

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
DEVOLDER-SANTOS FOR CONGRESS

ADDRESS (number and street) 47 FLINTLOCK DRIVE
SHIRLEY NY 11967
CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER C C00721365
3. IS THIS REPORT NEW (N) OR AMENDED (A) x
STATE NY DISTRICT 03

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
01/01/2020 through 03/31/2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Marks, Nancy, , ,
Signature of Treasurer Marks, Nancy, , , [Electronically Filed] Date MM/DD/YYYY 01/26/2021

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
DEVOLDER-SANTOS FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	7041.00	9061.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	7041.00	9061.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	31100.30	34122.49
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	31100.30	34122.49
8. Cash on Hand at Close of Reporting Period (from Line 27).....	54988.51	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	80050.00	

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

DEVOLDER-SANTOS FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	6375.00	7525.00
(ii) Unitemized.....	666.00	1536.00
(iii) TOTAL of contributions from individuals ▶	7041.00	9061.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	7041.00	9061.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	74750.00	80050.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	74750.00	80050.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	81791.00	89111.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	31100.30	34122.49
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	31100.30	34122.49

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	4297.81
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	81791.00
25. SUBTOTAL (add Line 23 and Line 24).....	86088.81
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	31100.30
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	54988.51

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 5 OF 20	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEVOLDER-SANTOS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Eisen, Josh, , ,

Mailing Address 182 Union Avenue

City Harrison	State NY	Zip Code 10528
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FEC ID number of contributing federal political committee. **C**

Name of Employer Morningside	Occupation Consultant
---------------------------------	--------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11AI.4183

Amount of Each Receipt this Period
1500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Eisen, Josh, , ,

Mailing Address 182 Union Avenue

City Harrison	State NY	Zip Code 10528
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FEC ID number of contributing federal political committee. **C**

Name of Employer Morningside	Occupation Consultant
---------------------------------	--------------------------

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
03 / 25 / 2020

Transaction ID : SA11AI.4171

Amount of Each Receipt this Period
1300.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Murray, Joseph, , ,

Mailing Address 245-20 Grand Central Parkway, 5M

City Bellerose	State NY	Zip Code 11426
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed	Occupation Attorney
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Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 06 / 2020

Transaction ID : SA11AI.4202

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	3050.00
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 6 OF 20
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DEVOLDER-SANTOS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Neiman, Howard, , ,
 Mailing Address 71-42 171st St
 City Fresh Meadows State NY Zip Code 11365
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2020
Transaction ID : SA11AI.4179
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Sabba, Steve, , ,
 Mailing Address PO Box 1291
 City Yorktown Heights State NY Zip Code 10598
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TaxPro Financial Network Inc. Occupation Tax Professional
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2020
Transaction ID : SA11AI.4168
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Tsanas, John, , ,
 Mailing Address 800 Third Avenue Suite 2800
 City New York State NY Zip Code 10022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Excalibur Global Strategic Con Occupation Attorney
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 05 / 2020
Transaction ID : SA11AI.4163
 Amount of Each Receipt this Period
 600.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1125.00
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 7 OF 20
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DEVOLDER-SANTOS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Tsanas, John, , ,
Mailing Address 800 Third Avenue Suite 2800
City New York State NY Zip Code 10022
FEC ID number of contributing federal political committee. C
Name of Employer Excalibur Global Strategic Con Occupation Attorney
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
01 / 28 / 2020
Transaction ID : SA11AI.4160
Amount of Each Receipt this Period
2200.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. C
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period
 Memo Item

C. Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. C
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2200.00
TOTAL This Period (last page this line number only).....▶	6375.00

**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 20
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DEVOLDER-SANTOS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DEVOLDER-SANTOS, GEORGE ANTHONY, Anthony, ,

Mailing Address 9002 QUEENS BLVD

City ELMHURST	State NY	Zip Code 11373
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C H0NY03083**

Name of Employer Self Employed	Occupation Self Employed
-----------------------------------	-----------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 23850.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2020

Transaction ID : SA13A.4305

Amount of Each Receipt this Period
 18550.00

Memo Item
 Loan

B. Full Name (Last, First, Middle Initial)
DEVOLDER-SANTOS, GEORGE ANTHONY, Anthony, ,

Mailing Address 9002 QUEENS BLVD

City ELMHURST	State NY	Zip Code 11373
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FEC ID number of contributing federal political committee. **C H0NY03083**

Name of Employer Self Employed	Occupation Self Employed
-----------------------------------	-----------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 28050.00

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

Transaction ID : SA13A.4207

Amount of Each Receipt this Period
 4200.00

Memo Item
 Loan

C. Full Name (Last, First, Middle Initial)
DEVOLDER-SANTOS, GEORGE ANTHONY, Anthony, ,

Mailing Address 9002 QUEENS BLVD

City ELMHURST	State NY	Zip Code 11373
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FEC ID number of contributing federal political committee. **C H0NY03083**

Name of Employer Self Employed	Occupation Self Employed
-----------------------------------	-----------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 30050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 10 / 2020

Transaction ID : SA13A.4276

Amount of Each Receipt this Period
 2000.00

Memo Item
 Loan

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

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

24750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 20
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DEVOLDER-SANTOS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DEVOLDER-SANTOS, GEORGE ANTHONY, Anthony, ,

Mailing Address 9002 QUEENS BLVD

City: ELMHURST State: NY Zip Code: 11373

FEC ID number of contributing federal political committee: **C HONY03083**

Name of Employer: Self Employed Occupation: Self Employed

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
80050.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2020

Transaction ID : SA13A.4309

Amount of Each Receipt this Period
50000.00

Memo Item
 Loan

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	50000.00
TOTAL This Period (last page this line number only)..... ▶	74750.00

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 10 OF 20	
	<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)
DEVOLDER-SANTOS FOR CONGRESS

A. American Express

Full Name (Last, First, Middle Initial)
Mailing Address 200 Vesey St

City New York State NY Zip Code 10285

Purpose of Disbursement Expenses Paid Category/Type 011

Candidate Name **DEVOLDER-SANTOS FOR CONGRESS**

Office Sought: House Senate President Disbursement For: 2020 Primary General Other (specify) ▼

State: NY District: 03

Date of Disbursement 01 / 04 / 2020

FEC Identification Number C C00721365

Amount of Each Disbursement this Period 6300.00

Transaction ID : SB17.4279

Memo Item

B. NASSAU COUNTY REPUBLICAN COMMITTEE (FEDERAL ACCOUNT)

Full Name (Last, First, Middle Initial)
Mailing Address 164 POST AVENUE

City WESTBURY State NY Zip Code 11590

Purpose of Disbursement Event Category/Type 011

Candidate Name **DEVOLDER-SANTOS FOR CONGRESS**

Office Sought: House Senate President Disbursement For: 2020 Primary General Other (specify) ▼

State: NY District: 03

Date of Disbursement 10 / 16 / 2019

FEC Identification Number C C00721365

Amount of Each Disbursement this Period 2000.00

Transaction ID : SB17.4279.0

Memo Item

c. Town of Oyster Bay Republican Club

Full Name (Last, First, Middle Initial)
Mailing Address 164 Post Avenue

City Westbury State NY Zip Code 11590

Purpose of Disbursement Event Category/Type 011

Candidate Name **DEVOLDER-SANTOS FOR CONGRESS**

Office Sought: House Senate President Disbursement For: 2020 Primary General Other (specify) ▼

State: NY District: 03

Date of Disbursement 09 / 24 / 2019

FEC Identification Number C C00721365

Amount of Each Disbursement this Period 1500.00

Transaction ID : SB17.4279.1

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 6300.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 20	
	<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)
DEVOLDER-SANTOS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DONALD J. TRUMP FOR PRESIDENT, INC.			Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2019	
Mailing Address 725 FIFTH AVENUE			FEC Identification Number C C00721365	
City NEW YORK	State NY	Zip Code 10022	Amount of Each Disbursement this Period 2800.00	
Purpose of Disbursement Event Donation		Category/ Type 011	Transaction ID : SB17.4279.2	
Candidate Name DEVOLDER-SANTOS FOR CONGRESS		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NY District: 03				

Full Name (Last, First, Middle Initial) B. American Express			Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2020	
Mailing Address 200 Vesey St			FEC Identification Number C C00721365	
City New York	State NY	Zip Code 10285	Amount of Each Disbursement this Period 535.01	
Purpose of Disbursement Expenses Paid		Category/ Type 001	Transaction ID : SB17.4292	
Candidate Name DEVOLDER-SANTOS FOR CONGRESS		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NY District: 03				

Full Name (Last, First, Middle Initial) c. Campaigns Unlimited			Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2019	
Mailing Address 47 Flintlock Drive			FEC Identification Number C C00721365	
City Shirley	State NY	Zip Code 11967	Amount of Each Disbursement this Period 505.00	
Purpose of Disbursement Event Expenses		Category/ Type 001	Transaction ID : SB17.4292.0	
Candidate Name DEVOLDER-SANTOS FOR CONGRESS		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NY District: 03				

SUBTOTAL of Disbursements This Page (optional).....▶	535.01
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 12 OF 20			
	<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)
DEVOLDER-SANTOS FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. Arena Mail & Digital

Mailing Address 1780 W Sequoia Vista Circle

City Salt Lake City State UT Zip Code 84104

Purpose of Disbursement Website Category/Type 001

Candidate Name **DEVOLDER-SANTOS FOR CONGRESS**

Office Sought: House Senate President Disbursement For: 2020 Primary General Other (specify) ▼

State: NY District: 03

Date of Disbursement: 02 / 10 / 2020

FEC Identification Number: C C00721365

Amount of Each Disbursement this Period: 650.00

Transaction ID : SB17.4256

Memo Item

Full Name (Last, First, Middle Initial)
B. Arena Mail & Digital

Mailing Address 1780 W Sequoia Vista Circle

City Salt Lake City State UT Zip Code 84104

Purpose of Disbursement Facebook & Internet Services Category/Type 001

Candidate Name **DEVOLDER-SANTOS FOR CONGRESS**

Office Sought: House Senate President Disbursement For: 2020 Primary General Other (specify) ▼

State: NY District: 03

Date of Disbursement: 02 / 25 / 2020

FEC Identification Number: C C00721365

Amount of Each Disbursement this Period: 1216.00

Transaction ID : SB17.4258

Memo Item

Full Name (Last, First, Middle Initial)
c. BPM Marketing LLC

Mailing Address 358 Rector St

City Perth Amboy State NJ Zip Code 08861

Purpose of Disbursement Website Design Category/Type 001

Candidate Name **DEVOLDER-SANTOS FOR CONGRESS**

Office Sought: House Senate President Disbursement For: 2020 Primary General Other (specify) ▼

State: NY District: 03

Date of Disbursement: 02 / 10 / 2020

FEC Identification Number: C C00721365

Amount of Each Disbursement this Period: 300.00

Transaction ID : SB17.4259

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 2166.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 20			
	<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)
DEVOLDER-SANTOS FOR CONGRESS

A. Campaigns Unlimited

Full Name (Last, First, Middle Initial)
Mailing Address 47 Flintlock Drive

City Shirley State NY Zip Code 11967

Purpose of Disbursement Compliance/Accounting Category/Type 001

Candidate Name **DEVOLDER-SANTOS FOR CONGRESS**

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: NY District: 03

Date of Disbursement 02 / 25 / 2020

FEC Identification Number C C00721365

Amount of Each Disbursement this Period 750.00

Transaction ID : SB17.4306

Memo Item

B. Campaigns Unlimited

Full Name (Last, First, Middle Initial)
Mailing Address 47 Flintlock Drive

City Shirley State NY Zip Code 11967

Purpose of Disbursement Campaign Expenses/Advertising/Food & Beverage Category/Type 001

Candidate Name **DEVOLDER-SANTOS FOR CONGRESS**

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: NY District: 03

Date of Disbursement 03 / 15 / 2020

FEC Identification Number C C00721365

Amount of Each Disbursement this Period 11664.99

Transaction ID : SB17.4302

Memo Item

c. Campaigns Unlimited

Full Name (Last, First, Middle Initial)
Mailing Address 47 Flintlock Drive

City Shirley State NY Zip Code 11967

Purpose of Disbursement Compliance/Accounting Category/Type 001

Candidate Name **DEVOLDER-SANTOS FOR CONGRESS**

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: NY District: 03

Date of Disbursement 03 / 20 / 2020

FEC Identification Number C C00721365

Amount of Each Disbursement this Period 2500.00

Transaction ID : SB17.4307

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 14914.99

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 14 OF 20	
	<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)
DEVOLDER-SANTOS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Delta Airlines			Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2020	
Mailing Address 1030 Delta Blvd			FEC Identification Number C C00721365	
City Atlanta	State GA	Zip Code 30354	Amount of Each Disbursement this Period 504.00	
Purpose of Disbursement Air Fare		Category/ Type 002	Transaction ID : SB17.4213	
Candidate Name DEVOLDER-SANTOS FOR CONGRESS		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NY District: 03				

Full Name (Last, First, Middle Initial) B. JW Strategies			Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2020	
Mailing Address 20-64 46th St			FEC Identification Number C C00721365	
City Astoria	State NY	Zip Code 11105	Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement Fundraiser		Category/ Type 001	Transaction ID : SB17.4267	
Candidate Name DEVOLDER-SANTOS FOR CONGRESS		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NY District: 03				

Full Name (Last, First, Middle Initial) c. Michael Lamy Graphic Design			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2020	
Mailing Address 75 Britannia Dr			FEC Identification Number C C00721365	
City Danbury	State CT	Zip Code 06811	Amount of Each Disbursement this Period 336.83	
Purpose of Disbursement Business Cards		Category/ Type 001	Transaction ID : SB17.4263	
Candidate Name DEVOLDER-SANTOS FOR CONGRESS		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NY District: 03				

SUBTOTAL of Disbursements This Page (optional).....▶	2340.83
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 20			
	<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)
DEVOLDER-SANTOS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Michael Lamy Graphic Design			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2020		
Mailing Address 75 Britannia Dr			FEC Identification Number C C00721365		
City Danbury	State CT	Zip Code 06811	Amount of Each Disbursement this Period 127.62		
Purpose of Disbursement Back drop Design		Category/ Type 001	Transaction ID : SB17.4270		
Candidate Name DEVOLDER-SANTOS FOR CONGRESS		Memo Item <input type="checkbox"/>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: NY	District: 03				

Full Name (Last, First, Middle Initial) B. Miller, Gabriel, , ,			Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2020		
Mailing Address 94-30 60th Ave Apt 1K			FEC Identification Number C C00721365		
City Elmhurst	State NY	Zip Code 11373	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement Field Representative		Category/ Type 001	Transaction ID : SB17.4261		
Candidate Name DEVOLDER-SANTOS FOR CONGRESS		Memo Item <input type="checkbox"/>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: NY	District: 03				

Full Name (Last, First, Middle Initial) C. RHG.PICS			Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2020		
Mailing Address 1731 2nd Ave, Apt 4RN			FEC Identification Number C C00721365		
City New York	State NY	Zip Code 10128	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement Campaign Photos		Category/ Type 001	Transaction ID : SB17.4272		
Candidate Name DEVOLDER-SANTOS FOR CONGRESS		Memo Item <input type="checkbox"/>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: NY	District: 03				

SUBTOTAL of Disbursements This Page (optional).....▶	3527.62
TOTAL This Period (last page this line number only).....▶	29784.45

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **DEVOLDER-SANTOS FOR CONGRESS** Transaction ID : **SC/10.4149**

LOAN SOURCE Full Name (Last, First, Middle Initial) DEVOLDER-SANTOS, GEORGE ANTHONY, Anthony, ,		<input type="checkbox"/> Memo Item	Election: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 9002 QUEENS BLVD			
City ELMHURST	State NY	ZIP Code 11373	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 5300.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 5300.00
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TERMS	Date Incurred M 12 / D 31 / Y 2019	Date Due M / D / Y 0	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	5300.00
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **DEVOLDER-SANTOS FOR CONGRESS** Transaction ID : **SC/10.4305**

LOAN SOURCE Full Name (Last, First, Middle Initial) DEVOLDER-SANTOS, GEORGE ANTHONY, Anthony, ,		<input type="checkbox"/> Memo Item	Election: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 9002 QUEENS BLVD			
City ELMHURST	State NY	ZIP Code 11373	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 18550.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 18550.00
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TERMS	Date Incurred M 01 / D 03 / Y 2020	Date Due M M / D D / Y 0 Y Y	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	18550.00
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **DEVOLDER-SANTOS FOR CONGRESS** Transaction ID : **SC/10.4207**

LOAN SOURCE Full Name (Last, First, Middle Initial) DEVOLDER-SANTOS, GEORGE ANTHONY, Anthony, ,		<input type="checkbox"/> Memo Item	Election: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 9002 QUEENS BLVD			
City ELMHURST	State NY	ZIP Code 11373	<input type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 4200.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 4200.00
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TERMS	Date Incurred M 01 / D 10 / Y 2020	Date Due M M / D D / Y 0 Y Y	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	4200.00
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **DEVOLDER-SANTOS FOR CONGRESS** Transaction ID : **SC/10.4276**

LOAN SOURCE Full Name (Last, First, Middle Initial) DEVOLDER-SANTOS, GEORGE ANTHONY, Anthony, ,		<input type="checkbox"/> Memo Item	Election: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 9002 QUEENS BLVD			
City ELMHURST	State NY	ZIP Code 11373	<input type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 2000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 2000.00
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TERMS	Date Incurred M 03 / D 10 / Y 2020	Date Due M M / D D / Y 0 Y Y	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....▶	[] 2000.00
TOTALS This Period (last page in this line only).....▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **DEVOLDER-SANTOS FOR CONGRESS** Transaction ID : **SC/10.4309**

LOAN SOURCE Full Name (Last, First, Middle Initial) DEVOLDER-SANTOS, GEORGE ANTHONY, Anthony, ,		<input type="checkbox"/> Memo Item	Election: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 9002 QUEENS BLVD			
City ELMHURST	State NY	ZIP Code 11373	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 50000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 50000.00
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TERMS	Date Incurred M 03 / D 31 / Y 2020	Date Due M M / D D / Y Y Y Y	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	50000.00
TOTALS This Period (last page in this line only).....▶	80050.00

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