

**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

ROSS SPANO FOR CONGRESS

ADDRESS (number and street)

P.O. BOX 423



Check if different than previously reported. (ACC)

SEFFNER

FL

33584

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00676668

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

FL

15

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

/

/ 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

/

/ Y Y Y Y

in the State of

/

5. Covering Period

M M / D D / Y Y Y Y

10 / 01 / 2020

/

through

M M / D D / Y Y Y Y

12 / 31 / 2020

/

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

Phillips, Robert, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Phillips, Robert, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y

01 / 18 / 2021

/

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

Office  
Use  
Only**FEC FORM 3**  
(Revised 05/2016)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 35

Write or Type Committee Name

ROSS SPANO FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	2	0

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	2	0

	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))....	365.00	1009758.53
(b) Total Contribution Refunds (from Line 20(d)) .....	149830.54	152330.54
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	- 149465.54	857427.99
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	207.94	974597.56
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	5407.16
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	207.94	969190.40
8. Cash on Hand at Close of Reporting Period (from Line 27).....	23721.86	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	128716.45	

## For further information contact:

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

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

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

PAGE 3 / 35

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

**ROSS SPANO FOR CONGRESS**

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

**I. RECEIPTS**

<b>COLUMN A</b> Total this Period	<b>COLUMN B</b> Election Cycle Total as of <input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2020"/> (date of general election)	<b>COLUMN C</b> Total for <input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2020"/> (date after general election)  through <input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
<input type="text" value="250.00"/>	<input type="text" value="588040.40"/>	<input type="text" value="0.00"/>
(ii) Unitemized		
<input type="text" value="115.00"/>	<input type="text" value="92118.13"/>	<input type="text" value="0.00"/>
(iii) Total of contributions from individuals		
<input type="text" value="365.00"/>	<input type="text" value="680158.53"/>	<input type="text" value="0.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Other Political Committees		
<input type="text" value="0.00"/>	<input type="text" value="329600.00"/>	<input type="text" value="0.00"/>

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 35

<b>COLUMN A</b> <b>Total this Period</b>	<b>COLUMN B</b> <b>Election Cycle Total as of *</b> (date of general election) (* See page 5 for date)	<b>COLUMN C</b> <b>Total for *</b> (date after general election) <b>through *</b> (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
365.00	1009758.53	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	129946.02	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	5407.16	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	39887.75	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
365.00	1184999.46	0.00

## POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 35

Write or Type Committee Name

ROSS SPANO FOR CONGRESS

Report Covering the Period:

From:

10

01

2020

To:

12

31

2020

## II. DISBURSEMENTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
207.94	974597.56	0.00
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	110000.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	110000.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
115930.54	115930.54	0.00
(b) Political Party Committees		
0.00	0.00	0.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 35

<b>COLUMN A</b> <b>Total this Period</b>	<b>COLUMN B</b> <b>Election Cycle Total as of *</b> (date of general election) (* See page 5 for date)	<b>COLUMN C</b> <b>Total for *</b> (date after general election) <b>through *</b> (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

33900.00	36400.00	0.00
----------	----------	------

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

149830.54	152330.54	0.00
-----------	-----------	------

**21. OTHER DISBURSEMENTS**

0.00	0.00	0.00
------	------	------

**22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)**

150038.48	1236928.10	0.00
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**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

- 149465.54	857427.99	0.00
-------------	-----------	------

**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

207.94	969190.40	0.00
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**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	173395.34
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	365.00
25. SUBTOTAL (add Line 23 and Line 24).....	173760.34
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	150038.48
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	23721.86

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 35

☒ 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)

**ROSS SPANO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Weinstein, Ira, , ,**

**A.**

Mailing Address 6103 Strickland Ave

City

Brooklyn

State

NY

Zip Code

11234

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Self

Occupation

Attorney

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 02 2020

Transaction ID : SA11AI.21226

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Debt Retirement

Full Name (Last, First, Middle Initial)

**WINRED**

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

**C**

C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

67061.52

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 15 2020

Transaction ID : SA11AI.21229

Amount of Each Receipt this Period

55.00

☒ Memo Item  
Unitemized contributions received through WINRED

Full Name (Last, First, Middle Initial)

**C.**

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)..... ▶

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

250.00

250.00

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

PAGE 8 OF 35

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROSS SPANO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Crawford, Chad, , ,**

Mailing Address 13415 Burnett Rd

City  
WimaumaState  
FLZip Code  
33598Purpose of Disbursement  
Travel Expense - No subvendors aggregate \$200

002

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
10	20	2020

FEC Identification Number

C

Amount of Each Disbursement this Period

137.50

Transaction ID : SB17.21150

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Extra Space Storage**

Mailing Address 2795 East Cottonwood Parkway

City  
Salt Lake CityState  
UTZip Code  
84121Purpose of Disbursement  
Storage Expense

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
10	15	2020

FEC Identification Number

C

Amount of Each Disbursement this Period

67.39

Transaction ID : SB17.21140

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
10	15	2020

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

3.05

Transaction ID : SB17.21231

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

207.94

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

207.94



**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 9 OF 35

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROSS SPANO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Allen, Barbara, , ,**

Mailing Address 1918 Rutherford Drive

City  
DoverState  
FLZip Code  
33527Purpose of Disbursement  
Refund Contribution

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
10	14	2020

FEC Identification Number

C

Amount of Each Disbursement this Period

767.00

Transaction ID : SB20A.21176

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Ansary, Hushang, , ,**

Mailing Address 1000 Louisiana St

City  
HoustonState  
TXZip Code  
77002Purpose of Disbursement  
Refund Contribution

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
10	14	2020

FEC Identification Number

C

Amount of Each Disbursement this Period

2800.00

Transaction ID : SB20A.21177

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Arnott, Robert, , ,**

Mailing Address 620 Newport Center Drive Suite 900

City  
Newport BeachState  
CAZip Code  
92660Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
10	14	2020

FEC Identification Number

C

Amount of Each Disbursement this Period

2800.00

Transaction ID : SB20A.21180

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

6367.00

**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 10 OF 35

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROSS SPANO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Aspect Holdings**

Mailing Address 8806 Harness Creek Lne

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

City  
HoustonState  
TXZip Code  
77024

FEC Identification Number

C

Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

777.20

Transaction ID : SB20A.21181

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**B. Burkhart, David, , ,**

Mailing Address 1011 Stella Vara Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

City  
LutzState  
FLZip Code  
33548

FEC Identification Number

C

Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

1000.00

Transaction ID : SB20A.21182

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**C. Cameron, Ronald, , ,**

Mailing Address PO Box 21440

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

City  
Little RockState  
ARZip Code  
72221

FEC Identification Number

C

Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

2800.00

Transaction ID : SB20A.21183

☐ Memo Item

State:

District:

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

4577.20

**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 11 OF 35

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROSS SPANO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Chazen, Stephen, , ,**

Mailing Address PO Box 1229

City  
BellaireState  
TXZip Code  
77402Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

FEC Identification Number

C

Amount of Each Disbursement this Period

715.52

Transaction ID : SB20A.21184

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Childs, John, , ,**

Mailing Address 165 Sago Palm Road

City  
Vero BeachState  
FLZip Code  
32963Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

FEC Identification Number

C

Amount of Each Disbursement this Period

2800.00

Transaction ID : SB20A.21185

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Copeland, Lamot, , ,**

Mailing Address 100 Rogers Rd

City  
WilmingtonState  
DEZip Code  
19801Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

FEC Identification Number

C

Amount of Each Disbursement this Period

2800.00

Transaction ID : SB20A.21186

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

6315.52

**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 12 OF 35

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROSS SPANO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Craig, Steven, , ,**

Mailing Address 1 Oceancrest

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

City  
Newport CoastState  
CAZip Code  
92657

FEC Identification Number

**C**Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Amount of Each Disbursement this Period

2800.00

Transaction ID : SB20A.21187

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. Davis, Aaron, , ,**

Mailing Address 4520 Stone Wall Lane

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

City  
Plant CityState  
FLZip Code  
33567

FEC Identification Number

**C**Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Amount of Each Disbursement this Period

200.00

Transaction ID : SB20A.21190

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**c. Fancelli, Gregory, , ,**

Mailing Address 415 Miramar Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

City  
LakelandState  
FLZip Code  
33803

FEC Identification Number

**C**Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Amount of Each Disbursement this Period

2800.00

Transaction ID : SB20A.21191

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

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

5800.00

**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 13 OF 35

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROSS SPANO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Fertitta, Frank, , ,**

Mailing Address 10801 W Charleston Blvd

City  
Las VegasState  
NVZip Code  
89135Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

FEC Identification Number

C

Amount of Each Disbursement this Period

2688.46

Transaction ID : SB20A.21194

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Fertitta, Lorenzo, , ,**

Mailing Address 1505 S Pavilion Center Drive

City  
Las VegasState  
NVZip Code  
89135Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

FEC Identification Number

C

Amount of Each Disbursement this Period

2688.46

Transaction ID : SB20A.21195

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Foster, Paul, , ,**

Mailing Address 123 W Mills Ave

City  
El PasoState  
TXZip Code  
79901Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

FEC Identification Number

C

Amount of Each Disbursement this Period

2800.00

Transaction ID : SB20A.21196

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

8176.92

**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 14 OF 35

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROSS SPANO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Gaby, Barbara, , ,**

Mailing Address 445 Old Homestead Trail

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

City  
Johns CreekState  
GAZip Code  
30097

FEC Identification Number

C

Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

2800.00

Transaction ID : SB20A.21197

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**B. Gaby, Richard, , ,**

Mailing Address 445 Old Homestead Trail

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

City  
Johns CreekState  
GAZip Code  
30097

FEC Identification Number

C

Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

2800.00

Transaction ID : SB20A.21198

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**C. Geehan, Brian, , ,**

Mailing Address 124 Holly Tree Lane

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

City  
BrandonState  
FLZip Code  
33511

FEC Identification Number

C

Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

2800.00

Transaction ID : SB20A.21199

☐ Memo Item

State:

District:

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

8400.00

**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 Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 OF 35

☐ 17 ☐ 18 ☐ 19a ☐ 19b  
☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

**ROSS SPANO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Geehan, Retha, , ,**

Mailing Address 124 Holly Tree Lane

City  
Brandon

State  
FL

Zip Code  
33511

Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
10 / 14 / 2020

FEC Identification Number

C

Amount of Each Disbursement this Period

2800.00

Transaction ID : SB20A.21200

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Hayde, Michael, , ,**

Mailing Address 8 Executive Circle

City  
Irvine

State  
CA

Zip Code  
92614

Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
10 / 14 / 2020

FEC Identification Number

C

Amount of Each Disbursement this Period

2748.27

Transaction ID : SB20A.21201

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Henderson, Gregory, , ,**

Mailing Address 403 Vonderburg Dr

City  
Brandon

State  
FL

Zip Code  
33511

Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
10 / 14 / 2020

FEC Identification Number

C

Amount of Each Disbursement this Period

2800.00

Transaction ID : SB20A.21202

☐ Memo Item

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

8348.27

**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 16 OF 35

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROSS SPANO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Jacob, Joel, , ,**

Mailing Address 31850 Northwestern Highway

Date of Disbursement

M M	D D	Y Y Y Y
10	14	2020

City  
Farmington HillsState  
MIZip Code  
48334

FEC Identification Number

C

Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2800.00

Transaction ID : SB20A.21207

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. James, Virginia, , ,**

Mailing Address Po Box 60

Date of Disbursement

M M	D D	Y Y Y Y
10	14	2020

City  
LambertvilleState  
NJZip Code  
08530

FEC Identification Number

C

Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2800.00

Transaction ID : SB20A.21208

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. Johnson, Ann, , ,**

Mailing Address 1220 South Ocean Boulevard

Date of Disbursement

M M	D D	Y Y Y Y
10	14	2020

City  
Palm BeachState  
FLZip Code  
33480

FEC Identification Number

C

Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2800.00

Transaction ID : SB20A.21210

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

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

8400.00

**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 35

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROSS SPANO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Johnson, Charles, , ,**

Mailing Address 1220 South Ocean Boulevard

City  
Palm BeachState  
FLZip Code  
33480Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

FEC Identification Number

C

Amount of Each Disbursement this Period

2800.00

Transaction ID : SB20A.21211

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Kante, Bennie, , ,**

Mailing Address 16749 W Ozark Trail

City  
SapulpaState  
OKZip Code  
74066Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

FEC Identification Number

C

Amount of Each Disbursement this Period

2800.00

Transaction ID : SB20A.21212

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Khouri, Laura, , ,**

Mailing Address 8 Executive Circle

City  
IrvineState  
CAZip Code  
92614Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

FEC Identification Number

C

Amount of Each Disbursement this Period

2748.27

Transaction ID : SB20A.21213

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

8348.27

**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 18 OF 35

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROSS SPANO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Kovner, Bruce, , ,**

Mailing Address 254 South Beach Rd

City  
Hobe SoundState  
FLZip Code  
33455Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

FEC Identification Number

C

Amount of Each Disbursement this Period

2800.00

Transaction ID : SB20A.21214

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Lorton, George, , ,**

Mailing Address 1601 Sahlman Dr

City  
TampaState  
FLZip Code  
33605Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

FEC Identification Number

C

Amount of Each Disbursement this Period

2800.00

Transaction ID : SB20A.21217

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Mackechnie, Ian, , ,**

Mailing Address 4902 Andros Dr

City  
TampaState  
FLZip Code  
33629Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB20A.21218

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

7100.00

**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 19 OF 35

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROSS SPANO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Marcus, Bernard, , ,**

Mailing Address 1266 W Paces Ferry Rd NW

City  
AtlantaState  
GAZip Code  
30327Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
10	14	2020

FEC Identification Number

C

Amount of Each Disbursement this Period

2799.14

Transaction ID : SB20A.21220

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Marcus, Billi, , ,**

Mailing Address 1266 W Paces Ferry Rd NW

City  
AtlantaState  
GAZip Code  
30327Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
10	14	2020

FEC Identification Number

C

Amount of Each Disbursement this Period

2800.00

Transaction ID : SB20A.21221

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Marshall, Barbara, , ,**

Mailing Address 7158 Buena Vista Road

City  
BakersfieldState  
CAZip Code  
93311Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
10	14	2020

FEC Identification Number

C

Amount of Each Disbursement this Period

2662.07

Transaction ID : SB20A.21222

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

8261.21

**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 35

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROSS SPANO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. McLaughlin, Brandi, , ,**

Mailing Address 1220 Easton Drive

City  
LakelandState  
FLZip Code  
33803Purpose of Disbursement  
Refund Contribution

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	2	0

FEC Identification Number

C

Amount of Each Disbursement this Period

43.42

Transaction ID : SB20A.21143

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Meng, Xianbin, , ,**

Mailing Address 8105 Anderson Road

City  
TampaState  
FLZip Code  
33634Purpose of Disbursement  
Refund Contribution

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	2	0

FEC Identification Number

C

Amount of Each Disbursement this Period

2800.00

Transaction ID : SB20A.21149

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Middleton, Mireya, , ,**

Mailing Address 138 11th Ave S

City  
Safety HarborState  
FLZip Code  
34695Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	2	0

FEC Identification Number

C

Amount of Each Disbursement this Period

2800.00

Transaction ID : SB20A.21223

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

5643.42

**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 21 OF 35

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROSS SPANO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Moskowitz, Cherna, , ,**

Mailing Address 4744 N Bay Rd.

City  
Miami BeachState  
FLZip Code  
33140Purpose of Disbursement  
Refund Contribution

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
10	14	2020

FEC Identification Number

C

Amount of Each Disbursement this Period

2800.00

Transaction ID : SB20A.21153

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Rashid, Sam, , ,**

Mailing Address PO Box 2190

City  
BrandonState  
FLZip Code  
33509Purpose of Disbursement  
Refund Contribution

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
10	14	2020

FEC Identification Number

C

Amount of Each Disbursement this Period

2600.00

Transaction ID : SB20A.21156

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Rideout, Allison, , ,**

Mailing Address 3307 West Shell Point Road

City  
RuskinState  
FLZip Code  
33570Purpose of Disbursement  
Refund Contribution

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
10	14	2020

FEC Identification Number

C

Amount of Each Disbursement this Period

1200.00

Transaction ID : SB20A.21157

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

6600.00

**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 22 OF 35

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROSS SPANO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Roberts, Dina, , ,**

Mailing Address 1567 Prospect Lane

City  
AlpineState  
UTZip Code  
84004Purpose of Disbursement  
Refund Contribution

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	2	0

FEC Identification Number

C

Amount of Each Disbursement this Period

2600.00

Transaction ID : SB20A.21158

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Roberts, Scott, , ,**

Mailing Address 1567 Prospect Lane

City  
AlpineState  
UTZip Code  
84004Purpose of Disbursement  
Refund Contribution

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	2	0

FEC Identification Number

C

Amount of Each Disbursement this Period

2600.00

Transaction ID : SB20A.21159

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Roth, Steven, , ,**

Mailing Address 888 Seventh Ave

City  
New YorkState  
NYZip Code  
10019Purpose of Disbursement  
Refund Contribution

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	2	0

FEC Identification Number

C

Amount of Each Disbursement this Period

715.52

Transaction ID : SB20A.21160

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

5915.52

**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 23 OF 35

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROSS SPANO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Sinquefield, Jeanne, , ,**

Mailing Address 1007 Bryan Pond Court

City  
McLeanState  
VAZip Code  
22102Purpose of Disbursement  
Refund Contribution

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

FEC Identification Number

C

Amount of Each Disbursement this Period

561.41

Transaction ID : SB20A.21164

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Sinquefield, Rex, , ,**

Mailing Address 1007 Bryan Pond Court

City  
McLeanState  
VAZip Code  
22102Purpose of Disbursement  
Refund Contribution

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

FEC Identification Number

C

Amount of Each Disbursement this Period

2315.80

Transaction ID : SB20A.21165

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Spano, David, , ,**

Mailing Address 165 Eisenhower Drive

City  
OswegoState  
ILZip Code  
60543Purpose of Disbursement  
Refund Contribution

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

FEC Identification Number

C

Amount of Each Disbursement this Period

1400.00

Transaction ID : SB20A.21166

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

4277.21

**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 24 OF 35

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROSS SPANO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Sparkman, Diana, , ,**

Mailing Address 2106 N Golfview Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

City  
Plant CityState  
FLZip Code  
33566

FEC Identification Number

C

Purpose of Disbursement  
Refund Contribution

010

Candidate Name

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

2200.00

Transaction ID : SB20A.21167

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**B. Tomczack, Robert, , ,**

Mailing Address 10611 Broadline Pass

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

City  
ThonotosassaState  
FLZip Code  
33592

FEC Identification Number

C

Purpose of Disbursement  
Refund Contribution

010

Candidate Name

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

1800.00

Transaction ID : SB20A.21170

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**C. Warren, Kelcy, , ,**

Mailing Address 8111 Westchester Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

City  
DallasState  
TXZip Code  
75225

FEC Identification Number

C

Purpose of Disbursement  
Refund Contribution

010

Candidate Name

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

2800.00

Transaction ID : SB20A.21171

☐ Memo Item

State:

District:

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

6800.00

**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 25 OF 35

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROSS SPANO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Wintersteen, Jim, , ,**

Mailing Address 27 Myrtle Avenue

City  
Mill ValleyState  
CAZip Code  
94941Purpose of Disbursement  
Refund Contribution

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

FEC Identification Number

C

Amount of Each Disbursement this Period

2200.00

Transaction ID : SB20A.21172

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Wright, Alison, , ,**

Mailing Address 1838 Thompson Road

City  
LithiaState  
FLZip Code  
33547Purpose of Disbursement  
Refund Contribution

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB20A.21173

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Wright, Cary, , ,**

Mailing Address 1838 Thompson Road

City  
LithiaState  
FLZip Code  
33547Purpose of Disbursement  
Refund Contribution

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

FEC Identification Number

C

Amount of Each Disbursement this Period

1900.00

Transaction ID : SB20A.21174

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

6600.00

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

115930.54

**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 26 OF 35

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input checked="" type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROSS SPANO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. BNSF PAC**

Mailing Address Po Box 961039

Date of Disbursement

M M	D D	Y Y Y Y
10	14	2020

City  
Fort WorthState  
TXZip Code  
76161

FEC Identification Number

**C** C00235739Purpose of Disbursement  
Refund Contribution

010

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB20C.21175

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION**Mailing Address 99 M ST, SE  
SUITE 300

Date of Disbursement

M M	D D	Y Y Y Y
10	14	2020

City  
WASHINGTONState  
DCZip Code  
20003

FEC Identification Number

**C** C00007880Purpose of Disbursement  
Contribution Refund

010

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB20C.21189

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. FEDEX CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 942 S SHADY GROVE ROAD

Date of Disbursement

M M	D D	Y Y Y Y
10	14	2020

City  
MEMPHISState  
TNZip Code  
38120

FEC Identification Number

**C** C00068692Purpose of Disbursement  
Contribution Refund

010

Amount of Each Disbursement this Period

500.00

Transaction ID : SB20C.21192

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

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

3000.00

**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 27 OF 35

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input checked="" type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROSS SPANO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**Mailing Address 101 CONSTITUTION AVE. NW  
SUITE 500 WESTCity  
WASHINGTONState  
DCZip Code  
20001Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

FEC Identification Number

C C00096156

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB20C.21203

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. House Conservative Fund PAC**

Mailing Address 228 S Washington St

City  
AlexandriaState  
VAZip Code  
22314Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB20C.21204

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HUCK PAC**

Mailing Address PO BOX 2008

City  
LITTLE ROCKState  
ARZip Code  
72203Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2020

FEC Identification Number

C C00448373

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB20C.21205

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

12500.00

**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 28 OF 35

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input checked="" type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROSS SPANO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. LET TEXANS RUN TEXAS PAC**

Mailing Address P.O. BOX 41964

City  
HOUSTONState  
TXZip Code  
77241Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	2	0

FEC Identification Number

**C** C00588749

Amount of Each Disbursement this Period

2600.00

Transaction ID : SB20C.21216

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Majority Committee PAC**

Mailing Address PO Box 10134

City  
BakersfieldState  
CAZip Code  
93389Purpose of Disbursement  
Contribution Refund

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	2	0

FEC Identification Number

**C**

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB20C.21219

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NATIONAL STONE, SAND & GRAVEL ASSOCIATION ROCKPAC**Mailing Address 66 CANAL CENTER PLAZA  
SUITE 300City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
Refund Contribution

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	2	0

FEC Identification Number

**C** C00089458

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB20C.21154

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

9100.00

**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 29 OF 35

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input checked="" type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROSS SPANO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PRIVATE CARE ASSOCIATION POLITICAL ACTION COMMITTEE, THE**

Mailing Address PO BOX 0911

Date of Disbursement

M M	D D	Y Y Y Y
10	14	2020

City  
SOUTHERN PINESState  
NCZip Code  
28388

FEC Identification Number

**C** C00498154Purpose of Disbursement  
Refund Contribution

010

Candidate Name

Amount of Each Disbursement this Period

200.00

Transaction ID : SB20C.21155

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. Scalise for Congress**

Mailing Address Po Box 23219

Date of Disbursement

M M	D D	Y Y Y Y
10	14	2020

City  
JeffersonState  
LAZip Code  
70183

FEC Identification Number

**C** C00394957Purpose of Disbursement  
Refund Contribution

010

Candidate Name

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB20C.21161

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA

District: 01

Full Name (Last, First, Middle Initial)

**C. THE EYE OF THE TIGER POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 9891

Date of Disbursement

M M	D D	Y Y Y Y
10	14	2020

City  
ARLINGTONState  
VAZip Code  
22219

FEC Identification Number

**C** C00467431Purpose of Disbursement  
Refund Contribution

010

Candidate Name

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB20C.21168

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

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

7200.00

**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 30 OF 35

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input checked="" type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

ROSS SPANO FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. THE MOSAIC COMPANY POLITICAL ACTION COMMITTEE (MOSAICPAC)**

Mailing Address 13830 CIRCA CROSSING DRIVE

City  
LITHIAState  
FLZip Code  
33547Purpose of Disbursement  
Refund Contribution

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	2	0

FEC Identification Number

C C00455766

Amount of Each Disbursement this Period

2100.00

Transaction ID : SB20C.21169

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

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

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/  
Type

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

FEC Identification Number

C

Amount of Each Disbursement this Period

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

2100.00

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

33900.00

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 31 OF 35

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4408

ROSS SPANO FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

SPANO, VINCENT ROSS, , ,

☐ Memo Item

Election: 2018

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
PO BOX 423

City

SEFFNER

State

FL

ZIP Code

33584

☒ Personal Funds of the Candidate

Original Amount of Loan

32000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

32000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M 08 M

/ D 08 D

/ Y 2018 Y

M M

/ D D

/ Y 8/8/2021 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).....▶

32000.00

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

PAGE 32 OF 35

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4407

ROSS SPANO FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

SPANO, VINCENT ROSS, , ,

☐ Memo Item

Election: 2018

☐ Primary☒ General☐ Other (specify) ▼Mailing Address  
PO BOX 423

City

SEFFNER

State

FL

ZIP Code

33584

☒ Personal Funds of the Candidate

Original Amount of Loan

27500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

27500.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M 09 M /

D 30 D /

Y 2018 Y

M M /

D D /

Y 9/30/2021 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).....▶

27500.00

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

59500.00

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**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 33 OF 35

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

NAME OF COMMITTEE (In Full)

**ROSS SPANO FOR CONGRESS**

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

**Berke Farah**

Nature of Debt (Purpose):

Legal Fees

Mailing Address 1200 New Hampshire Ave  
Ste 800City  
WashingtonState  
DCZip Code  
20036

Outstanding Balance Beginning This Period

13145.00

Transaction ID : SD10.8204

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

13145.00

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

**Berke Farah**

Nature of Debt (Purpose):

Legal Fees

Mailing Address 1200 New Hampshire Ave  
Ste 800City  
WashingtonState  
DCZip Code  
20036

Outstanding Balance Beginning This Period

11110.00

Transaction ID : SD10.8203

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11110.00

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

**Epiq Ediscover Solutions**

Nature of Debt (Purpose):

Discovery Services

Mailing Address 777 Third Ave

City  
New YorkState  
NYZip Code  
10017

Outstanding Balance Beginning This Period

4414.44

Transaction ID : SD10.21110

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4414.44

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

28669.44

2) **TOTALS** This Period (last page this line number only) .....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

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

PAGE 34 OF 35

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

NAME OF COMMITTEE (In Full)

**ROSS SPANO FOR CONGRESS**

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

**Gula Graham**

Nature of Debt (Purpose):

Fundraising Services

Mailing Address 499 South Capitol St., SW

City

Washington

State

DC

Zip Code

20003

Outstanding Balance Beginning This Period

300.00

Transaction ID : SD10.6471

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

300.00

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

**Holland & Knight LLP**

Nature of Debt (Purpose):

Legal Fees

Mailing Address PO Box 864084

City

Orlando

State

FL

Zip Code

32886

Outstanding Balance Beginning This Period

22186.26

Transaction ID : SD10.6472

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

22186.26

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

**Holland & Knight LLP**

Nature of Debt (Purpose):

Legal Fees

Mailing Address PO Box 864084

City

Orlando

State

FL

Zip Code

32886

Outstanding Balance Beginning This Period

60.75

Transaction ID : SD10.8207

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

60.75

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

22547.01

2) **TOTALS** This Period (last page this line number only) .....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

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

PAGE 35 OF 35

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

NAME OF COMMITTEE (In Full)

**ROSS SPANO FOR CONGRESS**

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

Political Insights

Nature of Debt (Purpose):  
Strategy Consulting

Mailing Address 1871 Laurel Street

City

Sarasota

State

FL

Zip Code

34236

Outstanding Balance Beginning This Period

18000.00

Transaction ID : SD10.21112

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

18000.00

B. 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

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

18000.00

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

69216.45

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

59500.00

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

128716.45