

FEC FORM 3P

REPORT OF RECEIPTS AND DISBURSEMENTS

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

Example: If typing, type over the lines.

ADDRESS (number and street)

Check if different than previously reported. (ACC)

CITY

STATE

ZIP CODE

2. FEC IDENTIFICATION NUMBER

3. TYPE OF REPORT (Choose One)

Check here if this is a Termination Report (TER)

Quarterly Reports:

Monthly Reports:

- April 15 (Q1) October 15 (Q3)
- July 15 (Q2) January 31 Year-End Report (YE)
- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11)
- Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12)
- Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

12-Day Pre-Election Report for the Election on in the State of

30-Day Post-Election Report for the General Election on

4. IS THIS REPORT AN AMENDMENT?

yes no

5. COVERING PERIOD

01 / 01 / 2026 THROUGH 03 / 31 / 2026

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

Signature of Treasurer Date 04 / 01 / 2026

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109. All previous versions of this form are obsolete and should no longer be used.

Office Use Only

Write or Type Committee Name

Santorum for President 2016

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

SUMMARY

6. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	<input type="text" value="1346.34"/>
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 3)	<input type="text" value="0.00"/>
8. SUBTOTAL (Lines 6 and 7)	<input type="text" value="1346.34"/>
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 4)	<input type="text" value="0.00"/>
10. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 9 from 8).....	<input type="text" value="1346.34"/>
11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	<input type="text" value="0.00"/>
12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	<input type="text" value="531296.72"/>
13. EXPENDITURES SUBJECT TO LIMITATION (Use the worksheet on Page 8 to calculate this amount.).....	<input type="text" value="0.00"/>

NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES

14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B on Page 4 from 17e, Column B on Page 3).....	<input type="text" value="1.00"/>
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B on Page 3 from 23, Column B on Page 4).....	<input type="text" value="0.00"/>

DETAILED SUMMARY PAGE of Receipts

FEC Form 3P (Rev. 05/2016)

NAME OF COMMITTEE (in Full)

Santorum for President 2016

Report Covering the Period: From:

01 / 01 / 2026

To:

03 / 31 / 2026

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) itemized	0.00	0.00
(ii) unitemized	0.00	1.00
(iii) Total contributions	0.00	1.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17(c) and 17(d))	0.00	1.00
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate	0.00	0.00
(b) Other Loans	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b))	0.00	0.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.):		
(a) Operating	0.00	0.00
(b) Fundraising	0.00	0.00
(c) Legal and Accounting	0.00	0.00
(d) TOTAL OFFSETS TO EXPENDITURES (Add 20(a), 20(b) and 20(c))	0.00	0.00
21. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21)	0.00	1.00

DETAILED SUMMARY PAGE
of Disbursements and Contributed Items

FEC Form 3P (Rev. 05/2016)

NAME OF COMMITTEE (in Full)
Santorum for President 2016

Report Covering the Period: From:

M 01 / D 01 / Y 2026

To:

M 03 / D 31 / Y 2026

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

23. OPERATING EXPENDITURES.....	0.00	0.00
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS.....	0.00	0.00
27. LOAN REPAYMENTS MADE:		
(a) Repayments of Loans made or Guaranteed by Candidate.....	0.00	0.00
(b) Other Repayments	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	0.00	0.00
28. 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	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b) and 28(c))	0.00	0.00
29. OTHER DISBURSEMENTS	0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	0.00	0.00

III. CONTRIBUTED ITEMS
(Stock, Art Objects, Etc.)

31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	0.00	
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FEC Form 3P (Rev. 05/2016)
Federal Election Commission
1050 First Street, N.E.
Washington, D.C.

**ALLOCATION OF PRIMARY EXPENDITURES
BY STATE FOR
A PRESIDENTIAL CANDIDATE**
(Used Only by Primary Committees Receiving
or Expecting To Receive Federal Funds)

1. NAME OF COMMITTEE (in full, type or print)

2. FEC IDENTIFICATION NUMBER

C C00578492

Santorum for President 2016

ADDRESS (number and street) P.O. Box 238

Verona PA 15147

CITY

STATE

ZIP CODE

3. NAME OF CANDIDATE

ALLOCATION BY STATE

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Alabama	0.00	0.00
Alaska	0.00	0.00
Arizona	0.00	0.00
Arkansas	0.00	0.00
California	0.00	0.00
Colorado	0.00	0.00
Connecticut	0.00	0.00
Delaware	0.00	0.00
District of Columbia	0.00	0.00
Florida	0.00	0.00
Georgia	0.00	0.00
Hawaii	0.00	0.00
Idaho	0.00	0.00
Illinois	0.00	0.00

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Indiana	0.00	0.00
Iowa	0.00	0.00
Kansas	0.00	0.00
Kentucky	0.00	0.00
Louisiana	0.00	0.00
Maine	0.00	0.00
Maryland	0.00	0.00
Massachusetts	0.00	0.00
Michigan	0.00	0.00
Minnesota	0.00	0.00
Mississippi	0.00	0.00
Missouri	0.00	0.00
Montana	0.00	0.00
Nebraska	0.00	0.00
Nevada	0.00	0.00
New Hampshire	0.00	0.00
New Jersey	0.00	0.00
New Mexico	0.00	0.00
New York	0.00	0.00
North Carolina	0.00	0.00
North Dakota	0.00	0.00
Ohio	0.00	0.00
Oklahoma	0.00	0.00
Oregon	0.00	0.00
Pennsylvania	0.00	0.00

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Rhode Island	0.00	0.00
South Carolina	0.00	0.00
South Dakota	0.00	0.00
Tennessee	0.00	0.00
Texas	0.00	0.00
Utah	0.00	0.00
Vermont	0.00	0.00
Virginia	0.00	0.00
Washington	0.00	0.00
West Virginia	0.00	0.00
Wisconsin	0.00	0.00
Wyoming	0.00	0.00
Puerto Rico	0.00	0.00
Guam	0.00	0.00
Virgin Islands	0.00	0.00
TOTALS	0.00	0.00

**SCHEDULE C-P
LOANS**

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

PAGE OF

FOR LINE NUMBER: 19a 19b
(check only one)

NAME OF COMMITTEE (In Full)

Transaction ID : SC/12.4140

Santorum for President 2016

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

Memo Item

Election: 2016

Primary
 General
 Other (specify) ▼

Santorum, Richard, , ,

Mailing Address
PO Box 609

City
Great Falls

State
VA

Zip Code
22066-0609

Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

24000.00

6000.00

18000.00

TERMS

Date Incurred

Date Due

Interest Rate (if none, enter 0)

Secured:

MM / DD / YYYY
12 / 29 / 2015

MM / DD / YYYY
On Demand

0.00 % (apr)

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:
Tfg

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:

Subtotal Of Receipts This Page (optional).....

18000.00

Total This Period (last page this line number only).....

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

SCHEDULE C-P
LOANS

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

PAGE OF

FOR LINE NUMBER: 19a 19b
(check only one)

NAME OF COMMITTEE (In Full)

Transaction ID : SC/12.4137

Santorum for President 2016

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

Memo Item

Election: 2016

Santorum, Richard, , ,

Primary

General

Other (specify) ▼

Mailing Address
PO Box 609

City
Great Falls

State
VA

Zip Code
22066-0609

Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

320000.00

20869.23

299130.77

TERMS

Date Incurred

Date Due

Interest Rate (if none, enter 0)

Secured:

MM / DD / YYYY
09 / 07 / 2016

MM / DD / YYYY
On Demand

0.00 % (apr)

Yes No

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

1. Full Name (Last, First, Middle Initial)
(Bank Loan), Chain Bridge Bank, , ,

Name of Employer

Mailing Address

Occupation

1445-A Laughlin Avenue

Amount

Guaranteed
Outstanding:

0.00

Tfg

City
McLean

State
VA

ZIP Code
22101-5709

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:

Subtotal Of Receipts This Page (optional).....

299130.77

Total This Period (last page this line number only).....

317130.77

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

SCHEDULE D-P
DEBTS AND OBLIGATIONS (Excluding Loans)

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

FOR LINE NUMBER: 11
 12

NAME OF COMMITTEE (In Full)
Santorum for President 2016

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

American Express CC

Nature of Debt (Purpose):

Credit Card

Mailing Address PO Box 650448

City
 Dallas

State
 TX

Zip Code
 75265-0448

Outstanding Balance Beginning This Period

39192.73

Transaction ID : SD12.4132

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

39192.73

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

BRABENDERCOX, LLC

Nature of Debt (Purpose):

Media Consulting/Production/Services

Mailing Address 1218 Grandview Ave

City
 Pittsburgh

State
 PA

Zip Code
 15211-1239

Outstanding Balance Beginning This Period

89816.75

Transaction ID : SD12.4123

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

89816.75

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

CMDI

Nature of Debt (Purpose):

Database Services

Mailing Address 1593 Spring Hill Rd
 Ste 400

City
 Tysons Corner

State
 VA

Zip Code
 22182-2245

Outstanding Balance Beginning This Period

1500.00

Transaction ID : SD12.4115

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

- 1) **SUBTOTALS** This Period This Page (optional)
- 2) **TOTALS** This Period (last page this line number only)
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P
DEBTS AND OBLIGATIONS (Excluding Loans)

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

FOR LINE NUMBER: 11
 12

NAME OF COMMITTEE (In Full)

Santorum for President 2016

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

Innovative Consulting Solutions, LLC

Nature of Debt (Purpose):

Political/Field Consulting

Mailing Address 645 Holland Cir

City
West Columbia

State
SC

Zip Code
29169-5821

Outstanding Balance Beginning This Period

5000.00

Transaction ID : SD12.4130

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

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

Koch & Hoos, LLC

Nature of Debt (Purpose):

Accounting & Compliance Services

Mailing Address 901 N Washington St
Ste 700

City
Alexandria

State
VA

Zip Code
22314-1535

Outstanding Balance Beginning This Period

31405.00

Transaction ID : SD12.4124

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

31405.00

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

Santorum, Richard, , ,

Nature of Debt (Purpose):

Loan Interest

Mailing Address PO Box 609

City
Great Falls

State
VA

Zip Code
22066-0609

Outstanding Balance Beginning This Period

47251.47

Transaction ID : SD12.4133

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

47251.47

1) SUBTOTALS This Period This Page (optional)	▶	83656.47
2) TOTALS This Period (last page this line number only)	▶	214165.95
3) TOTAL OUTSTANDING LOANS from Schedule C-P (last page only)	▶	317130.77
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	531296.72