

# 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

ENRIQUE TARRIO FOR CONGRESS

ADDRESS (number and street)

5730 NW 2ND ST

Check if different than previously reported. (ACC)

MIAMI

FL

33126

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00725408

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

FL

27

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y  
01 / 01 / 2020

through

M M / D D / Y Y Y Y  
03 / 31 / 2020

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

Curtis, Elizabeth, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Curtis, Elizabeth, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
04 / 14 / 2020

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

Office Use Only

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**ENRIQUE TARRIO 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))....	8158.20	8183.20
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	8158.20	8183.20
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	4946.97	4946.97
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	4946.97	4946.97
8. Cash on Hand at Close of Reporting Period (from Line 27).....	3236.23	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**ENRIQUE TARRIO FOR CONGRESS**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1801.00	1801.00
(ii) Unitemized .....	6357.20	6382.20
(iii) TOTAL of contributions from individuals ▶	8158.20	8183.20
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	8158.20	8183.20
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	8158.20	8183.20

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	4946.97	4946.97
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	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	4946.97	4946.97

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	25.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	8158.20
25. SUBTOTAL (add Line 23 and Line 24).....	8183.20
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	4946.97
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	3236.23

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3N

Transaction ID :

Prior to this reporting period, the Committee had not met the \$5000 spending or raising threshold required to trigger a filing requirement. The \$25 opening cash balance represents a \$25 contribution made to open the bank account prior to the year end.

Form/Schedule:

Transaction ID:

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**ENRIQUE TARRIO FOR CONGRESS**

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

Mailing Address 6630 Auburn Avenue

City Riverdale	State DC	Zip Code 20737
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FEC ID number of contributing federal political committee. **C**

Name of Employer JWB Inc	Occupation Owner
-----------------------------	---------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 29 / 2020

**Transaction ID : SA11AI.4318**

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

Memo Item

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

Mailing Address 7470 landmark dr

City Spring Hill	State FL	Zip Code 34606
---------------------	-------------	-------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2020

**Transaction ID : SA11AI.4299**

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

Memo Item

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

Mailing Address PO Box 1166

City Wheat Ridge	State CO	Zip Code 80034
---------------------	-------------	-------------------

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

Name of Employer CTS	Occupation Engineer
-------------------------	------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2020

**Transaction ID : SA11AI.4334**

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

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 1000.00
<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 7 OF 11  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ENRIQUE TARRIO FOR CONGRESS**

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

Mailing Address 1755 W 72 Street

City HIALEAH State FL Zip Code 33014

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

Name of Employer SELF Occupation SALES

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 14 / 2020

Transaction ID : SA11AI.4282

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 44230 Silverpalm Grove Ter

City Leesburg State VA Zip Code 20176

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

Name of Employer Lil Mose Trucking Occupation Truck Driver

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 17 / 2020

Transaction ID : SA11AI.4389

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 12007 McCallum Ave NE

City Alliance State OH Zip Code 44601

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

Name of Employer None Occupation Disabled

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
201.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 21 / 2020

Transaction ID : SA11AI.4336

Amount of Each Receipt this Period  
201.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	801.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1801.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 11	
	<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)  
**ENRIQUE TARRIO FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2020	
Mailing Address PO Box 619616			FEC Identification Number C	
City DFW Airport	State TX	Zip Code 75261	Amount of Each Disbursement this Period 284.80	
Purpose of Disbursement Airfare		Category/Type	Transaction ID : SB17.4122	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2020	
Mailing Address PO Box 619616			FEC Identification Number C	
City DFW Airport	State TX	Zip Code 75261	Amount of Each Disbursement this Period 5.60	
Purpose of Disbursement Travel Expense - Airfare		Category/Type	Transaction ID : SB17.4136	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2020	
Mailing Address PO Box 619616			FEC Identification Number C	
City DFW Airport	State TX	Zip Code 75261	Amount of Each Disbursement this Period 192.40	
Purpose of Disbursement Travel Expense - Airfare		Category/Type	Transaction ID : SB17.4137	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	482.80
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 11
	<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)  
**ENRIQUE TARRIO FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2020
Mailing Address PO Box 619616		FEC Identification Number C
City DFW Airport	State TX	Zip Code 75261
Purpose of Disbursement Airfare		Amount of Each Disbursement this Period 196.80
Candidate Name	Category/ Type	Transaction ID : SB17.4141
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2020
Mailing Address PO Box 619616		FEC Identification Number C
City DFW Airport	State TX	Zip Code 75261
Purpose of Disbursement Airfare		Amount of Each Disbursement this Period 286.10
Candidate Name	Category/ Type	Transaction ID : SB17.4142
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BLT Prime</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2020
Mailing Address 1100 Pennsylvania Ave NW		FEC Identification Number C
City Washington	State DC	Zip Code 20004
Purpose of Disbursement Meeting Expense		Amount of Each Disbursement this Period 920.15
Candidate Name	Category/ Type	Transaction ID : SB17.4128
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1403.05
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 11	
	<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)  
**ENRIQUE TARRIO FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Christian Family Coalition</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2020
Mailing Address PO Box 650216		FEC Identification Number C
City Miami	State FL	Zip Code 33165
Purpose of Disbursement Event Ticket		Amount of Each Disbursement this Period 500.00
Candidate Name	Category/ Type	Transaction ID : SB17.4117
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Comcast</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2020
Mailing Address 1701 John F Kennedy Blvd		FEC Identification Number C
City Philadelphia	State PA	Zip Code 19103
Purpose of Disbursement Internet Services		Amount of Each Disbursement this Period 290.89
Candidate Name	Category/ Type	Transaction ID : SB17.4134
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Conservative Compliance Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2020
Mailing Address 5 Halifax Ct		FEC Identification Number C
City Marlton	State NJ	Zip Code 08053
Purpose of Disbursement Compliance Consulting		Amount of Each Disbursement this Period 540.00
Candidate Name	Category/ Type	Transaction ID : SB17.4113
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1330.89
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 11	
	<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)  
**ENRIQUE TARRIO FOR CONGRESS**

**A. Conservative Compliance Consulting**

Full Name (Last, First, Middle Initial)  
Mailing Address 5 Halifax Ct

City Marlton State NJ Zip Code 08053

Purpose of Disbursement Compliance Services

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 13 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB17.4121

Memo Item

**B. Rally.org**

Full Name (Last, First, Middle Initial)  
Mailing Address 995 Market St  
Floor 2

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Payment Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 31 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 473.42

Transaction ID : SB17.4345

Memo Item

**C.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ 973.42

**TOTAL** This Period (last page this line number only) ..... ▶ 4190.16