

**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

Conole for Congress

ADDRESS (number and street)

PO Box 851

Check if different
than previously
reported. (ACC)

Syracuse

NY

13201

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00702191

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

NY

24

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
04 / 01 / 2021

through

M M / D D / Y Y Y Y
06 / 30 / 2021

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

Mele, Steven, , ,

Type or Print Name of Treasurer

Mele, Steven, , ,

Signature of Treasurer

[Electronically Filed]

Date

M M / D D / Y Y Y Y
10 / 15 / 2021

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 05/2016)

PAGE 2 / 9

Write or Type Committee Name
Conole for Congress

Report Covering the Period:

From:

M M / D D / Y Y Y Y
04 / 01 / 2021

To:

M M / D D / Y Y Y Y
06 / 30 / 2021

	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))....	0.00	23851.62
(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))	0.00	23851.62
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	764.75	23514.08
(b) Total Offsets to Operating Expenditures (from Line 14)	376.92	376.92
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	387.83	23137.16
8. Cash on Hand at Close of Reporting Period (from Line 27)	2194.32	
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)	41299.44	

For further information contact:

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

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

16. **TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4).....

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 9

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	764.75	23514.08
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. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	764.75	23514.08

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2582.15
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	376.92
25. SUBTOTAL (add Line 23 and Line 24).....	2959.07
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	764.75
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2194.32

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F3A

Transaction ID :

Amending to correct Column B totals.

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 9

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

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

NAME OF COMMITTEE (In Full)
Conole for Congress

A. Full Name (Last, First, Middle Initial) GMMB			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 19 / 2021	
Mailing Address 3050 K St NW Ste 100			Transaction ID : 2582433	
City Washington	State DC	Zip Code 20007-5161	Amount of Each Receipt this Period 376.92	
FEC ID number of contributing federal political committee. C		Name of Employer Occupation		
Receipt For: 2020 ☒ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼ 376.92		
			☐ Memo Item Refund from Vendor	

B. Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y Y Y	
Mailing Address				
City	State	Zip Code		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period		
Name of Employer Occupation		☐ Memo Item		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼		

C. Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y Y Y	
Mailing Address				
City	State	Zip Code		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period		
Name of Employer Occupation		☐ Memo Item		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼		

SUBTOTAL of Receipts This Page (optional).....	376.92
TOTAL This Period (last page this line number only).....	376.92

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

PAGE 7 OF 9

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Conole for Congress

Full Name (Last, First, Middle Initial)

A. Google, Inc.

Mailing Address 1600 Amphitheatre Pkwy

City
Mountain ViewState
CAZip Code
94043-1351Purpose of Disbursement
Software Subscription

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		03		2021

FEC Identification Number

C

Amount of Each Disbursement this Period

25.92

Transaction ID : 500081900

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MBA Consulting GroupMailing Address 611 Pennsylvania Ave SE
Ste 143City
WashingtonState
DCZip Code
20003-4303Purpose of Disbursement
Compliance Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2021

FEC Identification Number

C

Amount of Each Disbursement this Period

272.19

Transaction ID : 500081890

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Google, Inc.

Mailing Address 1600 Amphitheatre Pkwy

City
Mountain ViewState
CAZip Code
94043-1351Purpose of Disbursement
Software Subscription

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

25.92

Transaction ID : 500081901

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

324.03

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

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

PAGE 8 OF 9

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
Conole for Congress

Full Name (Last, First, Middle Initial)

A. New York State Insurance Fund

Mailing Address 1 Watervliet Avenue Ext

City
AlbanyState
NYZip Code
12206-1629Purpose of Disbursement
Insurance

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
04	02	2021

FEC Identification Number

C

Amount of Each Disbursement this Period

246.12

Transaction ID : 500081891

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NGP VAN, Inc.

Mailing Address PO Box 392264

City
PittsburghState
PAZip Code
15251-9264Purpose of Disbursement
Software Subscription

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
04	05	2021

FEC Identification Number

C

Amount of Each Disbursement this Period

162.00

Transaction ID : 500081898

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Google, Inc.

Mailing Address 1600 Amphitheatre Pkwy

City
Mountain ViewState
CAZip Code
94043-1351Purpose of Disbursement
Software Subscription

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
04	05	2021

FEC Identification Number

C

Amount of Each Disbursement this Period

32.60

Transaction ID : 500081899

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

440.72

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

764.75

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 9 OF 9

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Conole for Congress

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

The Strategy Group, LLC

Nature of Debt (Purpose):

Printing and Production

Mailing Address 730 N Franklin St
Ste 404City
ChicagoState
ILZip Code
60654-7205

Outstanding Balance Beginning This Period

20339.92

Transaction ID : 1250000162

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20339.92

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

Olson Remcho, LLP

Nature of Debt (Purpose):

Legal Services

Mailing Address 555 Capitol Hill Mall
Ste 400City
SacramentoState
CAZip Code
95814

Outstanding Balance Beginning This Period

2182.50

Transaction ID : 1250000158

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2182.50

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

The Strategy Group, LLC

Nature of Debt (Purpose):

Printing and Production

Mailing Address 730 N Franklin St
Ste 404City
ChicagoState
ILZip Code
60654-7205

Outstanding Balance Beginning This Period

18777.02

Transaction ID : 1250000159

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

18777.02

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

41299.44

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

41299.44

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

0.00

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

41299.44