

**FEC
FORM 3P****REPORT OF RECEIPTS
AND DISBURSEMENTS**BY AN AUTHORIZED COMMITTEE OF A CANDIDATE
FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

Office Use Only

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

Example: If typing, type over the lines.

12FE4M5

DOUG BURGUM FOR AMERICA, INC.

ADDRESS (number and street)

824 S MILLEDGE AVE STE 101

Check if different
than previously
reported. (ACC)

ATHENS

CITY

GA

STATE

30605

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C

C00842302

3. TYPE OF REPORT (Choose One)Check here if this is a Termination Report (TER) ☐

Quarterly Reports:

Monthly Reports:



April 15 (Q1)



October 15 (Q3)



Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)



Nov 20 (M11)



July 15 (Q2)



January 31 Year-End Report (YE)



Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)



Dec 20 (M12)



Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)



12-Day Pre-Election Report for the Election on

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

in the State of



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

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

4. IS THIS REPORT AN AMENDMENT?☐
yes☒
no**5. COVERING PERIOD**M M / D D / Y Y Y Y Y Y
07 / 01 / 2024

THROUGH

M M / D D / Y Y Y Y Y Y
09 / 30 / 2024

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

Type or Print Name of Treasurer

Kilgore, Paul, , ,

Signature of Treasurer

Kilgore, Paul, , ,

Date

M M / D D / Y Y Y Y Y Y
10 / 15 / 2024NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.
All previous versions of this form are obsolete and should no longer be used.Office
Use
Only

Write or Type Committee Name

DOUG BURGUM FOR AMERICA, INC.

Report Covering the Period: From: 07 / 01 / 2024 To: 09 / 30 / 2024

SUMMARY

6. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	2734.93
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 3)	0.00
8. SUBTOTAL (Lines 6 and 7)	2734.93
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 4)	35.00
10. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 9 from 8).....	2699.93
11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	0.00
12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	13970652.81
13. EXPENDITURES SUBJECT TO LIMITATION (Use the worksheet on Page 8 to calculate this amount.)	0.00

NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES

14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B on Page 4 from 17e, Column B on Page 3).....	3102522.67
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B on Page 3 from 23, Column B on Page 4).....	17042426.15

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3P (Rev. 05/2016)

NAME OF COMMITTEE (in Full)

DOUG BURGUM FOR AMERICA, INC.

Report Covering the Period:

From:

M M / D D / Y Y Y Y
07 / 01 / 2024

To:

M M / D D / Y Y Y Y
09 / 30 / 2024

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) itemized	0.00	2398628.98
(ii) unitemized	0.00	688818.69
(iii) Total contributions	0.00	3087447.67
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	40600.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17(c) and 17(d))	0.00	3128047.67
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate	0.00	14750652.81
(b) Other Loans	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b))	0.00	14750652.81
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.):		
(a) Operating	0.00	129027.77
(b) Fundraising	0.00	0.00
(c) Legal and Accounting	0.00	0.00
(d) TOTAL OFFSETS TO EXPENDITURES (Add 20(a), 20(b) and 20(c))	0.00	129027.77
21. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	200.60
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21)	0.00	18007928.85

DETAILED SUMMARY PAGE
 of Disbursements and Contributed Items

FEC Form 3P (Rev. 05/2016)

NAME OF COMMITTEE (in Full)
 DOUG BURGUM FOR AMERICA, INC.

Report Covering the Period:

From:

07^M / 01^D / 2024

To:

09^M / 30^D / 2024

II. DISBURSEMENTS

COLUMN A
 Total This Period

COLUMN B
 Election Cycle-to-Date

23. OPERATING EXPENDITURES.....	35.00	17171453.92
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS.....	0.00	0.00
27. LOAN REPAYMENTS MADE:		
(a) Repayments of Loans made or Guaranteed by Candidate.....	0.00	780000.00
(b) Other Repayments	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	0.00	780000.00
28. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	6925.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees	0.00	18600.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b) and 28(c))	0.00	25525.00
29. OTHER DISBURSEMENTS	0.00	28250.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	35.00	18005228.92

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

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

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

Page 5

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

2. FEC IDENTIFICATION NUMBER

C

C00842302

DOUG BURGUM FOR AMERICA, INC.

ADDRESS (number and street)

824 S MILLEDGE AVE STE 101

ATHENS

CITY

GA

STATE

30605

ZIP CODE

3. NAME OF CANDIDATE

ALLOCATION BY STATE

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

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

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

SCHEDULE B-P
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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)

DOUG BURGUM FOR AMERICA, INC.

Full Name (Last, First, Middle Initial)

A. Chain Bridge Bank

Mailing Address 1445A Laughlin Ave

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank Fees

101

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 08 2024

FEC Identification Number

C

Transaction ID : SB23.4123

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

35.00

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

35.00

SCHEDULE C-P
LOANSUse separate schedule(s) for each category
of the Detailed Summary Page

PAGE OF

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/12.4108

DOUG BURGUM FOR AMERICA, INC.

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

Election: 2024

BURGUM, DOUG, , ,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

824 S MILLEDGE AVE STE 101

City

ATHENS

State

GA

Zip Code

30605

☒ Personal Funds of the Candidate

Original Amount of Loan

5685652.81

Cumulative Payment To Date

780000.00

Balance Outstanding at Close of This Period

4905652.81

TERMS

Date Incurred

M M / D D / Y Y Y Y
03 / 22 / 2023

Date Due

M M / D D / Y Y Y Y
None

Interest Rate (if none, enter 0)

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:
Tfg

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**Subtotal Of Receipts This Page** (optional).....▶

4905652.81

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

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

SCHEDULE C-P
LOANSUse separate schedule(s) for each category
of the Detailed Summary Page

PAGE OF

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/12.4110

DOUG BURGUM FOR AMERICA, INC.

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

Election: 2024

BURGUM, DOUG, , ,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

824 S MILLEDGE AVE STE 101

City

ATHENS

State

GA

Zip Code

30605

☐ Personal Funds of the Candidate

Original Amount of Loan

4500000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

4500000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
06 / 22 / 2023

Date Due

M M / D D / Y Y Y Y
None

Interest Rate (if none, enter 0)

0.00

% (apr)

Secured:

☒ Yes ☐ No**List All Endorsers or Guarantors (if any) to Loan Source**

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:
Tfg

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**Subtotal Of Receipts This Page** (optional).....▶

4500000.00

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

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

SCHEDULE C-P
LOANSUse separate schedule(s) for each category
of the Detailed Summary Page

PAGE OF

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/12.4101

DOUG BURGUM FOR AMERICA, INC.

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

Election: 2024

BURGUM, DOUG, , ,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

824 S MILLEDGE AVE STE 101

City

ATHENS

State

GA

Zip Code

30605

☒ Personal Funds of the Candidate

Original Amount of Loan

1515000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1515000.00

TERMS

Date Incurred

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

Date Due

M M / D D / Y Y Y Y
None

Interest Rate (if none, enter 0)

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:
Tfg

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**Subtotal Of Receipts This Page** (optional).....▶

1515000.00

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

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

SCHEDULE C-P
LOANSUse separate schedule(s) for each category
of the Detailed Summary Page

PAGE OF

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/12.4102

DOUG BURGUM FOR AMERICA, INC.

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

Election: 2024

BURGUM, DOUG, , ,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

824 S MILLEDGE AVE STE 101

City

ATHENS

State

GA

Zip Code

30605

☒ Personal Funds of the Candidate

Original Amount of Loan

500000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

500000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
09 15 2023

Date Due

M M / D D / Y Y Y Y
None

Interest Rate (if none, enter 0)

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:
Tfg

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**Subtotal Of Receipts This Page** (optional).....▶

500000.00

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

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

SCHEDULE C-P
LOANSUse separate schedule(s) for each category
of the Detailed Summary Page

PAGE OF

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/12.4105

DOUG BURGUM FOR AMERICA, INC.

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

Election: 2024

BURGUM, DOUG, , ,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

824 S MILLEDGE AVE STE 101

City

ATHENS

State

GA

Zip Code

30605

☒ Personal Funds of the Candidate

Original Amount of Loan

750000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

750000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
10 30 2023

Date Due

M M / D D / Y Y Y Y
None

Interest Rate (if none, enter 0)

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:
Tfg

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**Subtotal Of Receipts This Page** (optional).....▶

750000.00

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

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

SCHEDULE C-P
LOANSUse separate schedule(s) for each category
of the Detailed Summary Page

PAGE OF

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/12.4104

DOUG BURGUM FOR AMERICA, INC.

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

Election: 2024

BURGUM, DOUG, , ,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

824 S MILLEDGE AVE STE 101

City

ATHENS

State

GA

Zip Code

30605

☒ Personal Funds of the Candidate

Original Amount of Loan

1800000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1800000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
11 / 28 / 2023

Date Due

M M / D D / Y Y Y Y
None

Interest Rate (if none, enter 0)

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:
Tfg

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**Subtotal Of Receipts This Page** (optional).....▶

1800000.00

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

13970652.81

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