

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
Rob Wittman for Congress

ADDRESS (number and street) PO Box 427
Check if different than previously reported. (ACC) Alexandria VA 22313

2. FEC IDENTIFICATION NUMBER C C00441014
3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE VA DISTRICT 01

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
[X] 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 MM/DD/YYYY in the State of
(c) 30-Day POST-Election Report for the:
[ ] General (30G) [ ] Runoff (30R) [ ] Special (30S)
Election on MM/DD/YYYY in the State of

5. Covering Period MM/DD/YYYY through MM/DD/YYYY
01/01/2021 through 03/31/2021

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

Type or Print Name of Treasurer

Signature of Treasurer Marston, Chris, , , [Electronically Filed] Date MM/DD/YYYY 04/15/2021

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

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**Rob Wittman for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	42849.45	55803.64
(b) Total Contribution Refunds (from Line 20(d)) .....	88.20	6246.09
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	42761.25	49557.55
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	87564.61	185085.87
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1655.60
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	87564.61	183430.27
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	146778.06	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**Rob Wittman for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	24910.00	26185.00
(ii) Unitemized.....	8939.45	15618.64
(iii) TOTAL of contributions from individuals ▶	33849.45	41803.64
(b) Political Party Committees.....	0.00	1500.00
(c) Other Political Committees (such as PACs).....	9000.00	12500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	42849.45	55803.64
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	5000.00	5000.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	1655.60
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	47849.45	62459.24

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	87564.61	185085.87
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 .....	88.20	6246.09
(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)).....	88.20	6246.09
21. OTHER DISBURSEMENTS .....	750.00	1330.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	88402.81	192661.96

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	187331.42
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	47849.45
25. SUBTOTAL (add Line 23 and Line 24).....	235180.87
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	88402.81
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	146778.06

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

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

FOR LINE NUMBER: PAGE 5 OF 46  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CECCHI, GIUSEPPE, , ,**

Mailing Address 1209 ALDEBARAN DRIVE

City: MCLEAN State: VA Zip Code: 22101-2304

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

Name of Employer: IDI GROUP COMPANIES Occupation: REAL ESTATE DEVELOPER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2900.00

Date of Receipt: 03 / 31 / 2021

Transaction ID : SA11A.35513

Amount of Each Receipt this Period: 5800.00

Memo Item CONTRIBUTION  
SEE REATTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CECCHI, GIUSEPPE, , ,**

Mailing Address 1209 ALDEBARAN DRIVE

City: MCLEAN State: VA Zip Code: 22101-2304

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

Name of Employer: IDI GROUP COMPANIES Occupation: REAL ESTATE DEVELOPER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2900.00

Date of Receipt: 03 / 31 / 2021

Transaction ID : SA11A.35515

Amount of Each Receipt this Period: - 2900.00

Memo Item CONTRIBUTION  
REATTRIBUTION TO SPOUSE; REATTRIBUTION / REDESIGNATION REQUESTED

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

Mailing Address 1209 ALDEBARAN DRIVE

City: MCLEAN State: VA Zip Code: 22101-2304

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

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2900.00

Date of Receipt: 03 / 31 / 2021

Transaction ID : SA11A.35514

Amount of Each Receipt this Period: 2900.00

Memo Item CONTRIBUTION  
REATTRIBUTION FROM SPOUSE; REATTRIBUTION / REDESIGNATION REQUESTED

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 6 OF 46  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GOOD, JOHN, P., , JR.**

Mailing Address P.O. BOX2566

City WINCHESTER State VA Zip Code 22604-1766

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

Name of Employer SHOCKEY MANAGEMENT COMPANY Occupation TREASURER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2021

Transaction ID : SA11A.35512

Amount of Each Receipt this Period  
5800.00

Memo Item  
CONTRIBUTION  
SEE REDESIGNATION

**B.** Full Name (Last, First, Middle Initial)  
**GOOD, JOHN, P., , JR.**

Mailing Address P.O. BOX2566

City WINCHESTER State VA Zip Code 22604-1766

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

Name of Employer SHOCKEY MANAGEMENT COMPANY Occupation TREASURER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2021

Transaction ID : SA11A.35516

Amount of Each Receipt this Period  
- 2900.00

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**GOOD, JOHN, P., , JR.**

Mailing Address P.O. BOX2566

City WINCHESTER State VA Zip Code 22604-1766

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

Name of Employer SHOCKEY MANAGEMENT COMPANY Occupation TREASURER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2021

Transaction ID : SA11A.35517

Amount of Each Receipt this Period  
2900.00

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

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

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

5800.00

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

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

FOR LINE NUMBER: PAGE 7 OF 46  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
26261.64

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 03 / 2021

**Transaction ID : SA11C.35249**

Amount of Each Receipt this Period  
5956.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B.** Full Name (Last, First, Middle Initial)  
**DAVIDSON, JOHN, , DR.,**

Mailing Address 10016 SYCAMORE LANDING ROAD

City WILLIAMSBURG State VA Zip Code 23188-1254

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 03 / 2021

**Transaction ID : SA11A.35265**

Amount of Each Receipt this Period  
2900.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

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

Mailing Address 489 N OAKLAND LANE

City WALKERTON State VA Zip Code 23177-2027

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

Name of Employer Occupation  
3 RIVERS SERVICES LLC OWNER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
366.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 03 / 2021

**Transaction ID : SA11A.35273**

Amount of Each Receipt this Period  
366.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3266.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 46  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**KARCH, KARL, , ,**

Mailing Address 3101 ENGLISH TURN CT

City: FREDERICKSBURG State: VA Zip Code: 22408-8050

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

Name of Employer: RK CAREGIVERS, INC Occupation: OWNER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 244.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 03 / 2021

Transaction ID : SA11A.35256

Amount of Each Receipt this Period  
 \_\_\_\_\_ 244.00

Memo Item  
 CONTRIBUTION  
 EARMARKED FROM WINRED

**B.** Full Name (Last, First, Middle Initial)  
**TAYLOR, THOMAS, M., ,**

Mailing Address 1225 HARRIS RD

City: VIRGINIA BEACH State: VA Zip Code: 23452-6205

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

Name of Employer: BMF Occupation: MANAGER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 03 / 2021

Transaction ID : SA11A.35276

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item  
 CONTRIBUTION  
 EARMARKED FROM WINRED

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

Mailing Address PO BOX 9891

City: ARLINGTON State: VA Zip Code: 22219-1891

FEC ID number of contributing federal political committee: **C** C00694323

Name of Employer: Occupation:

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 26261.64

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 13 / 2021

Transaction ID : SA11C.35313

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item  
 CONTRIBUTION  
 SEE ATTRIBUTION BELOW FOR ALL DONORS  
 ABOVE ITEMIZATION THRESHOLD

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

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

\_\_\_\_\_ 494.00

\_\_\_\_\_



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 46  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ADAMS, JAMES, , ,**

Mailing Address 402 SAINT CHARLES CT

City SOUTHLAKE State TX Zip Code 76092-8570

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

Name of Employer AROA BIO Occupation DO GOODER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 13 / 2021

**Transaction ID : SA11A.35314**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
26261.64

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2021

**Transaction ID : SA11C.35339**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION  
SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**C.** Full Name (Last, First, Middle Initial)  
**LOMBARD, JOSEPH, A., DR., JR.**

Mailing Address P.O. BOX 112

City GLOUCESTER POINT State VA Zip Code 23062-0112

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

Name of Employer Occupation  
SELF DENTIST

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2021

**Transaction ID : SA11A.35340**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00

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

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 10 OF 46  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
26261.64

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2021

**Transaction ID : SA11C.35389**

Amount of Each Receipt this Period  
700.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B.** Full Name (Last, First, Middle Initial)  
**CRUZ, ERIC, , ,**

Mailing Address 4600 WINDY LANE

City BARHAMSVILLE State VA Zip Code 23011-2119

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

Name of Employer Occupation  
CRUZ ASSOCIATES, INC. EXECUTIVE

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2021

**Transaction ID : SA11A.35396**

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
26261.64

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2021

**Transaction ID : SA11C.35404**

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00

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

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 11 OF 46  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GREEN, KAYLENE, H., ,**

Mailing Address P.O. BOX 410

City REEDVILLE State VA Zip Code 22539-0410

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

Name of Employer FLAGSHIP GOVERNMENT RELATIONS, INC. Occupation CONSULTANT

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 25 2021

Transaction ID : SA11A.35405

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
26261.64

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 29 2021

Transaction ID : SA11C.35416

Amount of Each Receipt this Period  
613.45

Memo Item  
CONTRIBUTION  
SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

Mailing Address 8235 TAUNTON PLACE

City WEST SPRINGFIELD State VA Zip Code 22152-2428

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

Name of Employer Occupation  
TEXTRON GOVERNMENT RELATIONS

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 29 2021

Transaction ID : SA11A.35419

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION  
EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶ 1000.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 46  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WINRED**  
 Mailing Address PO BOX 9891  
 City ARLINGTON State VA Zip Code 22219-1891  
 FEC ID number of contributing federal political committee. **C** C00694323  
 Name of Employer Occupation  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 26261.64

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2021  
**Transaction ID : SA11C.35430**  
 Amount of Each Receipt this Period  
 5513.00  
 Memo Item CONTRIBUTION  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B.** Full Name (Last, First, Middle Initial)  
**JOHNSON, ROBERT, , ,**  
 Mailing Address 1176 ORLO DRIVE  
 City MCLEAN State VA Zip Code 22102-1706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2021  
**Transaction ID : SA11A.35450**  
 Amount of Each Receipt this Period  
 2900.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
**WINRED**  
 Mailing Address PO BOX 9891  
 City ARLINGTON State VA Zip Code 22219-1891  
 FEC ID number of contributing federal political committee. **C** C00694323  
 Name of Employer Occupation  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 26261.64

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2021  
**Transaction ID : SA11C.35466**  
 Amount of Each Receipt this Period  
 5010.00  
 Memo Item CONTRIBUTION  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2900.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 13 OF 46  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CONNER, DARRELL, L., ,**  
 Mailing Address 3105 WYNFORD DR.  
 City FAIRFAX State VA Zip Code 22031-2825  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer K & L GATES Occupation GOVERNMENT AFFAIRS COUNSELOR  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2021  
**Transaction ID : SA11A.35470**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 CONTRIBUTION  
 EARMARKED FROM WINRED

**B.** Full Name (Last, First, Middle Initial)  
**DAVIDSON, JOHN, , DR.,**  
 Mailing Address 10016 SYCAMORE LANDING ROAD  
 City WILLIAMSBURG State VA Zip Code 23188-1254  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 3900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2021  
**Transaction ID : SA11A.35467**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION  
 EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
**KITONIS, WALT, P., , III**  
 Mailing Address 12900 OLD CHURCH ROAD  
 City NOKESVILLE State VA Zip Code 20181-1614  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PROGENY SYSTEM Occupation ENGINEER  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2021  
**Transaction ID : SA11A.35469**  
 Amount of Each Receipt this Period  
 2900.00  
 Memo Item  
 CONTRIBUTION  
 EARMARKED FROM WINRED

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

4400.00  
 24910.00

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

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

FOR LINE NUMBER: PAGE 14 OF 46  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BILL FLORES FOR CONGRESS**

Mailing Address P.O. BOX 6207

City: BRYAN State: TX Zip Code: 77805-6207

FEC ID number of contributing federal political committee: **C** C00472241

Name of Employer: Occupation:

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt: 03 / 30 / 2021

Transaction ID : SA11C.35443

Amount of Each Receipt this Period: 1000.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

**B.** Full Name (Last, First, Middle Initial)  
**SCALISE FOR CONGRESS**

Mailing Address PO BOX 23219

City: NEW ORLEANS State: LA Zip Code: 70183-0219

FEC ID number of contributing federal political committee: **C** C00394957

Name of Employer: Occupation:

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt: 03 / 25 / 2021

Transaction ID : SA11C.35402

Amount of Each Receipt this Period: 2000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**OCEAN SHIPHOLDINGS INC POLITICAL ACTION COMMITTEE**

Mailing Address 16211 PARK TEN PLACE

City: HOUSTON State: TX Zip Code: 77084-7016

FEC ID number of contributing federal political committee: **C** C00335414

Name of Employer: Occupation:

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt: 01 / 29 / 2021

Transaction ID : SA11C.35248

Amount of Each Receipt this Period: 1000.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 4000.00

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

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

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

FOR LINE NUMBER: PAGE 15 OF 46  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**THE EYE OF THE TIGER POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00467431

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2021

Transaction ID : SA11C.35403

Amount of Each Receipt this Period  
5000.00

Memo Item CONTRIBUTION

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	5000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	9000.00

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

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

FOR LINE NUMBER: PAGE 16 OF 46  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WITTMAN VICTORY COMMITTEE**

Mailing Address P.O. BOX 26141

City: ALEXANDRIA   State: VA   Zip Code: 22313-6141

FEC ID number of contributing federal political committee: **C** C00678854

Name of Employer:   Occupation:

Receipt For: 2020  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
53795.65

Date of Receipt: 03 / 09 / 2021

Transaction ID : SA12.35343

Amount of Each Receipt this Period: 5000.00

Memo Item  
TRANSFER

**B.** Full Name (Last, First, Middle Initial)  
**ABBOTT, LYNN, , ,**

Mailing Address 10 HAVENWOODS WAY

City: FREDERICKSBURG   State: VA   Zip Code: 22406-5146

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

Name of Employer: SELF   Occupation: FINE ARTIST

Receipt For: 2020  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
600.00

Date of Receipt: 10 / 26 / 2020

Transaction ID : SA.31232.2.0005

Amount of Each Receipt this Period: 200.00

Memo Item  
TRANSFER  
TRANSFER FROM WITTMAN VICTORY COMMITTEE

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

Mailing Address 512 LONE MOUNTAIN RD

City: TAZEWELL   State: TN   Zip Code: 37879-6044

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

Name of Employer: ASPETTO INC   Occupation: VP BUSINESS DEVELOPMENT

Receipt For: 2020  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt: 10 / 23 / 2020

Transaction ID : SA.31054.2.0005

Amount of Each Receipt this Period: 1000.00

Memo Item  
TRANSFER  
TRANSFER FROM WITTMAN VICTORY COMMITTEE

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

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

5000.00



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

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

FOR LINE NUMBER: PAGE 17 OF 46  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HAIDER, ABBAS, , ,**

Mailing Address 45792 SMOKETREE TERRACE

City STERLING State VA Zip Code 20166-7207

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

Name of Employer ASPETTO, INC Occupation EXECUTIVE

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2020

Transaction ID : SA.31053.2.0005

Amount of Each Receipt this Period  
 2800.00

Memo Item  
 TRANSFER  
 TRANSFER FROM WITTMAN VICTORY COMMITTEE

**B.** Full Name (Last, First, Middle Initial)  
**LEVIN, JEROME, L., ,**

Mailing Address 3716 CYPRESS CLUB DRIVE

City CHARLOTTE State NC Zip Code 28210-2482

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 01 / 2020

Transaction ID : SA.30298.2.0005

Amount of Each Receipt this Period  
 500.00

Memo Item  
 TRANSFER  
 TRANSFER FROM WITTMAN VICTORY COMMITTEE

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

Mailing Address 1909 SUMMIT VIEW PLACE

City WAXHAW State NC Zip Code 28173-7329

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 05 / 2020

Transaction ID : SA.30350.2.0005

Amount of Each Receipt this Period  
 500.00

Memo Item  
 TRANSFER  
 TRANSFER FROM WITTMAN VICTORY COMMITTEE

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

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

0.00

5000.00

**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 18 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial) <b>A. WITTMAN, ROBERT, J, MR.,</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2021
Mailing Address P O BOX 6		FEC Identification Number C H8VA01147
City MONTROSS	State VA	Zip Code 22520
Purpose of Disbursement MILEAGE REIMBURSEMENT	Category/ Type	
Candidate Name WITTMAN, ROBERT, J, MR.,	Amount of Each Disbursement this Period 915.01	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA District: 01	Transaction ID : SB17.I1696 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CANADA, SANDRA, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2021
Mailing Address P.O. BOX 1715		FEC Identification Number C
City VIRGINIA BEACH	State VA	Zip Code 23451
Purpose of Disbursement FUNDRAISING CONSULTING	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 1000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.I1695 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CANADA, SANDRA, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2021
Mailing Address P.O. BOX 1715		FEC Identification Number C
City VIRGINIA BEACH	State VA	Zip Code 23451
Purpose of Disbursement FUNDRAISING CONSULTING	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 1000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.I1764 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2915.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial) <b>A. CANADA, SANDRA, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2021	
Mailing Address P.O. BOX 1715			FEC Identification Number C	
City VIRGINIA BEACH	State VA	Zip Code 23451	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type	Transaction ID : SB17.I1789	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. HEATH, CHRISTIE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2021	
Mailing Address 6321 PINE SLASH ROAD			FEC Identification Number C	
City MECHANICSVILLE	State VA	Zip Code 23116	Amount of Each Disbursement this Period 4910.75	
Purpose of Disbursement NET SALARY		Category/ Type	Transaction ID : SB17.I1698	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. HEATH, CHRISTIE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2021	
Mailing Address 6321 PINE SLASH ROAD			FEC Identification Number C	
City MECHANICSVILLE	State VA	Zip Code 23116	Amount of Each Disbursement this Period 4910.75	
Purpose of Disbursement NET SALARY		Category/ Type	Transaction ID : SB17.I1754	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10821.50
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 46			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial) <b>A. HEATH, CHRISTIE, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2021
Mailing Address 6321 PINE SLASH ROAD		FEC Identification Number C
City MECHANICSVILLE	State VA	Zip Code 23116
Purpose of Disbursement NET SALARY		Amount of Each Disbursement this Period 4910.75
Candidate Name		Transaction ID : SB17.I1787
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. KING, CAROLYN, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2021
Mailing Address 8607 ROCKDALE LANE		FEC Identification Number C
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement NET SALARY		Amount of Each Disbursement this Period 640.45
Candidate Name		Transaction ID : SB17.I1697
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. KING, CAROLYN, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2021
Mailing Address 8607 ROCKDALE LANE		FEC Identification Number C
City SPRINGFIELD	State VA	Zip Code 22153
Purpose of Disbursement NET SALARY		Amount of Each Disbursement this Period 640.45
Candidate Name		Transaction ID : SB17.I1753
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6191.65
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial) <b>A. KING, CAROLYN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2021	
Mailing Address 8607 ROCKDALE LANE			FEC Identification Number C	
City SPRINGFIELD	State VA	Zip Code 22153	Amount of Each Disbursement this Period 640.45	
Purpose of Disbursement NET SALARY		Category/ Type	Transaction ID : SB17.11786	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. PITTMAN, NATHANIEL, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2021	
Mailing Address PO BOX 901			FEC Identification Number C	
City SPOTSYLVANIA	State VA	Zip Code 22553	Amount of Each Disbursement this Period 4500.00	
Purpose of Disbursement NET SALARY		Category/ Type	Transaction ID : SB17.11699	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. PITTMAN, NATHANIEL, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2021	
Mailing Address PO BOX 901			FEC Identification Number C	
City SPOTSYLVANIA	State VA	Zip Code 22553	Amount of Each Disbursement this Period 260.02	
Purpose of Disbursement REIMBURSEMENT (SEE BELOW)		Category/ Type	Transaction ID : SB17.11724	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5400.47
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial) <b>A. TRACTOR SUPPLY CO.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2020	
Mailing Address 11481 KINGS HWY.			FEC Identification Number C	
City KING GEORGE	State VA	Zip Code 22485	Amount of Each Disbursement this Period 132.30	
Purpose of Disbursement CAMPAIGN SUPPLIES		Category/ Type	Transaction ID : SB17.11736	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. PITTMAN, NATHANIEL, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2021	
Mailing Address PO BOX 901			FEC Identification Number C	
City SPOTSYLVANIA	State VA	Zip Code 22553	Amount of Each Disbursement this Period 4500.00	
Purpose of Disbursement NET SALARY		Category/ Type	Transaction ID : SB17.11762	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. PITTMAN, NATHANIEL, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2021	
Mailing Address PO BOX 901			FEC Identification Number C	
City SPOTSYLVANIA	State VA	Zip Code 22553	Amount of Each Disbursement this Period 4500.00	
Purpose of Disbursement NET SALARY		Category/ Type	Transaction ID : SB17.11788	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial) <b>A. ALICE V PAYNE ACCT. &amp; TAX SERVICE</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2021
Mailing Address P.O. BOX 757		FEC Identification Number C
City MONTROSS	State VA	Zip Code 22520
Purpose of Disbursement ACCOUNTING SERVICES		Amount of Each Disbursement this Period 403.00
Candidate Name		Transaction ID : SB17.I1713
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BAY ARMOURY LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2021
Mailing Address 107 SOUTH WEST STREET STE 439		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement FUNDRAISING CONSULTING		Amount of Each Disbursement this Period 3000.00
Candidate Name		Transaction ID : SB17.I1692
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BAY ARMOURY LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2021
Mailing Address 107 SOUTH WEST STREET STE 439		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement FUNDRAISING CONSULTING		Amount of Each Disbursement this Period 3000.00
Candidate Name		Transaction ID : SB17.I1714
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6403.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 46			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial) <b>A. BAY ARMOURY LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2021		
Mailing Address 107 SOUTH WEST STREET STE 439			FEC Identification Number C		
City ALEXANDRIA	State VA	Zip Code 22314	Amount of Each Disbursement this Period 3000.00		
Purpose of Disbursement RETAINER		Category/ Type	Transaction ID : SB17.I1746		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2021		
Mailing Address 300 FIRST STREET SOUTHEAST			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 59.61		
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type	Transaction ID : SB17.I1691		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2021		
Mailing Address 300 FIRST STREET SOUTHEAST			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 83.73		
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type	Transaction ID : SB17.I1743		
Candidate Name		<input checked="" type="checkbox"/> Memo Item VCB 03-25			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3059.61
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2021
Mailing Address 300 FIRST STREET SOUTHEAST		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FOOD/BEVERAGE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 525.23	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I1752
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CARVER PARTNERS</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2021
Mailing Address P.O. BOX 453		FEC Identification Number C
City MONTROSS	State VA	Zip Code 22520
Purpose of Disbursement RENT	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 650.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I1715
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CARVER PARTNERS</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2021
Mailing Address P.O. BOX 453		FEC Identification Number C
City MONTROSS	State VA	Zip Code 22520
Purpose of Disbursement RENT	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 650.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I1716
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1825.23
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial) <b>A. CARVER PARTNERS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2021
Mailing Address P.O. BOX 453		FEC Identification Number C
City MONTROSS	State VA	Zip Code 22520
Purpose of Disbursement RENT		Amount of Each Disbursement this Period 650.00
Candidate Name		Transaction ID : SB17.I1751
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2021
Mailing Address 1593 SPRING HILL ROAD STE 400		FEC Identification Number C
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement DATABASE SERVICES		Amount of Each Disbursement this Period 580.35
Candidate Name		Transaction ID : SB17.I1688
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2021
Mailing Address 1593 SPRING HILL ROAD STE 400		FEC Identification Number C
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement DATABASE SERVICES		Amount of Each Disbursement this Period 600.00
Candidate Name		Transaction ID : SB17.I1755
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1830.35
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 46			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial) <b>A. DOMINION VIRGINIA POWER</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2021
Mailing Address P.O. BOX 26543		FEC Identification Number C
City RICHMOND	State VA	Zip Code 23290
Purpose of Disbursement UTILITIES		Amount of Each Disbursement this Period 22.72
Candidate Name	Category/ Type	Transaction ID : SB17.I1709
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DOMINION VIRGINIA POWER</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2021
Mailing Address P.O. BOX 26543		FEC Identification Number C
City RICHMOND	State VA	Zip Code 23290
Purpose of Disbursement UTILITIES		Amount of Each Disbursement this Period 21.36
Candidate Name	Category/ Type	Transaction ID : SB17.I1717
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DOMINION VIRGINIA POWER</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2021
Mailing Address P.O. BOX 26543		FEC Identification Number C
City RICHMOND	State VA	Zip Code 23290
Purpose of Disbursement UTILITIES		Amount of Each Disbursement this Period 21.79
Candidate Name	Category/ Type	Transaction ID : SB17.I1757
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	65.87
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 46			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial) <b>A. DUNYA COMMUNICATIONS INC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2021
Mailing Address 1114 LAKE HERON DR., STE. 2C		FEC Identification Number C
City ANNAPOLIS	State MD	Zip Code 21403
Purpose of Disbursement PRINT ADVERTISING		Amount of Each Disbursement this Period 1500.00
Candidate Name		Transaction ID : SB17.I1703
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ELECTION CFO</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2021
Mailing Address P.O. BOX 26141		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22313
Purpose of Disbursement COMPLIANCE CONSULTING		Amount of Each Disbursement this Period 1555.08
Candidate Name		Transaction ID : SB17.I1686
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ELECTION CFO</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2021
Mailing Address P.O. BOX 26141		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22313
Purpose of Disbursement COMPLIANCE CONSULTING		Amount of Each Disbursement this Period 1532.50
Candidate Name		Transaction ID : SB17.I1718
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4587.58
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial) <b>A. GOOGLE</b>		Date of Disbursement
Mailing Address 1600 AMPHITHEATRE PARKWAY		M M / D D / Y Y Y Y 01 / 04 / 2021
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement ONLINE SERVICES	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	33.66
State: District:	Transaction ID : SB17.I1700	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. GOOGLE</b>		Date of Disbursement
Mailing Address 1600 AMPHITHEATRE PARKWAY		M M / D D / Y Y Y Y 02 / 02 / 2021
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement ONLINE SERVICES	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	24.00
State: District:	Transaction ID : SB17.I1719	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. GOOGLE</b>		Date of Disbursement
Mailing Address 1600 AMPHITHEATRE PARKWAY		M M / D D / Y Y Y Y 03 / 02 / 2021
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement ONLINE SERVICES	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	24.00
State: District:	Transaction ID : SB17.I1758	
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	81.66
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial) <b>A. I360, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2021	
Mailing Address 29374 NETWORK PLACE			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60673	Amount of Each Disbursement this Period 170.00	
Purpose of Disbursement VOTER DATABASE		Category/ Type	Transaction ID : SB17.I1721	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. I360, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2021	
Mailing Address 29374 NETWORK PLACE			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60673	Amount of Each Disbursement this Period 170.00	
Purpose of Disbursement VOTER DATABASE		Category/ Type	Transaction ID : SB17.I1747	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. INTERNAL REVENUE SERVICE</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2021	
Mailing Address			FEC Identification Number C	
City OGDEN	State UT	Zip Code 84201	Amount of Each Disbursement this Period 3324.00	
Purpose of Disbursement TAXES		Category/ Type	Transaction ID : SB17.I1706	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3664.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 46			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial)  
**A. INTERNAL REVENUE SERVICE**

Mailing Address \_\_\_\_\_

City: OGDEN State: UT Zip Code: 84201

Purpose of Disbursement: TAXES

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: 02 / 03 / 2021

FEC Identification Number: C

Amount of Each Disbursement this Period: 1871.60

Transaction ID : SB17.I1722

Memo Item

Full Name (Last, First, Middle Initial)  
**B. INTERNAL REVENUE SERVICE**

Mailing Address \_\_\_\_\_

City: OGDEN State: UT Zip Code: 84201

Purpose of Disbursement: TAXES

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: 03 / 03 / 2021

FEC Identification Number: C

Amount of Each Disbursement this Period: 1871.60

Transaction ID : SB17.I1759

Memo Item

Full Name (Last, First, Middle Initial)  
**C. POINT1**

Mailing Address 141 OYSTER POINT ROW

City: CHARLESTON State: SC Zip Code: 29412

Purpose of Disbursement: DIGITAL CONSULTING

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: 01 / 20 / 2021

FEC Identification Number: C

Amount of Each Disbursement this Period: 3000.00

Transaction ID : SB17.I1689

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 6743.20

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 46			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial) <b>A. POINT1</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2021
Mailing Address 141 OYSTER POINT ROW		FEC Identification Number C
City CHARLESTON	State SC	Zip Code 29412
Purpose of Disbursement DIGITAL CONSULTING		Amount of Each Disbursement this Period 3000.00
Candidate Name		Transaction ID : SB17.I1725
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. POINT1</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2021
Mailing Address 141 OYSTER POINT ROW		FEC Identification Number C
City CHARLESTON	State SC	Zip Code 29412
Purpose of Disbursement DIGITAL CONSULTING		Amount of Each Disbursement this Period 3000.00
Candidate Name		Transaction ID : SB17.I1748
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. REPUBLIC STRATEGIES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2021
Mailing Address 216 WOODLAND TERRACE		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22302
Purpose of Disbursement FUNDRAISING CONSULTING		Amount of Each Disbursement this Period 7170.00
Candidate Name		Transaction ID : SB17.I1693
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	13170.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 46			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial) <b>A. REPUBLIC STRATEGIES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2021		
Mailing Address 216 WOODLAND TERRACE			FEC Identification Number <b>C</b>		
City ALEXANDRIA	State VA	Zip Code 22302			
Purpose of Disbursement FUNDRAISING CONSULTING			Transaction ID : <b>SB17.I1694</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>B. REPUBLIC STRATEGIES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2021		
Mailing Address 216 WOODLAND TERRACE			FEC Identification Number <b>C</b>		
City ALEXANDRIA	State VA	Zip Code 22302			
Purpose of Disbursement FUNDRAISING CONSULTING			Transaction ID : <b>SB17.I1726</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>C. REPUBLIC STRATEGIES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2021		
Mailing Address 216 WOODLAND TERRACE			FEC Identification Number <b>C</b>		
City ALEXANDRIA	State VA	Zip Code 22302			
Purpose of Disbursement FUNDRAISING CONSULTING & COMMISSION			Transaction ID : <b>SB17.I1749</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 46			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement
Mailing Address 10449 WHITE GRANITE DRIVE		M M / D D / Y Y Y Y 02 / 15 / 2021
City OAKTON	State VA	Zip Code 22124
Purpose of Disbursement P.O. BOX RENEWAL		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For:	388.00
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I1729
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. VA DEPARTMENT OF TAXATION</b>		Date of Disbursement
Mailing Address 1957 WESTMORELAND STREET		M M / D D / Y Y Y Y 01 / 06 / 2021
City RICHMOND	State VA	Zip Code 23230
Purpose of Disbursement TAXES		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For:	591.00
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I1707
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. VA DEPARTMENT OF TAXATION</b>		Date of Disbursement
Mailing Address 1957 WESTMORELAND STREET		M M / D D / Y Y Y Y 02 / 03 / 2021
City RICHMOND	State VA	Zip Code 23230
Purpose of Disbursement TAXES		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For:	328.00
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I1730
State: District:		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1307.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial) <b>A. VA DEPARTMENT OF TAXATION</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2021
Mailing Address 1957 WESTMORELAND STREET		FEC Identification Number C
City RICHMOND	State VA	Zip Code 23230
Purpose of Disbursement TAXES		Amount of Each Disbursement this Period 328.00
Candidate Name		Transaction ID : SB17.I1765
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2021
Mailing Address P.O. BOX 25505		FEC Identification Number C
City LEHIGH VALLEY	State PA	Zip Code 18002
Purpose of Disbursement PHONES		Amount of Each Disbursement this Period 351.62
Candidate Name		Transaction ID : SB17.I1702
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2021
Mailing Address P.O. BOX 25505		FEC Identification Number C
City LEHIGH VALLEY	State PA	Zip Code 18002
Purpose of Disbursement PHONES		Amount of Each Disbursement this Period 320.38
Candidate Name		Transaction ID : SB17.I1750
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 46			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

**A. VERIZON WIRELESS**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 25505

City LEHIGH VALLEY State PA Zip Code 18002

Purpose of Disbursement PHONES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 03 / 2021

FEC Identification Number: C

Amount of Each Disbursement this Period: 351.62

Transaction ID : SB17.I1766

Memo Item

**B. VIRGINIA COMMONWEALTH BANK**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 790408

City ST. LOUIS State MO Zip Code 63179

Purpose of Disbursement CREDIT CARD PAYMENT

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 25 / 2021

FEC Identification Number: C

Amount of Each Disbursement this Period: 159.26

Transaction ID : SB17.I1668

Memo Item

**C. US HOUSE GIFT SHOP**

Full Name (Last, First, Middle Initial)  
Mailing Address US CAPITOL VISITOR CENTER

City WASHINGTON State DC Zip Code 20515

Purpose of Disbursement DONOR/VOLUNTEER ACKNOWLEDGEMENTS

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 03 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 95.70

Transaction ID : SB17.I1669

Memo Item VCB 01-25

**SUBTOTAL** of Disbursements This Page (optional).....▶ 510.88

**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 37 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial)  
**A. VIRGINIA COMMONWEALTH BANK**

Mailing Address P.O. BOX 790408

City ST. LOUIS State MO Zip Code 63179

Purpose of Disbursement CREDIT CARD PAYMENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 25 / 2021

FEC Identification Number: C

Amount of Each Disbursement this Period: 315.72

Transaction ID : SB17.I1671

Memo Item

Full Name (Last, First, Middle Initial)  
**B. AMERICAN AIRLINES**

Mailing Address 4255 AMON CARTER BLVD.

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 14 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 211.10

Transaction ID : SB17.I1672

Memo Item VCB 01-25

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

Mailing Address 4255 AMON CARTER BLVD.

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL REFUND

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 15 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: -211.10

Transaction ID : SB17.I1673

Memo Item VCB 01-25

**SUBTOTAL** of Disbursements This Page (optional).....▶ 315.72

**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 38 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2020
Mailing Address 4255 AMON CARTER BLVD.		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL		Amount of Each Disbursement this Period 405.10
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.11674 <input checked="" type="checkbox"/> Memo Item VCB 01-25
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2020
Mailing Address 4255 AMON CARTER BLVD.		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL REFUND		Amount of Each Disbursement this Period - 405.10
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.11675 <input checked="" type="checkbox"/> Memo Item VCB 01-25
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2020
Mailing Address 4255 AMON CARTER BLVD.		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL		Amount of Each Disbursement this Period 30.00
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.11676 <input checked="" type="checkbox"/> Memo Item VCB 01-25
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2020	
Mailing Address 4255 AMON CARTER BLVD.			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 40.00	
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : SB17.11677	
Candidate Name		Memo Item <input checked="" type="checkbox"/> VCB 01-25		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2020	
Mailing Address 300 FIRST STREET SOUTHEAST			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 73.00	
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type	Transaction ID : SB17.11678	
Candidate Name		Memo Item <input checked="" type="checkbox"/> VCB 01-25		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2020	
Mailing Address 300 FIRST STREET SOUTHEAST			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 123.00	
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type	Transaction ID : SB17.11679	
Candidate Name		Memo Item <input checked="" type="checkbox"/> VCB 01-25		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial) <b>A. VIRGINIA COMMONWEALTH BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2021
Mailing Address P.O. BOX 790408		FEC Identification Number C
City ST. LOUIS	State MO	Zip Code 63179
Purpose of Disbursement CREDIT CARD PAYMENT		Amount of Each Disbursement this Period 204.67
Candidate Name		Transaction ID : SB17.I1711
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2021
Mailing Address 300 FIRST STREET SOUTHEAST		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FOOD/BEVERAGE		Amount of Each Disbursement this Period 204.67
Candidate Name		Transaction ID : SB17.I1712
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item VCB 02-25
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VIRGINIA COMMONWEALTH BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2021
Mailing Address P.O. BOX 790408		FEC Identification Number C
City ST. LOUIS	State MO	Zip Code 63179
Purpose of Disbursement CREDIT CARD PAYMENT		Amount of Each Disbursement this Period 35.60
Candidate Name		Transaction ID : SB17.I1740
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	240.27
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial) <b>A. VIRGINIA COMMONWEALTH BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2021	
Mailing Address P.O. BOX 790408			FEC Identification Number C	
City ST. LOUIS	State MO	Zip Code 63179	Amount of Each Disbursement this Period 83.73	
Purpose of Disbursement CREDIT CARD PAYMENT		Category/Type	Transaction ID : SB17.I1742	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2021	
Mailing Address 300 FIRST STREET SOUTHEAST			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 83.73	
Purpose of Disbursement FOOD/BEVERAGE		Category/Type	Transaction ID : SB17.I1744	
Candidate Name		Memo Item <input checked="" type="checkbox"/> VCB 03-25		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. WESTMORELAND COUNTY TREASURER'S OFFICE</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2021	
Mailing Address P.O. BOX 730			FEC Identification Number C	
City MONTROSS	State VA	Zip Code 22520	Amount of Each Disbursement this Period 136.00	
Purpose of Disbursement UTILITIES		Category/Type	Transaction ID : SB17.I1708	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	219.73
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2021
Mailing Address 1776 WILSON BOULEVARD STE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CC PROCESSING		Amount of Each Disbursement this Period 4.45
Candidate Name		Transaction ID : SB17.I1681
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2021
Mailing Address 1776 WILSON BOULEVARD STE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CC PROCESSING		Amount of Each Disbursement this Period 2.20
Candidate Name		Transaction ID : SB17.I1682
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2021
Mailing Address 1776 WILSON BOULEVARD STE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CC PROCESSING		Amount of Each Disbursement this Period 3.75
Candidate Name		Transaction ID : SB17.I1683
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10.40
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 46			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2021
Mailing Address 1776 WILSON BOULEVARD STE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CC PROCESSING		Amount of Each Disbursement this Period 1.25
Candidate Name	Category/Type	Transaction ID : SB17.I1684
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2021
Mailing Address 1776 WILSON BOULEVARD STE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CC PROCESSING		Amount of Each Disbursement this Period 3.75
Candidate Name	Category/Type	Transaction ID : SB17.I1685
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2021
Mailing Address 1776 WILSON BOULEVARD STE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CC PROCESSING		Amount of Each Disbursement this Period 289.70
Candidate Name	Category/Type	Transaction ID : SB17.I1731
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	294.70
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2021
Mailing Address 1776 WILSON BOULEVARD STE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CC PROCESSING	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 46.23	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.I1767	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2021
Mailing Address 1776 WILSON BOULEVARD STE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CC PROCESSING	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1.25	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.I1768	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2021
Mailing Address 1776 WILSON BOULEVARD STE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CC PROCESSING	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 68.47	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.I1769	
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	115.95
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 46			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement
Mailing Address 1776 WILSON BOULEVARD STE 530		M M / D D / Y Y Y Y 03 / 31 / 2021
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CC PROCESSING	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 465.14	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.11770	
		<input type="checkbox"/> Memo Item

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	465.14
<b>TOTAL</b> This Period (last page this line number only).....▶	86988.92

**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 46 OF 46	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rob Wittman for Congress**

Full Name (Last, First, Middle Initial) <b>A. FAMILY FOUNDATION ACTION</b>		Date of Disbursement
Mailing Address 707 E. FRANKLIN ST.		M M / D D / Y Y Y Y 01 / 13 / 2021
City RICHMOND	State VA	Zip Code 23219
Purpose of Disbursement CONTRIBUTION	FEC Identification Number C	
Candidate Name	Amount of Each Disbursement this Period 250.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB21.11687
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. HANOVER COUNTY SHERIFF'S OFFICE FOUNDATION</b>		Date of Disbursement
Mailing Address P.O. BOX 40		M M / D D / Y Y Y Y 02 / 17 / 2021
City HANOVER	State VA	Zip Code 23069
Purpose of Disbursement CONTRIBUTION	FEC Identification Number C	
Candidate Name	Amount of Each Disbursement this Period 500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB21.11720
State: District:	<input type="checkbox"/> Memo Item	

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	750.00