLOYED		Occupation PHYSICIAN		
Receipt For: 2024 ☐ Primary ☒ General ☐ Other (specify) ▼		Election Cycle-to-Date 3300.00		

SUBTOTAL of Receipts This Page (optional).....▶	8300.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:		PAGE 11 OF 41	
(check only one)			
☒ 11a	☐ 11b	☐ 11c	☐ 11d
☐ 12	☐ 13a	☐ 13b	☐ 14
		☐ 15	

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NAME OF COMMITTEE (In Full) CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial) KIMSEY, THOMAS, , ,			Date of Receipt M M / D D / Y Y Y Y Y 10 26 2024	
Mailing Address 3198 EDGEWATER DR			Transaction ID : A5A62A7C849694B45A5E	
City GAINESVILLE	State GA	Zip Code 30501-1434	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer THOMAS USAF GROUP, LLC		Occupation EXECUTIVE		
Receipt For: 2024 ☐ Primary ☒ General ☐ Other (specify) ▼		Election Cycle-to-Date 2500.00		

Full Name (Last, First, Middle Initial) POPE, CHARLES, , ,			Date of Receipt M M / D D / Y Y Y Y Y 11 05 2024	
Mailing Address 610 MEADOW RUN CT			Transaction ID : ACF541FB289694FB1A86	
City CLARKESVILLE	State GA	Zip Code 30523-3966	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer PATTERSON PUMP COMPANY		Occupation PRESIDENT		
Receipt For: 2024 ☐ Primary ☒ General ☐ Other (specify) ▼		Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) SMITH, LYNNE, P., ,			Date of Receipt M M / D D / Y Y Y Y Y 11 05 2024	
Mailing Address PO BOX 61			Transaction ID : A161AF9AD20234EC19D2	
City MURRAYVILLE	State GA	Zip Code 30564-0061	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer 1406 CONSULTING		Occupation VP COMMUNICATIONS		
Receipt For: 2024 ☐ Primary ☒ General ☐ Other (specify) ▼		Election Cycle-to-Date 2000.00		

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)
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FOR LINE NUMBER: (check only one)	PAGE 12 OF 41
☒ 11a 12	☐ 11b 13a
☐ 11c 13b	☐ 11d 14
☐ 15	

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NAME OF COMMITTEE (In Full)
CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial) WAYNE, DAREN, CULBREATH, ,			Date of Receipt M M / D D / Y Y Y Y Y 10 24 2024	
Mailing Address 5533 MAINSAIL WAY			Transaction ID : A5150FA7C9CCA4A37BCF	
City GAINESVILLE	State GA	Zip Code 30504-8163	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer WAYNE TRADING		Occupation OWNER		
Receipt For: 2024 ☐ Primary ☒ General ☐ Other (specify) ▼		Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) WHELCHER, E JOHN, ,			Date of Receipt M M / D D / Y Y Y Y Y 10 25 2024	
Mailing Address 377 HERRINGTON DR NE			Transaction ID : A8504922451E346DEBC0	
City ATLANTA	State GA	Zip Code 30342-3819	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer NONE		Occupation RETIRED		
Receipt For: 2024 ☐ Primary ☒ General ☐ Other (specify) ▼		Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) WINRED			Date of Receipt M M / D D / Y Y Y Y Y 10 25 2024	
Mailing Address PO BOX 9891			Transaction ID : A3BB46B3F0F2049698BE	
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00694323		Memo Item		
Name of Employer		Occupation		
Receipt For: 2024 ☐ Primary ☒ General ☐ Other (specify) ▼		Election Cycle-to-Date 31809.92		

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	19353.12

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 41

☐ 11a	☐ 11b	☒ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

AMERICA'S CREDIT UNIONS PAC OF CREDIT UNION NATIONAL ASSOCIATION, INC.

A.Mailing Address 99 M ST SE
STE 300

City

WASHINGTON

State

DC

Zip Code

20003-3957

FEC ID number of contributing
federal political committee.**C** C00007880

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	2	4

Transaction ID : A9D8BE0996998433297D

Amount of Each Receipt this Period

2500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

ASSOCIATED BUILDERS AND CONTRACTORS, INC. PAC (ABC PAC)

Mailing Address 440 FIRST STREET NW
SUITE 200

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.**C** C00010421

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	2	4

Transaction ID : A06221D13B9C840A69AE

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

BUILD PAC OF THE NATIONAL ASSOCIATION OF HOME BUILDERS (BUILDPAC)

Mailing Address 1201 15TH ST NW

City

WASHINGTON

State

DC

Zip Code

20005-2899

FEC ID number of contributing
federal political committee.**C** C00000901

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

6500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	2	4

Transaction ID : A311E4307808946AB804

Amount of Each Receipt this Period

3000.00

☐ Memo Item

6500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 41

☐ 11a	☐ 11b	☒ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

GEORGIA POWER COMPANY FEDERAL PAC

Mailing Address 241 RALPH MCGILL BLVD NE

City
ATLANTAState
GAZip Code
30308-3374FEC ID number of contributing
federal political committee.**C** C00119776

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 24 2024

Transaction ID : AEB095A240A584687853

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HEIDELBERG MATERIALS US, INC. PAC

Mailing Address 300 E JOHN CARPENTER FWY

City
IRVINGState
TXZip Code
75062-2727FEC ID number of contributing
federal political committee.**C** C00493270

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 29 2024

Transaction ID : AC54B8C306DC64715A1D

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL PRO-LIFE ALLIANCE PACMailing Address 5211 PORT ROYAL RD
STE 500City
SPRINGFIELDState
VAZip Code
22151-2100FEC ID number of contributing
federal political committee.**C** C00358051

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 24 2024

Transaction ID : AC13E8CDC8F6543A7859

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

5500.00

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 15 OF 41	
☐ 11a 12	☐ 11b 13a	☒ 11c 13b	☐ 11d 14
		☐ 15	

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NAME OF COMMITTEE (In Full) CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial) REGIONS FINANCIAL CORPORATION PAC			Date of Receipt M M / D D / Y Y Y Y Y 11 / 05 / 2024
Mailing Address 1015 15TH ST NW STE 920			Transaction ID : A19416F8B73844DDDBAF
City WASHINGTON	State DC	Zip Code 20005-2623	
FEC ID number of contributing federal political committee. C C00432252			Amount of Each Receipt this Period 1000.00
Name of Employer		Occupation	☐ Memo Item
Receipt For: 2024 ☐ Primary ☒ General ☐ Other (specify) ▼		Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) THE HOME DEPOT INC. PAC			Date of Receipt M M / D D / Y Y Y Y Y 10 / 22 / 2024
Mailing Address 1155 F ST NW STE 400			Transaction ID : AD59FEA85EAC446A0996
City WASHINGTON	State DC	Zip Code 20004-1346	
FEC ID number of contributing federal political committee. C C00284885			Amount of Each Receipt this Period 5000.00
Name of Employer		Occupation	☐ Memo Item
Receipt For: 2024 ☐ Primary ☒ General ☐ Other (specify) ▼		Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) THE LOOSE GROUP			Date of Receipt M M / D D / Y Y Y Y Y 10 / 17 / 2024
Mailing Address 4279 ROSWELL RD NE STE 208			Transaction ID : A3529D6DD98874B1CA78
City ATLANTA	State GA	Zip Code 30342-3705	
FEC ID number of contributing federal political committee. C C00010793			Amount of Each Receipt this Period 5000.00
Name of Employer		Occupation	☐ Memo Item
Receipt For: 2024 ☐ Primary ☒ General ☐ Other (specify) ▼		Election Cycle-to-Date 5000.00	

SUBTOTAL of Receipts This Page (optional).....▶	11000.00
TOTAL This Period (last page this line number only).....▶	23000.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 41

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

A. ANEDOTMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC TRANSACTION FEE

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	7		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

8.30

Transaction ID : BDA65CA5E118A4EDE9D4

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOTMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC TRANSACTION FEE

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

20.30

Transaction ID : B2B8C9FC9EBB24F81BC3

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOTMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC TRANSACTION FEE

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

4.30

Transaction ID : B764CCFE35E854D5DAC5

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

32.90

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 41

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

A. ARISTOTLE INTERNATIONAL, INC.

Mailing Address 205 PENNSYLVANIA AVE SE

City
WASHINGTONState
DCZip Code
20003-1164Purpose of Disbursement
DATABASE SOFTWARE

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

2250.00

Transaction ID : BC256676BCA1448579A7

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. COLLINS, ANDREW, , ,Mailing Address 355 JENNINGS MILL PKWY
APT 631City
ATHENSState
GAZip Code
30606-7257Purpose of Disbursement
FIELD CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

750.00

Transaction ID : B0871C161999A4E85B6C

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. J. RUSSELL & ASSOC., LLC, D/B/A WAR ROOM STRATEGIESMailing Address 3651 MARS HILL RD
STE 1200City
WATKINSVILLEState
GAZip Code
30677-5985Purpose of Disbursement
STRATEGY CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

12213.02

Transaction ID : B13D502A382DA4A0D915

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

15213.02

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 41

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

A. PROFESSIONAL DATA SERVICES

Mailing Address 824 S MILLEDGE AVE STE 101

City
ATHENSState
GAZip Code
30605-1332Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

2021.00

Transaction ID : B11315CFFCD6A4428BA7

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ROBERTS, LINDSAY, MARIE, ,Mailing Address 235 PHARR RD NE
APT 2519City
ATLANTAState
GAZip Code
30305-2518Purpose of Disbursement
FUNDRAISING CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : B9F86C380CA0C4B36891

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICESMailing Address 1776 WILSON BLVD
STE 520City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
CC TRANSACTION FEE

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

39.40

Transaction ID : BE25D157B9E5A401DBFE

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3560.40

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 41

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICESMailing Address 1776 WILSON BLVD
STE 520City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
CC TRANSACTION FEE

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

2.10

Transaction ID : B276C5CA9DA0B41C1B11

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICESMailing Address 1776 WILSON BLVD
STE 520City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
CC TRANSACTION FEE

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

137.90

Transaction ID : BF3C9E27BA6474EE2A0C

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICESMailing Address 1776 WILSON BLVD
STE 520City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
CC TRANSACTION FEE

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	4		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

0.62

Transaction ID : B47CD54083CD14640B13

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

140.62

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 41

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

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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICESMailing Address 1776 WILSON BLVD
STE 520City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
CC TRANSACTION FEE

001

Category/
Type

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

0.43

Transaction ID : B38CB03B1EC974133B98

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.43

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

18947.37

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 41

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

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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

A. ALASKANS FOR NICK BEGICH

Mailing Address PO BOX 671710

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2024

City
CHUGIAKState
AKZip Code
99567-1710

FEC Identification Number

C	C00792341
---	-----------

Purpose of Disbursement
CONTRIBUTION

011

Category/
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : BDC53AA6C6AD44F72B87

☐ Memo Item

Candidate Name

BEGICH, NICHOLAS, III, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State: AK

District: 00

Full Name (Last, First, Middle Initial)

B. CISCOMANI FOR CONGRESS

Mailing Address PO BOX 35103

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2024

City
TUCSONState
AZZip Code
85740-5103

FEC Identification Number

C	C00786194
---	-----------

Purpose of Disbursement
CONTRIBUTION

011

Category/
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : B27750F58D290406FA7D

☐ Memo Item

Candidate Name

CISCOMANI, JUAN, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State: AZ

District: 06

Full Name (Last, First, Middle Initial)

C. ELECTGABEEVANS.COM

Mailing Address PO BOX 350608

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2024

City
WESTMINSTERState
COZip Code
80035-0608

FEC Identification Number

C	C00849844
---	-----------

Purpose of Disbursement
CONTRIBUTION

011

Category/
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : B47E61F02F3C242C3961

☐ Memo Item

Candidate Name

EVANS, TIMOTHY GABRIEL, JOSEPH, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State: CO

District: 08

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

6000.00

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

--

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 41

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

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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF DAVID SCHWEIKERTMailing Address 8175 E EVANS RD
UNIT 13176City
SCOTTSDALEState
AZZip Code
85267-4907Purpose of Disbursement
CONTRIBUTION

011

Candidate Name
SCHWEIKERT, DAVID, S.,Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: AZ District: 01Disbursement For: 2024
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2024

FEC Identification Number

C C00540617

Amount of Each Disbursement this Period

2000.00

Transaction ID : B5431390A6F02458680E

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. IOWANS FOR ZACH NUNN

Mailing Address PO BOX 11

City
BONDURANTState
IAZip Code
50035-0011Purpose of Disbursement
CONTRIBUTION

011

Candidate Name
NUNN, ZACH, , ,Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: IA District: 03Disbursement For: 2024
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2024

FEC Identification Number

C C00784389

Amount of Each Disbursement this Period

2000.00

Transaction ID : BE639BFB697B245E9992

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JOE KENT FOR CONGRESS

Mailing Address PO BOX 2133

City
BATTLE GROUNDState
WAZip Code
98604-2133Purpose of Disbursement
CONTRIBUTION

011

Candidate Name
KENT, JOSEPH, , ,Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: WA District: 03Disbursement For: 2024
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2024

FEC Identification Number

C C00771394

Amount of Each Disbursement this Period

2000.00

Transaction ID : B2893E31D4E8B4C4BA5C

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6000.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 41

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

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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

A. JOHN DUARTE FOR CONGRESS

Mailing Address 9460 TEGNER RD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2024

City
HILMARState
CAZip Code
95324-9320

FEC Identification Number

C C00808279Purpose of Disbursement
CONTRIBUTION

011

Candidate Name
DUARTE, JOHN, , ,Category/
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : BFC095E74A276404B829

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA

District: 13

Full Name (Last, First, Middle Initial)

B. JOHN FABBRICATORE FOR COLORADO

Mailing Address PO BOX 460834

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2024

City
AURORAState
COZip Code
80046-0834

FEC Identification Number

C C00855072Purpose of Disbursement
CONTRIBUTION

011

Candidate Name
FABBRICATORE, JOHN, , ,Category/
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : B943FFD50C39848549D6

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

State: CO

District: 06

Full Name (Last, First, Middle Initial)

C. KEAN FOR CONGRESS INC

Mailing Address PO BOX 999

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2024

City
EDISONState
NJZip Code
08818-0999

FEC Identification Number

C C00703058Purpose of Disbursement
CONTRIBUTION

011

Candidate Name
KEAN, THOMAS H., JR., ,Category/
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : BCF49A7B2242B4FA6A74

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

State: NJ

District: 07

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

6000.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 41

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

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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

A. KEN CALVERT FOR CONGRESS COMMITTEE

Mailing Address PO BOX 2438

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	2	4

City
CORONAState
CAZip Code
92878-2438

FEC Identification Number

C	C00257337
---	-----------

Purpose of Disbursement
CONTRIBUTION

011

Category/
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : B014566FA3E644DD0847

☐ Memo ItemCandidate Name
CALVERT, KEN, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA

District: 41

Full Name (Last, First, Middle Initial)

B. MARC FOR US INC.

Mailing Address PO BOX 219

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	2	4

City
LEEDSState
NYZip Code
12451-0219

FEC Identification Number

C	C00789586
---	-----------

Purpose of Disbursement
CONTRIBUTION

011

Category/
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : BE4F57982826F4B25823

☐ Memo ItemCandidate Name
MOLINARO, MARCUS, J., ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 19

Full Name (Last, First, Middle Initial)

C. MIKE GARCIA FOR CONGRESSMailing Address 9070 IRVINE CENTER DR
STE 150

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	2	4

City
IRVINEState
CAZip Code
92618-4691

FEC Identification Number

C	C00701102
---	-----------

Purpose of Disbursement
CONTRIBUTION

011

Category/
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : B7B2AA1AB8AB445ACB5B

☐ Memo ItemCandidate Name
GARCIA, MICHAEL, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA

District: 27

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

6000.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 41

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

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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

A. MONICA FOR CONGRESS

Mailing Address PO BOX 4605

City
MCALLENState
TXZip Code
78502-4605Purpose of Disbursement
CONTRIBUTION

011

Candidate Name
DE LA CRUZ, MONICA, , ,Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District: 15

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2024

FEC Identification Number

C C00765719

Amount of Each Disbursement this Period

2000.00

Transaction ID : B91094EC175F1473D808

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PARROTT FOR CONGRESS

Mailing Address 20005 LINDENHURST CT

City
HAGERSTOWNState
MDZip Code
21742-9771Purpose of Disbursement
CONTRIBUTION

011

Candidate Name
PARROTT, NEIL, , ,Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☐ Primary ☒ General
☐ Other (specify) ▼

State: MD District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2024

FEC Identification Number

C C00691931

Amount of Each Disbursement this Period

2000.00

Transaction ID : B5D9DB9BCD2A4485F9E9

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PATRIOTS FOR PERRYMailing Address 4075 LINGLESTOWN RD
PMB 119City
HARRISBURGState
PAZip Code
17112-1020Purpose of Disbursement
CONTRIBUTION

011

Candidate Name
PERRY, SCOTT, , ,Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 10

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2024

FEC Identification Number

C C00510164

Amount of Each Disbursement this Period

2000.00

Transaction ID : BC3E1FC86E864430DADC

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6000.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 41

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

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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

A. TOM BARRETT FOR CONGRESS

Mailing Address PO BOX 15221

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2024

City
LANSINGState
MIZip Code
48901-5221

FEC Identification Number

C C00793976Purpose of Disbursement
CONTRIBUTION

011

Candidate Name
BARRETT, THOMAS, MORE, ,Category/
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : B034BA4842BB345EAB04

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

State: MI

District: 07

Full Name (Last, First, Middle Initial)

B. WAYNE JOHNSON FOR CONGRESS, INC.

Mailing Address PO BOX 4965

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		23		2024

City
MACONState
GAZip Code
31208-4965

FEC Identification Number

C C00797464Purpose of Disbursement
CONTRIBUTION

011

Candidate Name
JOHNSON, ARTHUR, WAYNE, ,Category/
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : BEC523061B4764C14AC7

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

State: GA

District: 02

Full Name (Last, First, Middle Initial)

C. YVETTE4CONGRESS

Mailing Address PO BOX 404

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2024

City
LA LUZState
NMZip Code
88337-0404

FEC Identification Number

C C00655571Purpose of Disbursement
CONTRIBUTION

011

Candidate Name
HERRELL, STELLA, YVETTE, ,Category/
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : BD01EFE5537194350AD7

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

State: NM

District: 02

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

6000.00

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

36000.00

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 27 OF 41

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CE6F20517707B4749B2D

CLYDE FOR CONGRESS INC

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼

CLYDE, ANDREW, , ,

Mailing Address

PO BOX 888

City

JEFFERSON

State

GA

ZIP Code

30549-0888

☒ Personal Funds of the Candidate

Original Amount of Loan

90000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

90000.00

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
04 / 22 / 2020M M / D D / Y Y Y Y
/ / NONEM M / D D / Y Y Y Y
/ /M M / D D / Y Y Y Y
/ /

0.00

% (apr)

☐ Yes☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

90000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 28 OF 41

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C863C2DF5924D4CD69BE

CLYDE FOR CONGRESS INC

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼

CLYDE, ANDREW, , ,

Mailing Address

PO BOX 888

City

JEFFERSON

State

GA

ZIP Code

30549-0888

☒ Personal Funds of the Candidate

Original Amount of Loan

75000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

75000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
04 06 / 2020

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

75000.00

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

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 29 OF 41

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C5DB7069EC0354694A86

CLYDE FOR CONGRESS INC

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼

CLYDE, ANDREW, , ,

Mailing Address

PO BOX 888

City

JEFFERSON

State

GA

ZIP Code

30549-0888

☒ Personal Funds of the Candidate

Original Amount of Loan

80000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

80000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
11 / 25 / 2020M M / D D / Y Y Y Y
/ / NONEM M / D D / Y Y Y Y
/ / NONEM M / D D / Y Y Y Y
/ / NONE

0.00 % (apr)

☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

80000.00

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

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 30 OF 41

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C7EC230745E034C5FB89

CLYDE FOR CONGRESS INC

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼

CLYDE, ANDREW, , ,

Mailing Address

PO BOX 888

City

JEFFERSON

State

GA

ZIP Code

30549-0888

☒ Personal Funds of the Candidate

Original Amount of Loan

60000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

60000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
06 / 02 / 2021

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

60000.00

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

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 31 OF 41

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CCB914824931D4AFE9DC

CLYDE FOR CONGRESS INC

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2020

☐ Primary☒ General☐ Other (specify) ▼

CLYDE, ANDREW, , ,

Mailing Address

PO BOX 888

City

JEFFERSON

State

GA

ZIP Code

30549-0888

☒ Personal Funds of the Candidate

Original Amount of Loan

120000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

120000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
08 13 / 2020

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

120000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 32 OF 41

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C292D15D6EDBE4595AE2

CLYDE FOR CONGRESS INC

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2020

☐ Primary☐ General☒ Other (specify) ▼

PRIMARY RUNOFF

Mailing Address

PO BOX 888

City

JEFFERSON

State

GA

ZIP Code

30549-0888

☒ Personal Funds of the Candidate

Original Amount of Loan

220000.00

Cumulative Payment To Date

108016.95

Balance Outstanding at Close of This Period

111983.05

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
06 30 / 2020

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ➤

111983.05

TOTALS This Period (last page in this line only) ➤

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 33 OF 41

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C9CE5C4A9B7D944C1B26

CLYDE FOR CONGRESS INC

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2022

☐ Primary☒ General☐ Other (specify) ▼

CLYDE, ANDREW, , ,

Mailing Address

PO BOX 888

City

JEFFERSON

State

GA

ZIP Code

30549-0888

☒ Personal Funds of the Candidate

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 19 2022

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

25000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 34 OF 41

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C138834BA9CAE4CE0B4B

CLYDE FOR CONGRESS INC

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

CLYDE, ANDREW, , ,

Mailing Address

PO BOX 888

City

JEFFERSON

State

GA

ZIP Code

30549-0888

☒ Personal Funds of the Candidate

Original Amount of Loan

17500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

17500.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
01 23 / 2024

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

5.50 % (apr)

☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

17500.00

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

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 35 OF 41

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C34182F13FF5947F3819

CLYDE FOR CONGRESS INC

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2020

☐ Primary☐ General☒ Other (specify) ▼

PRIMARY RUNOFF

Mailing Address

PO BOX 888

City

JEFFERSON

State

GA

ZIP Code

30549-0888

☒ Personal Funds of the Candidate

Original Amount of Loan

110000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

110000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
06 18 / 2020

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

110000.00

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

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 36 OF 41

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C99A4F6D03EF2418F9F0

CLYDE FOR CONGRESS INC

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼

CLYDE, ANDREW, , ,

Mailing Address

PO BOX 888

City

JEFFERSON

State

GA

ZIP Code

30549-0888

☒ Personal Funds of the Candidate

Original Amount of Loan

135000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

135000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 07 2020

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

135000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 37 OF 41

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CE5F45089576A46F7A7C

CLYDE FOR CONGRESS INC

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

CLYDE, ANDREW, , ,

Mailing Address

PO BOX 888

City

JEFFERSON

State

GA

ZIP Code

30549-0888

☒ Personal Funds of the Candidate

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 20 / 2023

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

25000.00

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

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 38 OF 41

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C661AE72425904782AAC

CLYDE FOR CONGRESS INC

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼

CLYDE, ANDREW, , ,

Mailing Address

PO BOX 888

City

JEFFERSON

State

GA

ZIP Code

30549-0888

☒ Personal Funds of the Candidate

Original Amount of Loan

80000.00

Cumulative Payment To Date

51027.72

Balance Outstanding at Close of This Period

28972.28

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 03 / 2020

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

28972.28

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

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 39 OF 41

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C76E8215606E84791BAD

CLYDE FOR CONGRESS INC

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2020

☐ Primary☐ General☒ Other (specify) ▼

PRIMARY RUNOFF

Mailing Address

PO BOX 888

City

JEFFERSON

State

GA

ZIP Code

30549-0888

☒ Personal Funds of the Candidate

Original Amount of Loan

175000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

175000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
07 / 28 / 2020

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

175000.00

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

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 40 OF 41

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CC43935E7CC194CF1900

CLYDE FOR CONGRESS INC

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2020

☐ Primary☒ General☐ Other (specify) ▼

CLYDE, ANDREW, , ,

Mailing Address

PO BOX 888

City

JEFFERSON

State

GA

ZIP Code

30549-0888

☒ Personal Funds of the Candidate

Original Amount of Loan

380000.00

Cumulative Payment To Date

128591.69

Balance Outstanding at Close of This Period

251408.31

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
08 / 27 / 2020M M / D D / Y Y Y Y
/ / NONEM M / D D / Y Y Y Y
/ / NONEM M / D D / Y Y Y Y
/ / NONE

0.00 % (apr)

☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

251408.31

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

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 41 OF 41

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C9046CEB11C3048E393D

CLYDE FOR CONGRESS INC

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

CLYDE, ANDREW, , ,

Mailing Address

PO BOX 888

City

JEFFERSON

State

GA

ZIP Code

30549-0888

☒ Personal Funds of the Candidate

Original Amount of Loan

4000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

4000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 / 26 / 2024

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

5.50 % (apr)

☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

4000.00

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

1308863.64

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