

# 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

LYNDA BENNETT FOR CONGRESS

ADDRESS (number and street)

PO Box 97275

Check if different than previously reported. (ACC)

Raleigh

NC

27624

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C C00732099

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

NC

11

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 2020

through

M M /

D D /

Y Y Y Y 2020

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

McMichael, Collin, , ,

Type or Print Name of Treasurer

Signature of Treasurer

McMichael, Collin, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y 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

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**LYNDA BENNETT 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))....	295.00	440350.89
(b) Total Contribution Refunds (from Line 20(d)) .....	.00	14910.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	295.00	425440.89
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	255.48	476497.50
(b) Total Offsets to Operating Expenditures (from Line 14).....	8.12	1022.70
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	247.36	475474.80
8. Cash on Hand at Close of Reporting Period (from Line 27).....	966.09	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	70884.29	

**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

**LYNDA BENNETT 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).....	200.00	230048.00
(ii) Unitemized.....	95.00	110354.33
(iii) TOTAL of contributions from individuals ▶	295.00	340402.33
(b) Political Party Committees.....	.00	.00
(c) Other Political Committees (such as PACs).....	.00	98208.56
(d) The Candidate.....	.00	1740.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	295.00	440350.89
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	.00	.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	.00	80000.00
(b) All Other Loans.....	.00	.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	.00	80000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	8.12	1022.70
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	.00	.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	303.12	521373.59

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 10

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	255.48	476497.50
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	.00	.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	.00	29000.00
(b) Of All Other Loans .....	.00	.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	.00	29000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	.00	11910.00
(b) Political Party Committees.....	.00	.00
(c) Other Political Committees (such as PACs).....	.00	3000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	.00	14910.00
21. OTHER DISBURSEMENTS .....	.00	.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	255.48	520407.50

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	918.45
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	303.12
25. SUBTOTAL (add Line 23 and Line 24).....	1221.57
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	255.48
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	966.09

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 5 OF 10  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
**LYNDA BENNETT FOR CONGRESS**

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

Mailing Address 4124 Kingsferry Drive

City: Arlington State: TX Zip Code: 76016

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2020  
 Primary  General  
 Other (specify) **2020 Runoff**

Election Cycle-to-Date: **300.00**

Date of Receipt: 10 / 18 / 2020

Transaction ID : SA11Ai-CN6628

Amount of Each Receipt this Period: **100.00**

Memo Item  
 Debt Retirement

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

Mailing Address 4124 Kingsferry Drive

City: Arlington State: TX Zip Code: 76016

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2020  
 Primary  General  
 Other (specify) **2020 Runoff**

Election Cycle-to-Date: **400.00**

Date of Receipt: 11 / 30 / 2020

Transaction ID : SA11Ai-CN6631

Amount of Each Receipt this Period: **100.00**

Memo Item  
 Debt Retirement

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>200.00</b>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 10			
	<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)  
**LYNDA BENNETT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. BB&amp;T</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2020		
Mailing Address 9111 Litchford Rd			FEC Identification Number C		
City Raleigh	State NC	Zip Code 27615	Amount of Each Disbursement this Period 15.00		
Purpose of Disbursement Bank Service Fee		Category/ Type 001	Transaction ID : SB17-EX278		
Candidate Name		Memo Item Bank Service Fee			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. BB&amp;T</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2020		
Mailing Address 9111 Litchford Rd			FEC Identification Number C		
City Raleigh	State NC	Zip Code 27615	Amount of Each Disbursement this Period 15.00		
Purpose of Disbursement Bank Service Fee		Category/ Type 001	Transaction ID : SB17-EX279		
Candidate Name		Memo Item Bank Service Fee			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. BB&amp;T</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2020		
Mailing Address 9111 Litchford Rd			FEC Identification Number C		
City Raleigh	State NC	Zip Code 27615	Amount of Each Disbursement this Period 15.00		
Purpose of Disbursement Bank Service Fee		Category/ Type 001	Transaction ID : SB17-EX280		
Candidate Name		Memo Item Bank Service Fee			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	45.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 10			
	<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)  
**LYNDA BENNETT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2020
Mailing Address PO Box 84314		FEC Identification Number C
City Baton Rouge	State LA	Zip Code 70884
Purpose of Disbursement Merchant Fees	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1.30
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item Merchant Fees	

Full Name (Last, First, Middle Initial) <b>B. Tower Digital</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2020
Mailing Address 400 West Peachtree Street NW Suite 4 - 550		FEC Identification Number C
City Atlanta	State GA	Zip Code 30308
Purpose of Disbursement Online Services	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 40.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item Online Services	

Full Name (Last, First, Middle Initial) <b>c. Campaign Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2020
Mailing Address 117 N. Saint Asaph St.		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Merchant Fees List Management Email services	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 80.05
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item Merchant Fees List Management Email services	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	121.35
<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 8 OF 10			
	<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)  
**LYNDA BENNETT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Campaign Solutions</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2020		
Mailing Address 117 N. Saint Asaph St.			FEC Identification Number C		
City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 89.13		
Purpose of Disbursement Merchant Fees List Management Email services		Category/ Type 001	Transaction ID : SB17-EX282		
Candidate Name		Memo Item Merchant Fees List Management Email services			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	89.13
<b>TOTAL</b> This Period (last page this line number only).....▶	255.48



**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **LYNDA BENNETT FOR CONGRESS** Transaction ID : **SC10-LN1**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Bennett, Lynda, , ,		<input type="checkbox"/> Memo Item	Election: 2020 <input checked="" type="checkbox"/> Primary PERSONAL FUNDS <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 97275			
City RALEIGH	State NC	ZIP Code 27624	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 80000.00	Cumulative Payment To Date 29000.00	Balance Outstanding at Close of This Period 51000.00
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<b>TERMS</b>	Date Incurred M 12 / D 31 / Y 2019	Date Due M 12 / D 31 / Y 2050	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	51000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	51000.00

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

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**LYNDA BENNETT FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Bennett, Lynda, , ,</b>			Nature of Debt (Purpose): Invoice: Shipping Online/Website Services Food/Beverage Transportation Lodging Signs
Mailing Address PO Box 97275			
City Raleigh	State NC	Zip Code 27624	

Outstanding Balance Beginning This Period	Transaction ID : <b>SD10-INV261</b>	
18330.61		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
.00	.00	18330.61

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CM&amp;Co LLC</b>			Nature of Debt (Purpose): Invoice: Accountng Services
Mailing Address PO Box 97275			
City Raleigh	State NC	Zip Code 27624	

Outstanding Balance Beginning This Period	Transaction ID : <b>SD10-INV274</b>	
1553.68		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
.00	.00	1553.68

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

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	19884.29
2) <b>TOTALS</b> This Period (last page this line number only) .....	19884.29
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	51000.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	70884.29