

**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

in the State of

5. Covering Period

M M / D D / Y Y Y Y

01

D D / Y Y Y Y

01

Y Y Y Y

2023

through

M M / D D / Y Y Y Y

03

D D / Y Y Y Y

31

Y Y Y Y

2023

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

KILGORE, PAUL, , ,

Type or Print Name of Treasurer

KILGORE, PAUL, , ,

Signature of Treasurer

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

14

Y Y Y Y

2023

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 / 33

Write or Type Committee Name
CLYDE FOR CONGRESS INC

Report Covering the Period:

From:

M M / D D / Y Y Y Y
 01 / 01 / 2023

To:

M M / D D / Y Y Y Y
 03 / 31 / 2023

	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))....	29886.59	33431.59
(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))	29886.59	33431.59
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	42751.38	151646.74
(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))	42751.38	151646.74
8. Cash on Hand at Close of Reporting Period (from Line 27)	36940.56	
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)	1287363.64	

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

CLYDE FOR CONGRESS INC

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2023

To:

MM / DD / YYYY
03 / 31 / 2023**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

27098.59

29598.59

(ii) Unitemized

1788.00

2333.00

(iii) TOTAL of contributions
from individuals ▶

28886.59

31931.59

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

1000.00

1500.00

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

29886.59

33431.59

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

6342.95

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

0.00

0.00

(b) All Other Loans.....

25000.00

25000.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

25000.00

25000.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS
(Dividends, Interest, etc.)

0.00

0.05

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

54886.59

64774.59

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	42751.38	151646.74
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) ►	42751.38	151646.74

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	24805.35
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	54886.59
25. SUBTOTAL (add Line 23 and Line 24).....	79691.94
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	42751.38
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	36940.56

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

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☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	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)
CLYDE FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial) BAKER, ROCK, , ,			Date of Receipt M M / D D / Y Y Y Y Y 01 / 23 / 2023	
Mailing Address 727 LINDSEY BAKER CT			Transaction ID : A61A4A315EB454A0F9E6	
City GAINESVILLE	State GA	Zip Code 30506-1553	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer BRE-ROCK, LLC		Occupation REAL ESTATE		
Receipt For: 2024 ☒ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date 500.00		
B. Full Name (Last, First, Middle Initial) BASTING, DIRK, , ,			Date of Receipt M M / D D / Y Y Y Y Y 02 / 13 / 2023	
Mailing Address 2200 S OCEAN LN			Transaction ID : A8C644EDD20E140D195D	
City FORT LAUDERDALE	State FL	Zip Code 33316-3836	Amount of Each Receipt this Period 250.00	
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 250.00		
C. Full Name (Last, First, Middle Initial) HOUSE FREEDOM FUND			Date of Receipt M M / D D / Y Y Y Y Y 02 / 13 / 2023	
Mailing Address 300 INDEPENDENCE AVE SE			Transaction ID : A0F52E9ED0F8246B7BDF	
City WASHINGTON	State DC	Zip Code 20003-1021	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C C00552851		Memo Item		
Name of Employer		Occupation		
Receipt For: 2024 ☒ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date 12271.00		
SUBTOTAL of Receipts This Page (optional)..... ▶			750.00	
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)

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NAME OF COMMITTEE (In Full)
CLYDE FOR CONGRESS INC**A.** Full Name (Last, First, Middle Initial)
BASTING, ROSEMARIE, , ,
Mailing Address 2200 S OCEAN LNCity
FORT LAUDERDALEState
FLZip Code
33316-3836FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 13 2023

Transaction ID : A0D98EB3BDDDB3476F90F

Amount of Each Receipt this Period

250.00

☐ Memo Item
EARMARKED (NON-DIRECTED) THROUGH HOUSE
FREEDOM FUND**B.** Full Name (Last, First, Middle Initial)
HOUSE FREEDOM FUND
Mailing Address 300 INDEPENDENCE AVE SECity
WASHINGTONState
DCZip Code
20003-1021FEC ID number of contributing
federal political committee.

C C00552851

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

12271.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 13 2023

Transaction ID : AEF8B436FB250448A999

Amount of Each Receipt this Period

250.00

☒ Memo Item
INTERMEDIARYTOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.**C.** Full Name (Last, First, Middle Initial)
COWLES, STEVEN, , ,
Mailing Address 716 INTRACOASTAL DRCity
FORT LAUDERDALEState
FLZip Code
33304-3621FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
INVESTOR

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2900.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 17 2023

Transaction ID : A024DEA739B524DA1A0C

Amount of Each Receipt this Period

2900.00

☐ Memo Item
EARMARKED (NON-DIRECTED) THROUGH HOUSE
FREEDOM FUND**SUBTOTAL** of Receipts This Page (optional)..... ▶

3150.00

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

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

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NAME OF COMMITTEE (In Full)
CLYDE FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial)
HOUSE FREEDOM FUND

Mailing Address 300 INDEPENDENCE AVE SE

City WASHINGTON	State DC	Zip Code 20003-1021
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00552851

Name of Employer	Occupation
------------------	------------

Receipt For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
12271.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 27 / 2023

Transaction ID : A21BA4403585D4A86874

Amount of Each Receipt this Period

2900.00

☒ Memo Item
INTERMEDIARYTOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

B. Full Name (Last, First, Middle Initial)
FROST IV, EDWIN, BRANT, ,

Mailing Address PO BOX 2567

City NEWNAN	State GA	Zip Code 30264-2567
----------------	-------------	------------------------

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

Name of Employer SELF EMPLOYED	Occupation FINANCIAL SERVICES
-----------------------------------	----------------------------------

Receipt For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 09 / 2023

Transaction ID : AD0CF0F954A5A42AB876

Amount of Each Receipt this Period

2900.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
HULSEY, CINDA, , ,

Mailing Address 3230 DUNLAP DR.

City GAINESVILLE	State GA	Zip Code 30506-1648
---------------------	-------------	------------------------

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

Name of Employer SELF EMPLOYED	Occupation BUSINESS OWNER
-----------------------------------	------------------------------

Receipt For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 14 / 2023

Transaction ID : A080FA14F0FC142B7B63

Amount of Each Receipt this Period

1500.00

☐ Memo Item

4400.00

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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)
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Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)
CLYDE FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial)
LEMKE, LEE, , ,

Mailing Address 113 ARKWRIGHT LNDG

City MACON	State GA	Zip Code 31210-1364
---------------	-------------	------------------------

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

Name of Employer GEORGIA MINING ASSOCIATION	Occupation EXECUTIVE VICE PRESIDENT
--	--

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 Y
03 / 09 / 2023

Transaction ID : A4362B6EE581949D5850

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
PAYNE, CHRISTOPHER, , ,

Mailing Address 555 USEPPA DR

City IMMOKALEE	State FL	Zip Code 34142
-------------------	-------------	-------------------

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

Name of Employer CROSS POTOMAC CONSULTING, LLC	Occupation CONSULTANT
---	--------------------------

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 Y
02 / 08 / 2023

Transaction ID : A6F8D3E8D90F2410A857

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
PHILLIPS, RICK, , ,

Mailing Address 125 E DOYLE ST

City TOCCOA	State GA	Zip Code 30577-2965
----------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
3300.00

Date of Receipt

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

Transaction ID : AAF47B6B693441A8A26

Amount of Each Receipt this Period

3300.00

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

5300.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
CLYDE FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial) POWER, MIKE, , ,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 16 / 2023	
Mailing Address 1821 CRYSTAL HILLS DR			Transaction ID : AB553C78EEB3C47FF925	
City ATHENS	State GA	Zip Code 30606-5344	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer POWER CONSTRUCTION COMPANY		Occupation OWNER		
Receipt For: 2024 ☒ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date 2000.00		
B. Full Name (Last, First, Middle Initial) RUDDY, CHRISTOPHER, , ,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 01 / 2023	
Mailing Address 750 PARK OF COMMERCE DR			Transaction ID : A33131DFDDE8649D7AAC	
City BOCA RATON	State FL	Zip Code 33487-3650	Amount of Each Receipt this Period 248.59	
FEC ID number of contributing federal political committee. C		Memo Item IN-KIND:FOOD & BEVERAGE		
Name of Employer NEWSMAX		Occupation CEO		
Receipt For: 2024 ☒ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date 248.59		
C. Full Name (Last, First, Middle Initial) RYDIN, MICHAEL, , ,			Date of Receipt M M / D D / Y Y Y Y Y 01 / 17 / 2023	
Mailing Address 5500 HOLLY ST			Transaction ID : A3C7319A5DB5F4D6EA48	
City HOUSTON	State TX	Zip Code 77081-7410	Amount of Each Receipt this Period 2900.00	
FEC ID number of contributing federal political committee. C		Memo Item EARMARKED (NON-DIRECTED) THROUGH HOUSE FREEDOM FUND		
Name of Employer NONE		Occupation RETIRED		
Receipt For: 2024 ☒ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date 2900.00		
SUBTOTAL of Receipts This Page (optional)..... ▶			5148.59	
TOTAL This Period (last page this line number only)..... ▶				

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
CLYDE FOR CONGRESS INC**A.** Full Name (Last, First, Middle Initial)
HOUSE FREEDOM FUND
Mailing Address 300 INDEPENDENCE AVE SE

City WASHINGTON	State DC	Zip Code 20003-1021
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FEC ID number of contributing
federal political committee.**C** C00552851

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

12271.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 17 / 2023

Transaction ID : AE5D1889C3BF241C9965

Amount of Each Receipt this Period

2900.00

☒ Memo Item
INTERMEDIARYTOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.**B.** Full Name (Last, First, Middle Initial)
SHANKLES, DARRYL, , ,
Mailing Address 6521 VISTA GLN

City FLOWERY BRANCH	State GA	Zip Code 30542-3899
------------------------	-------------	------------------------

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

Name of Employer

Occupation

NORFOLK SOUTHERN CORP

SIGNALMAN

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 21 / 2023

Transaction ID : A0BEA74B30CEA4EAD934

Amount of Each Receipt this Period

50.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)
SMITH, JAY, , ,
Mailing Address 149 ROSEHILL DR W

City TALLAHASSEE	State FL	Zip Code 32312-9010
---------------------	-------------	------------------------

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

Name of Employer

Occupation

AJAX BUILDING COMPANY

EXECUTIVE

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 06 / 2023

Transaction ID : A517EB97A75AB499E9FF

Amount of Each Receipt this Period

500.00

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

550.00

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)

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CLYDE FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial)
UIHLEIN, RICHARD, E., ,

Mailing Address PO BOX 52

City LAKE BLUFF State IL Zip Code 60044-0052

FEC ID number of contributing federal political committee. C

Name of Employer ULINE Occupation CEO

Receipt For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
5800.00

Date of Receipt

M M / D D / Y Y Y Y
01 26 2023

Transaction ID : A3523014F78BF4806A3E

Amount of Each Receipt this Period

3300.00

☐ Memo Item
EARMARKED (NON-DIRECTED) THROUGH HOUSE
FREEDOM FUND

B. Full Name (Last, First, Middle Initial)
HOUSE FREEDOM FUND

Mailing Address 300 INDEPENDENCE AVE SE

City WASHINGTON State DC Zip Code 20003-1021

FEC ID number of contributing federal political committee. C C00552851

Name of Employer Occupation

Receipt For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
12271.00

Date of Receipt

M M / D D / Y Y Y Y
02 21 2023

Transaction ID : A36C5833E017848FF800

Amount of Each Receipt this Period

3300.00

☒ Memo Item
INTERMEDIARY
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

C. Full Name (Last, First, Middle Initial)
UIHLEIN, RICHARD, E., ,

Mailing Address PO BOX 52

City LAKE BLUFF State IL Zip Code 60044-0052

FEC ID number of contributing federal political committee. C

Name of Employer ULINE Occupation CEO

Receipt For: 2024
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
5800.00

Date of Receipt

M M / D D / Y Y Y Y
01 26 2023

Transaction ID : A6E9ACCB2B2BF41E5B62

Amount of Each Receipt this Period

2500.00

☐ Memo Item
EARMARKED (NON-DIRECTED) THROUGH HOUSE
FREEDOM FUND

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

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

5800.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)
CLYDE FOR CONGRESS INC

A. Full Name (Last, First, Middle Initial) HOUSE FREEDOM FUND			Date of Receipt M M / D D / Y Y Y Y Y 02 / 21 / 2023	
Mailing Address 300 INDEPENDENCE AVE SE			Transaction ID : A5EBA6B2989E04A83A56	
City WASHINGTON	State DC	Zip Code 20003-1021	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00552851		Name of Employer Occupation		
Receipt For: 2024 ☐ Primary ☒ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼ 12271.00		
Full Name (Last, First, Middle Initial) B. WEEKS, KELLIE, , ,			Date of Receipt M M / D D / Y Y Y Y Y 02 / 01 / 2023	
Mailing Address 130 JOHN MORROW JR PKWY			Transaction ID : AABE1742C1B7D4447852	
City GAINESVILLE	State GA	Zip Code 30501	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Name of Employer Occupation GEORGIA GUN STORE STORE OWNER		
Receipt For: 2024 ☒ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00		
Full Name (Last, First, Middle Initial) C. WETZEL, KEVIN, D., ,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 23 / 2023	
Mailing Address 1720 COVE PT			Transaction ID : A1F5B2C95DB9B449291B	
City GAINESVILLE	State GA	Zip Code 30501-1468	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Name of Employer Occupation MEMORIAL PARK FUNERAL HOME AND CEM PRESIDENT		
Receipt For: 2024 ☒ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00		
SUBTOTAL of Receipts This Page (optional)..... ▶			2000.00	
TOTAL This Period (last page this line number only)..... ▶			27098.59	

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

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☐ 11a	☐ 11b	☒ 11c	☐ 11d
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			15

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NAME OF COMMITTEE (In Full)
CLYDE FOR CONGRESS INC**A.** Full Name (Last, First, Middle Initial)
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC
Mailing Address 1325 MASSACHUSETTS AVE NW

City WASHINGTON	State DC	Zip Code 20005-4171
--------------------	-------------	------------------------

FEC ID number of contributing
federal political committee.**C** C00238725

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 Y
03		07		2023

Transaction ID : A0E732A04902B4FF5BCA

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.** 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

M M	/	D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item**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

M M	/	D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

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

1000.00

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

1000.00

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

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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 FEES

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
0	1		1	6		2	0	2	3

FEC Identification Number

C

Amount of Each Disbursement this Period

116.30

Transaction ID : B266718AA44D54C5092F

☐ 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 FEES

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
0	1		2	3		2	0	2	3

FEC Identification Number

C

Amount of Each Disbursement this Period

22.40

Transaction ID : B1C0FE18732C34795B59

☐ 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 FEES

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
0	1		3	0		2	0	2	3

FEC Identification Number

C

Amount of Each Disbursement this Period

25.10

Transaction ID : B593F58B4135743C68EB

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

163.80

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)

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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 FEES

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
0	2		0	6		2	0	2	3

FEC Identification Number

C

Amount of Each Disbursement this Period

40.30

Transaction ID : BA742C45913AC4CC3925

☐ 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 FEES

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
0	2		1	3		2	0	2	3

FEC Identification Number

C

Amount of Each Disbursement this Period

40.30

Transaction ID : B830E0702DF4C460DBA9

☐ 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 FEES

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
0	2		2	7		2	0	2	3

FEC Identification Number

C

Amount of Each Disbursement this Period

2.60

Transaction ID : BE7C166DCF3E24148B31

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

83.20

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)

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☒ 17	☐ 18	☐ 19a	☐ 19b
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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 FEES

001

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
0	3		0	1		2	0	2	3

FEC Identification Number

C

Amount of Each Disbursement this Period

4.30

Transaction ID : B92809AFCD5044BB8B9F

☐ 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 FEES

001

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
0	3		0	2		2	0	2	3

FEC Identification Number

C

Amount of Each Disbursement this Period

60.60

Transaction ID : BA411318BD3AC4E16B3B

☐ 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 FEES

001

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
0	3		0	6		2	0	2	3

FEC Identification Number

C

Amount of Each Disbursement this Period

132.30

Transaction ID : B5B09E4DF95004A2C95E

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

197.20

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 17 OF 33

☒ 17	☐ 18	☐ 19a	☐ 19b
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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 FEES

001

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
03		27		2023

FEC Identification Number

C

Amount of Each Disbursement this Period

1.30

Transaction ID : BEE88197AAE184EBA8AE

☐ 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 FEES

001

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
03		31		2023

FEC Identification Number

C

Amount of Each Disbursement this Period

0.50

Transaction ID : B20EF5AAAABAC44A478AA

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CONSERVATIVE PARTNERSHIP INSTITUTE

Mailing Address 300 INDEPENDENCE AVE SE

City
WASHINGTONState
DCZip Code
20003-1021Purpose of Disbursement
EVENT TICKET

001

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
01		09		2023

FEC Identification Number

C

Amount of Each Disbursement this Period

326.52

Transaction ID : B771889245B7243DD876

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

328.32

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 33

☒ 17	☐ 18	☐ 19a	☐ 19b
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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

A. CONSERVATIVE PARTNERSHIP INSTITUTE

Mailing Address 300 INDEPENDENCE AVE SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		09		2023

City
WASHINGTONState
DCZip Code
20003-1021

FEC Identification Number

C

Purpose of Disbursement
EVENT TICKET

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

326.52

Transaction ID : B65A3BC2FDACC4545AA1

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. DIRECT MAIL PROCESSORS

Mailing Address 1150 CONRAD CT

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2023

City
HAGERSTOWNState
MDZip Code
21740-5905

FEC Identification Number

C

Purpose of Disbursement
CAGING & ESCROW

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

617.06

Transaction ID : B6BC7916EDF8A4D36B7C

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. DIRECT MAIL PROCESSORS

Mailing Address 1150 CONRAD CT

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2023

City
HAGERSTOWNState
MDZip Code
21740-5905

FEC Identification Number

C

Purpose of Disbursement
CAGING & ESCROW

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

250.00

Transaction ID : BDC74A49CAA3A412FBEA

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

1193.58

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)

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☒ 17	☐ 18	☐ 19a	☐ 19b
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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

A. HSP DIRECT, LLCMailing Address 20130 LAKEVIEW CENTER PLZ
STE 300City
ASHBURNState
VAZip Code
20147-5905Purpose of Disbursement
DIRECT MAIL SERVICES

001

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
03	02	2023

FEC Identification Number

C

Amount of Each Disbursement this Period

417.42

Transaction ID : B4A4D4FA32BBE4493886

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

001

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
01	30	2023

FEC Identification Number

C

Amount of Each Disbursement this Period

10000.00

Transaction ID : B31B2EB23AC4A41C1B2D

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

001

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
03	15	2023

FEC Identification Number

C

Amount of Each Disbursement this Period

27399.35

Transaction ID : BEF72ABBE7EE74FFB9A6

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

37816.77

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 20 OF 33

☒ 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
0	1		3	0		2	0	2	3

FEC Identification Number

C

Amount of Each Disbursement this Period

2049.83

Transaction ID : B144871D135834BB9947

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RUDDY, CHRISTOPHER, , ,

Mailing Address 750 PARK OF COMMERCE DR

City
BOCA RATONState
FLZip Code
33487-3650Purpose of Disbursement
IN-KIND:FOOD & BEVERAGECategory/
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
0	3		0	1		2	0	2	3

FEC Identification Number

C

Amount of Each Disbursement this Period

248.59

Transaction ID : B33131DFDDE8649D7AAC

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SUNRISE DATA SERVICESMailing Address 20130 LAKEVIEW CENTER PLZ
STE 300City
ASHBURNState
VAZip Code
20147-5905Purpose of Disbursement
DIRECT MAIL SERVICES

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
0	3		0	2		2	0	2	3

FEC Identification Number

C

Amount of Each Disbursement this Period

463.50

Transaction ID : B08E4B4F16FFA466CB48

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

2761.92

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

42544.79

SCHEDULE C (FEC Form 3)
LOANS

PAGE 21 OF 33

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

CLYDE, ANDREW, , ,

Election: 2020

☐ Primary☐ General☒ Other (specify) ▼
PRIMARY RUNOFFMailing 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 06 M

/ D 30 D

/ Y 2020 Y

M M

/ D D

/ Y NONE 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).....▶

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 22 OF 33

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

CLYDE, ANDREW, , ,

Election: 2020

☐ Primary☐ General☒ Other (specify) ▼
PRIMARY RUNOFFMailing 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 07^MD 28^D

Y 2020 Y

M M

D D

Y NONE 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).....▶

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 23 OF 33

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

CLYDE, ANDREW, , ,

Election: 2022

☐ Primary☒ General☐ Other (specify) ▼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 09 M

/ D 19 D

/ Y 2022 Y

M M

/ D D

/ Y NONE 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).....▶

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 24 OF 33

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 : C661AE72425904782AAC

CLYDE FOR CONGRESS INC

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

CLYDE, ANDREW, , ,

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼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 03 M

D 03 D

Y 2020 Y

M M

D D

Y NONE 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).....▶

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 25 OF 33

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

CLYDE, ANDREW, , ,

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 888

City

State

ZIP Code

JEFFERSON

GA

30549-0888

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

135000.00

0.00

135000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 05 M

D 07 D

Y 2020 Y

M M

D D

Y NONE 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).....▶

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

PAGE 26 OF 33

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

CLYDE, ANDREW, , ,

Election: 2020

☐ Primary☐ General☒ Other (specify) ▼
PRIMARY RUNOFFMailing 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 06 / D 18 / Y 2020

M M / D D / 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)
LOANS

PAGE 27 OF 33

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 : CCB914824931D4AFE9DC

CLYDE FOR CONGRESS INC

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

CLYDE, ANDREW, , ,

Election: 2020

☐ Primary☒ General☐ Other (specify) ▼Mailing Address
PO BOX 888

City

State

ZIP Code

JEFFERSON

GA

30549-0888

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

120000.00

0.00

120000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 08 M

/

D 13 D

/

Y 2020 Y

M M

/

D D

/

Y NONE 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).....▶

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

PAGE 28 OF 33

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

CLYDE, ANDREW, , ,

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 888

City

State

ZIP Code

JEFFERSON

GA

30549-0888

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

60000.00

0.00

60000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 06

D 02

Y 2021 Y

M M

D D

Y NONE 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).....▶

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 29 OF 33

FOR 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

CLYDE, ANDREW, , ,

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼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 04 M

/ D 06 D

/ Y 2020 Y

M M

/ D D

/ Y NONE 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).....▶

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 30 OF 33

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

CLYDE, ANDREW, , ,

Election: 2020

☐ Primary☒ General☐ Other (specify) ▼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 08 M

D 27 D

Y 2020 Y

M M

D D

Y NONE 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).....▶

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 31 OF 33

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

CLYDE, ANDREW, , ,

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 888

City

State

ZIP Code

JEFFERSON

GA

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 11 M

D 25 D

Y 2020 Y

M M

D D

Y NONE 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).....▶

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 32 OF 33

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

CLYDE, ANDREW, , ,

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼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 04 M

D 22 D

Y 2020 Y

M M

D D

Y NONE 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)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 33 OF 33

FOR 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

CLYDE, ANDREW, , ,

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 888

City

State

ZIP Code

JEFFERSON

GA

30549-0888

☐ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

25000.00

0.00

25000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 03 M

D 20 D

Y 2023 Y

M M

D D

Y NONE 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).....▶

25000.00

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

1287363.64

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