

**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
REPORTNEW
(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 /

10

D D /

01

Y Y Y Y /

2023

through

M M /

12

D D /

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.

Type or Print Name of Treasurer

KILGORE, PAUL, , ,

Signature of Treasurer

KILGORE, PAUL, , ,

Date

M M /

01

D D /

31

Y Y Y Y /

2024

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 03/2016)

Write or Type Committee Name

CLYDE FOR CONGRESS INC

Report Covering the Period:

From:

M M / D D / Y Y Y Y
10 01 2023

To:

M M / D D / Y Y Y Y
12 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))	50399.44	187700.04
(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))	50399.44	187700.04
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	83413.82	327756.89
(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))	83413.82	327756.89
8. Cash on Hand at Close of Reporting Period (from Line 27)	12198.86	
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 the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

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:

M M / D D / Y Y Y Y
10 / 01 / 2023

To:

M M / D D / Y Y Y Y
12 / 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).....

39393.00

143301.59

(ii) Unitemized

2006.44

16648.45

(iii) TOTAL of contributions
from individuals ▶

41399.44

159950.04

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

9000.00

27750.00

(d) The Candidate

0.00

0.00

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

50399.44

187700.04

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

6342.95

13. LOANS:

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

0.00

25000.00

(b) All Other Loans.....

0.00

0.00

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

0.00

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)..... ▶

50399.44

219043.04

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	83413.82	327756.89
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	2900.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	83413.82	330656.89

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	45213.24
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	50399.44
25. SUBTOTAL (add Line 23 and Line 24).....	95612.68
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	83413.82
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	12198.86

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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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

Full Name (Last, First, Middle Initial)

ACTON, MICHAEL, , ,

A.

Mailing Address 186 PEACHWOOD LN

City
HOMERState
GAZip Code
30547-1515FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
DEVELOPER

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
11 / 07 / 2023

Transaction ID : A8453C849F96346BEB78

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BAKER, ROCK, , ,

B.

Mailing Address 727 LINDSEY BAKER CT

City
GAINESVILLEState
GAZip Code
30506-1553FEC ID number of contributing
federal political committee.

C

Name of Employer
BRE-ROCK, LLCOccupation
REAL ESTATE

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
10 / 03 / 2023

Transaction ID : AC8F1304913F4481BA21

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DALLAS, CHAM, , ,

C.

Mailing Address 452 MASON MILL RD

City
DANIELSVILLEState
GAZip Code
30633-4006FEC ID number of contributing
federal political committee.

C

Name of Employer
UNIVERSITY OF GEORGIAOccupation
PROFESSOR

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 22 / 2023

Transaction ID : ADCFEE8F951FC4C3F838

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

3860.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

FERGUSON, JEFF, , ,

A.

Mailing Address 780 GOLF COURSE RD

City

DEMOREST

State

GA

Zip Code

30535-5015

FEC ID number of contributing
federal political committee.

C

Name of Employer

DOUBLE TAP OUTDOOR & TACTICAL

Occupation

BUSINESS OWNER

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AB2A9D4AE92A34CABA4C

Amount of Each Receipt this Period

500.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

HATFIELD, JOE, M., ,

Mailing Address 885 W GLADE CREEK RD

City

CLARKESVILLE

State

GA

Zip Code

30523-4319

FEC ID number of contributing
federal political committee.

C

Name of Employer

FIELDAL FARM

Occupation

OWNER

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

4300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	2	3

Transaction ID : A8918CCA94A5A408F8CA

Amount of Each Receipt this Period

1000.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

HATFIELD, JOE, M., ,

Mailing Address 885 W GLADE CREEK RD

City

CLARKESVILLE

State

GA

Zip Code

30523-4319

FEC ID number of contributing
federal political committee.

C

Name of Employer

FIELDAL FARM

Occupation

OWNER

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

4300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	2	3

Transaction ID : AFDA3CD9CFB6F476C9D2

Amount of Each Receipt this Period

2300.00



Memo Item

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

3800.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

JEPSON, JEFFREY, , ,

A.

Mailing Address 143 PUTTENHAM XING

City
POOLERState
GAZip Code
31322-9607FEC ID number of contributing
federal political committee.

C

Name of Employer
EVANS GENERAL CONTRACTORSOccupation
CONSTRUCTION

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
11 19 2023

Transaction ID : A24CBBDBF344D4331AAB

Amount of Each Receipt this Period

3300.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

KUSPIEL, KATHLEEN, , ,

Mailing Address 6335 HUNTERS VIEW LN

City
CUMMINGState
GAZip Code
30041-4090FEC 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
11 29 2023

Transaction ID : A3905DC934C444F1EBD8

Amount of Each Receipt this Period

250.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

LINDY, G., SCOTT, ,

Mailing Address 2694 ECHOLS RD

City
CUMMINGState
GAZip Code
30041-8234FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
SALES

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
10 31 2023

Transaction ID : AD3FEA1F8B88B40CD900

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

4050.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

MATHENY, DAVID, , ,

A.

Mailing Address 2305 BEL PAESE BND

City

LEANDER

State

TX

Zip Code

78641-4778

FEC ID number of contributing
federal political committee.

C

Name of Employer
SILENCER SHOPOccupation
OWNER

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
11		16		2023

Transaction ID : A0C95389BE24E4F33AC3

Amount of Each Receipt this Period

3300.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

MIDDLEBROOKS, STEVE, , ,

Mailing Address 274 MOSS SIDE DR

City

ATHENS

State

GA

Zip Code

30607-2109

FEC ID number of contributing
federal political committee.

C

Name of Employer
HEYWARD ALLEN TOYOTAOccupation
AUTOMOBILE DEALER

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
11		22		2023

Transaction ID : AEB561A7C4F5846DABD4

Amount of Each Receipt this Period

500.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

MONSEES, HENRY, , ,

Mailing Address 2425 W GWINNETT ST

City

SAVANNAH

State

GA

Zip Code

31415-9602

FEC ID number of contributing
federal political committee.

C

Name of Employer
SAVANNAH DISTRIBUTINGOccupation
CEO

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
11		16		2023

Transaction ID : A2038C95FACFC47EE891

Amount of Each Receipt this Period

1000.00



Memo Item

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

4800.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

MORRIS, LEE, , ,

A.

Mailing Address 910 DAY HILL RD

City

WINDSOR

State

CT

Zip Code

06095-5727

FEC ID number of contributing
federal political committee.

C

Name of Employer

MORRIS GROUP, INC.

Occupation

CHAIRMAN

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	6		2	0	3	

Transaction ID : A0DBAE070D0E64A618F2

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PAGEL, MARK, , ,

B.

Mailing Address 3720 HIGH GABLES W

City

CUMMING

State

GA

Zip Code

30041-4501

FEC ID number of contributing
federal political committee.

C

Name of Employer

COMCAST

Occupation

DATA ANALYST

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : AF03A1513900849B089F

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PAYNE, CHRISTOPHER, , ,

C.

Mailing Address 5837 CARNOUSTIE CT

City

AVE MARIA

State

FL

Zip Code

34142-5260

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 ▼

3300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	7		2	0	2	3

Transaction ID : A967EBC5B05E2432E8DE

Amount of Each Receipt this Period

1300.00

☐ Memo Item

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

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

3550.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

PAYNE, CHRISTOPHER, , ,

A. Mailing Address 5837 CARNOUSTIE CT

City

AVE MARIA

State

FL

Zip Code

34142-5260

FEC ID number of contributing
federal political committee.

C

Name of Employer

CROSS POTOMAC CONSULTING, LLC

Occupation

CONSULTANT

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

5300.00

Date of Receipt

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

Transaction ID : A453109B6F019416B85F

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PAYNE, DANIEL, , ,

B. Mailing Address 835 VISTA BLUFF DR

City

DULUTH

State

GA

Zip Code

30097-6474

FEC ID number of contributing
federal political committee.

C

Name of Employer

PYRAMID

Occupation

MANAGER

Receipt For: 2024

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

3300.00

Date of Receipt

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

Transaction ID : AD389D31B28F542D08A2

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PAYNE, LESLIE, , ,

C. Mailing Address 5837 CARNOUSTIE CT

City

AVE MARIA

State

FL

Zip Code

34142-5260

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2024

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

3300.00

Date of Receipt

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

Transaction ID : AECAD3028EA3846ECADC

Amount of Each Receipt this Period

3300.00

☐ Memo Item

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

8600.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

PETETIT, LUCINDA, L., ,

A.

Mailing Address 2857 WOODBRIAR DR

City

GAINESVILLE

State

GA

Zip Code

30506-2890

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 ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			29			2023			

Transaction ID : A7179A25080B94676BB4

Amount of Each Receipt this Period

60.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

PETETIT, LUCINDA, L., ,

Mailing Address 2857 WOODBRIAR DR

City

GAINESVILLE

State

GA

Zip Code

30506-2890

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 ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			29			2023			

Transaction ID : A06CC87FC72E54573BA1

Amount of Each Receipt this Period

60.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

PRITCHARD, JAMES, , ,

Mailing Address PO BOX 1688

City

BUFORD

State

GA

Zip Code

30515-8688

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
11			02			2023			

Transaction ID : AA9718EB535854170B64

Amount of Each Receipt this Period

3300.00



Memo Item

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

3420.00

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

Full Name (Last, First, Middle Initial)

SCOTT, CINDY, M., ,

A.

Mailing Address 1457 RUTH JACKSON RD

City
BOGARTState
GAZip Code
30622-2373FEC ID number of contributing
federal political committee.

C

Name of Employer
RAC PROPERTIES OF ATHENSOccupation
REAL ESTATE

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
12 15 2023

Transaction ID : A4ECC0A4A11FB45B1962

Amount of Each Receipt this Period

1600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SILBEY, ALEXANDER, , ,

B.

Mailing Address 906 3RD PL SE

City
WASHINGTONState
DCZip Code
20003-3487FEC ID number of contributing
federal political committee.

C

Name of Employer
ATS COMMUNICATIONS, INC.Occupation
CONSULTANT

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 18 2023

Transaction ID : AA8BF33DD85D04A39937

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SMITH, MARK, V., ,

C.

Mailing Address 141 FAIRWIND RD

City
SAVANNAHState
GAZip Code
31410-3514FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

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
12 20 2023

Transaction ID : AB0879A8B163B460FA6F

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

3100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

STRICKLAND, THOMAS, D., , III

A.

Mailing Address 3445 LOCUST COVE RD SW

City

GAINESVILLE

State

GA

Zip Code

30504-5640

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 ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
10		31		2023

Transaction ID : A35F3AD2EC5484A74B2D

Amount of Each Receipt this Period

250.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

VON BATTEN, KARL, , , III

Mailing Address 4280 MASSACHUSETTS AVE NW

City

WASHINGTON

State

DC

Zip Code

20016-5558

FEC ID number of contributing
federal political committee.

C

Name of Employer

VON BATTEN MONTAGUE YORK

Occupation

LOBBYIST

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
12		15		2023

Transaction ID : A75A4BB4F604F41288FC

Amount of Each Receipt this Period

500.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

VON BATTEN, KARL, , , III

Mailing Address 4280 MASSACHUSETTS AVE NW

City

WASHINGTON

State

DC

Zip Code

20016-5558

FEC ID number of contributing
federal political committee.

C

Name of Employer

VON BATTEN MONTAGUE YORK

Occupation

LOBBYIST

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
12		15		2023

Transaction ID : ACC08F9451F554BBFB88

Amount of Each Receipt this Period

500.00



Memo Item

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

1250.00

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:
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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

WEEKS, KELLIE, , ,

A. Mailing Address 130 JOHN MORROW JR PKWY

City

GAINESVILLE

State

GA

Zip Code

30501

FEC ID number of contributing
federal political committee.

C

Name of Employer
GEORGIA GUN STOREOccupation
STORE OWNER

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 21 2023

Transaction ID : A95A816EB405C42249AD

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WEINER, BRUCE, , ,

B. Mailing Address 571 LEDFORD RD

City

DILLARD

State

GA

Zip Code

30537-1759

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1963.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 23 2023

Transaction ID : A251201D4048348F5B4B

Amount of Each Receipt this Period

1963.00

☐ Memo Item

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

Amount of Each Receipt this Period

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

2963.00

39393.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

AMODEI FOR NEVADA

Mailing Address 503 N DIVISION ST

City

CARSON CITY

State

NV

Zip Code

89703-4104

FEC ID number of contributing
federal political committee.

C C00496760

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		18		2023

Transaction ID : A4E392ED1A0BB4B248BC

Amount of Each Receipt this Period

2000.00



Memo Item

Full Name (Last, First, Middle Initial)

AT&T INC./WARNERMEDIA LLC FEDERAL PAC (AT&T/WARNERMEDIA FEDERAL PAC)

Mailing Address 208 S AKARD ST

STE 1812

City

DALLAS

State

TX

Zip Code

75202-4206

FEC ID number of contributing
federal political committee.

C C00109017

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
12		31		2023

Transaction ID : AE18E15041A4A4296A5D

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

FREEDOM FIRST PAC

Mailing Address PO BOX 97485

City

RALEIGH

State

NC

Zip Code

27624-7485

FEC ID number of contributing
federal political committee.

C C00503094

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
12		31		2023

Transaction ID : ADBD315ED9D8B4C50B97

Amount of Each Receipt this Period

1000.00



Memo Item

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

4000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND**A.**

Mailing Address 11250 WAPLES MILL RD

City
FAIRFAXState
VAZip Code
22030-7550FEC ID number of contributing
federal political committee.**C** C00053553

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
1	0		3	1		2	0	2	3

Transaction ID : AD4E9042D1CBF4035967

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

REGIONS FINANCIAL CORPORATION PAC**B.**Mailing Address 1015 15TH ST NW
STE 920City
WASHINGTONState
DCZip Code
20005-2623FEC ID number of contributing
federal political committee.**C** C00432252

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
1	2		3	1		2	0	2	3

Transaction ID : A905A85FC6EB64B8D960

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SEAL PAC SUPPORTING ELECTING AMERICAN LEADERS PAC**C.**

Mailing Address 824 S MILLEDGE AVE, STE 101

City
ATHENSState
GAZip Code
30605FEC ID number of contributing
federal political committee.**C** C00570226

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : AB745F2FE063E4D4F965

Amount of Each Receipt this Period

1000.00

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

3000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. PAC**A.** Mailing Address 805 FIFTEENTH ST NW SUITE 430

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.**C** C00147173

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2023			

Transaction ID : AE9FC8DB694BA45A79F1

Amount of Each Receipt this Period

2000.00

☐ 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

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

Amount of Each Receipt this Period

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

2000.00

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

9000.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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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
1	0		0	9		2	0	2	3

FEC Identification Number

C

Amount of Each Disbursement this Period

20.30

Transaction ID : B7EB1F17A56AA40AA832

☐ 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
1	0		2	3		2	0	2	3

FEC Identification Number

C

Amount of Each Disbursement this Period

4.30

Transaction ID : BACAC97F95FE84014826

☐ 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
1	1		0	6		2	0	2	3

FEC Identification Number

C

Amount of Each Disbursement this Period

132.30

Transaction ID : BDB9695F08AA041F98C7

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

156.90

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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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
1	1		1	3		2	0	2	3

FEC Identification Number

C

Amount of Each Disbursement this Period

132.30

Transaction ID : B8DF0FADA457D42FBBC6

☐ 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
1	1		2	0		2	0	2	3

FEC Identification Number

C

Amount of Each Disbursement this Period

517.50

Transaction ID : B6C4068229CB840C6A04

☐ 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
1	1		2	7		2	0	2	3

FEC Identification Number

C

Amount of Each Disbursement this Period

523.02

Transaction ID : BECE9BD52A51448AD936

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

1172.82

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

SCHEDULE B (FEC Form 3)
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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
1	2		1	8		2	0	2	3

FEC Identification Number

C

Amount of Each Disbursement this Period

100.60

Transaction ID : B79A2DE7CD0C94F9F98A

☐ 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
1	2		2	5		2	0	2	3

FEC Identification Number

C

Amount of Each Disbursement this Period

40.30

Transaction ID : B4D56DF441BA840D0A9E

☐ 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
1	2		3	1		2	0	2	3

FEC Identification Number

C

Amount of Each Disbursement this Period

10.76

Transaction ID : BED6776803D9E4265ABD

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

151.66

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

A. ARISTOTLE INTERNATIONAL, INC.

Mailing Address 205 PENNSYLVANIA AVE SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		04		2023

City
WASHINGTONState
DCZip Code
20003-1164

FEC Identification Number

C

Purpose of Disbursement
DATABASE SOFTWARE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2250.00

Transaction ID : B4F6436716103443DB5E

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. ARISTOTLE INTERNATIONAL, INC.

Mailing Address 205 PENNSYLVANIA AVE SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		29		2023

City
WASHINGTONState
DCZip Code
20003-1164

FEC Identification Number

C

Purpose of Disbursement
DATABASE SOFTWARE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2250.00

Transaction ID : B7186524F4F1D4789B54

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. FUNDRAISING, INC.Mailing Address 800 W 47TH ST
STE 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		29		2023

City
KANSAS CITYState
MOZip Code
64112-1244

FEC Identification Number

C

Purpose of Disbursement
FUNDRAISING CONSULTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

7572.69

Transaction ID : B9B5AC0FE4C74403D8DB

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

12072.69

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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☒ 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. HALL COUNTY REPUBLICAN PARTY

Mailing Address PO BOX 1174

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			29			2023			

City
GAINESVILLEState
GAZip Code
30503-1174

FEC Identification Number

C

Purpose of Disbursement
SPONSORSHIP

001

Amount of Each Disbursement this Period

250.00

Transaction ID : BB61571B4E8964B9D9EE

☐ Memo ItemCandidate Name
HALL COUNTY REPUBLICAN PARTYCategory/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. J. RUSSELL & ASSOC., LLC, D/B/A WAR ROOM STRATEGIESMailing Address 3651 MARS HILL RD
STE 1200

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2023			

City
WATKINSVILLEState
GAZip Code
30677-5985

FEC Identification Number

C

Purpose of Disbursement
STRATEGY CONSULTING

001

Amount of Each Disbursement this Period

25314.73

Transaction ID : B77A869FEAC994451BE0

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. J. RUSSELL & ASSOC., LLC, D/B/A WAR ROOM STRATEGIESMailing Address 3651 MARS HILL RD
STE 1200

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2023			

City
WATKINSVILLEState
GAZip Code
30677-5985

FEC Identification Number

C

Purpose of Disbursement
STRATEGY CONSULTING

001

Amount of Each Disbursement this Period

7965.85

Transaction ID : BB56564F0474243F2AB5

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

33530.58

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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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

CLYDE FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

A. J. RUSSELL & ASSOC., LLC, D/B/A WAR ROOM STRATEGIESMailing Address 3651 MARS HILL RD
STE 1200City
WATKINSVILLEState
GAZip Code
30677-5985Purpose of Disbursement
STRATEGY 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
1	1		2	9		2	0	2	3

FEC Identification Number

C

Amount of Each Disbursement this Period

11477.41

Transaction ID : B1DC5350699BE4037A30

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. J. RUSSELL & ASSOC., LLC, D/B/A WAR ROOM STRATEGIESMailing Address 3651 MARS HILL RD
STE 1200City
WATKINSVILLEState
GAZip Code
30677-5985Purpose of Disbursement
STRATEGY 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
1	1		2	9		2	0	2	3

FEC Identification Number

C

Amount of Each Disbursement this Period

11342.17

Transaction ID : B17546CE36EDF483ABB7

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. 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
1	0		0	4		2	0	2	3

FEC Identification Number

C

Amount of Each Disbursement this Period

8153.76

Transaction ID : B3F46A651D23A430C9BF

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

30973.34

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☒ 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

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		29		2023

City
ATHENSState
GAZip Code
30605-1332

FEC Identification Number

C

Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

4062.52

Transaction ID : BD31F5C40FF8140CDAAC

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. ROBERTS, LINDSAY, MARIE, ,Mailing Address 235 PHARR RD NE
APT 2519

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2023

City
ATLANTAState
GAZip Code
30305-2518

FEC Identification Number

C

Purpose of Disbursement
FIELD WORK

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1291.11

Transaction ID : BA0E76D60F0AB4E35812

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

5353.63

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

83411.62

SCHEDULE C (FEC Form 3)
LOANS

PAGE 25 OF 37

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 : CE6F20517707B4749B2D

CLYDE FOR CONGRESS INC

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

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼

CLYDE, ANDREW, , ,

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 M / D D / Y Y Y Y
04 / 22 / 2020

M M / D D / Y Y Y Y

M M / D D / Y Y Y 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).....▶

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)
LOANS

PAGE 26 OF 37

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 : C863C2DF5924D4CD69BE

CLYDE FOR CONGRESS INC

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

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼

CLYDE, ANDREW, , ,

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 M / D D / Y Y Y Y
04 06 / 2020

M M / D D / Y Y Y Y

M M / D D / Y Y Y 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).....▶

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)
LOANS

PAGE 27 OF 37

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 : C5DB7069EC0354694A86

CLYDE FOR CONGRESS INC

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

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼

CLYDE, ANDREW, , ,

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

0.00

Balance Outstanding at Close of This Period

80000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
11 / 25 / 2020M M / D D / Y Y Y Y
/ / NONEM M / D D / Y Y Y Y
/ / NONEM M / D D / Y Y Y 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).....▶

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)
LOANS

PAGE 28 OF 37

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 : 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 M / D D / Y Y Y Y
08 / 27 / 2020M M / D D / Y Y Y Y
/ / NONEM M / D D / Y Y Y Y
/ / NONEM M / D D / Y Y Y 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).....▶

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 29 OF 37

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

☒ Primary☐ General☐ Other (specify) ▼

CLYDE, ANDREW, , ,

Mailing Address

PO BOX 888

City

JEFFERSON

State

GA

ZIP Code

30549-0888

☒ Personal Funds of the Candidate

Original Amount of Loan

60000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

60000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

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

M M / D D / Y Y Y Y

M M / D D / Y Y Y 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).....▶

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 30 OF 37

FOR 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

JEFFERSON

State

GA

ZIP Code

30549-0888

☒ Personal Funds of the Candidate

Original Amount of Loan

120000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

120000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
08 13 / 2020

M M / D D / Y Y Y Y

M M / D D / Y Y Y 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).....▶

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 31 OF 37

FOR 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

Election: 2020

☐ Primary☐ General☒ Other (specify) ▼

PRIMARY RUNOFF

Mailing 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 M / D D / Y Y Y Y
06 / 30 / 2020M M / D D / Y Y Y Y
/ / NONEM M / D D / Y Y Y Y
/ / NONEM M / D D / Y Y Y 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).....▶

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)
LOANS

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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 : C76E8215606E84791BAD

CLYDE FOR CONGRESS INC

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

CLYDE, ANDREW, , ,

Election: 2020

☐ Primary☐ General☒ Other (specify) ▼

PRIMARY RUNOFF

Mailing 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 M / D D / Y Y Y Y
07 / 28 / 2020M M / D D / Y Y Y Y
/ / NONEM M / D D / Y Y Y Y
/ / NONEM M / D D / Y Y Y 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).....▶

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)
LOANS

PAGE 33 OF 37

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 : C9CE5C4A9B7D944C1B26

CLYDE FOR CONGRESS INC

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

Election: 2022

☐ Primary☒ General☐ Other (specify) ▼

CLYDE, ANDREW, , ,

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 M / D D / Y Y Y Y
09 19 / 2022

M M / D D / Y Y Y Y

M M / D D / Y Y Y 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).....▶

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 34 OF 37

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 : C34182F13FF5947F3819

CLYDE FOR CONGRESS INC

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

Election: 2020

☐ Primary☐ General☒ Other (specify) ▼

PRIMARY RUNOFF

Mailing 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 M / D D / Y Y Y Y
06 18 / 2020

M M / D D / Y Y Y Y

M M / D D / Y Y Y 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 35 OF 37

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 : C99A4F6D03EF2418F9F0

CLYDE FOR CONGRESS INC

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

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼

CLYDE, ANDREW, , ,

Mailing Address

PO BOX 888

City

JEFFERSON

State

GA

ZIP Code

30549-0888

☒ Personal Funds of the Candidate

Original Amount of Loan

135000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

135000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 / 07 / 2020

M M / D D / Y Y Y Y

M M / D D / Y Y Y 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).....▶

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)
LOANS

PAGE 36 OF 37

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 : CE5F45089576A46F7A7C

CLYDE FOR CONGRESS INC

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

CLYDE, ANDREW, , ,

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 M / D D / Y Y Y Y
03 20 / 2023

M M / D D / Y Y Y Y

D D / Y Y Y 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).....▶

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

PAGE 37 OF 37

FOR 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

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼

CLYDE, ANDREW, , ,

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 M / D D / Y Y Y Y
03 03 / 2020

M M / D D / Y Y Y Y

M M / D D / Y Y Y 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).....▶

28972.28

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.