

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 GUY FOR CONGRESS

ADDRESS (number and street) P.O. BOX 23177 Check if different than previously reported. (ACC) PITTSBURGH PA 15222

CITY

STATE

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C C00657833

3. IS THIS REPORT NEW (N) OR AMENDED (A)

STATE DISTRICT

PA 14

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)

Election on 06 / 02 / 2020 in the State of PA

(c) 30-Day POST-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period 04 / 01 / 2020 through 05 / 13 / 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

KILGORE, PAUL, , ,

Signature of Treasurer

KILGORE, PAUL, , ,

[Electronically Filed]

Date

05 / 21 / 2020

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

Table with 10 columns for Office Use Only

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
GUY 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))....	61349.60	1058271.91
(b) Total Contribution Refunds (from Line 20(d))	675.00	3420.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	60674.60	1054851.91
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	86980.37	909445.12
(b) Total Offsets to Operating Expenditures (from Line 14).....	299.00	5379.04
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	86681.37	904066.08
8. Cash on Hand at Close of Reporting Period (from Line 27).....	240298.56	
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).....	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

GUY 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).....	11969.00	303581.00
(ii) Unitemized.....	30780.60	263175.91
(iii) TOTAL of contributions from individuals ▶	42749.60	566756.91
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	18600.00	491515.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	61349.60	1058271.91
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	5000.00
13. LOANS:		
(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
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	299.00	5379.04
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	7.79
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	61648.60	1068658.74

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.....	86980.37	909445.12
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	575.00	820.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	100.00	2600.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	675.00	3420.00
21. OTHER DISBURSEMENTS	1000.00	15850.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	88655.37	928715.12

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	267305.33
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	61648.60
25. SUBTOTAL (add Line 23 and Line 24).....	328953.93
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	88655.37
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	240298.56

**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 57
(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)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ALBRECHT, JACK, R, COL.,
Mailing Address 5607 MILITARY CT

City: FAIRFIELD State: CA Zip Code: 94533-9725

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 800.00

Date of Receipt: 05 / 12 / 2020
Transaction ID : A32A6255D5ABE4B1AAEC

Amount of Each Receipt this Period: 100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ALTVATER, THOMAS, S, MR.,
Mailing Address 20302 FOXWOOD TER

City: GERMANTOWN State: MD Zip Code: 20876-6025

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 248.80

Date of Receipt: 04 / 01 / 2020
Transaction ID : AF7FC10138B434B5996D

Amount of Each Receipt this Period: 40.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BECKWITH, G, NICHOLAS, , III
Mailing Address 194 WONDERWOOD LN

City: LAUGHLINTOWN State: PA Zip Code: 15655-2712

FEC ID number of contributing federal political committee: C

Name of Employer: ARCH STREET MGT. LLC Occupation: CEO

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 300.00

Date of Receipt: 05 / 13 / 2020
Transaction ID : A2B50C3E1C8844EFC830

Amount of Each Receipt this Period: 300.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 440.00

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 57
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BEITLER, WILLIAM, J, MR., II

Mailing Address 45 MUNCE RD

City WASHINGTON State PA Zip Code 15301-9623

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 13 / 2020

Transaction ID : **A9C11E1EB9F264EADBBA**

Amount of Each Receipt this Period
200.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BICKERTON, ROBERT, H., MR.,

Mailing Address 2359 STEVENSON DR.

City CHARLESTON State SC Zip Code 29414-7137

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 07 / 2020

Transaction ID : **AEC7B674A515C4466965**

Amount of Each Receipt this Period
400.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BLAKE, RONNIE, S, MR.,

Mailing Address 336 E 96TH ST

City NEW YORK State NY Zip Code 10128-3805

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

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
04 / 07 / 2020

Transaction ID : **A79A391A485F5418F902**

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1100.00

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 7 OF 57
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BLAKE, RONNIE, S, MR.,
Mailing Address 336 E 96TH ST

City: NEW YORK State: NY Zip Code: 10128-3805

FEC ID number of contributing federal political committee: C

Name of Employer: INFORMATION REQUESTED Occupation: INFORMATION REQUESTED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 0.00

Date of Receipt: 04 / 15 / 2020
Transaction ID : A320ACFCE36344886B67

Amount of Each Receipt this Period: - 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BLANK, EDWARD, L, MR.,
Mailing Address 117 HIGHRIDGE CIR

City: PITTSBURGH State: PA Zip Code: 15234-1009

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 475.00

Date of Receipt: 05 / 06 / 2020
Transaction ID : A713B6F51204342F897A

Amount of Each Receipt this Period: 50.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BRAENDEL, DOUGLAS, A, COL.,
Mailing Address 1084 GRAND VIEW AVE

City: EVERETT State: PA Zip Code: 15537-6966

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 230.00

Date of Receipt: 05 / 08 / 2020
Transaction ID : A0E76D47796F547669EF

Amount of Each Receipt this Period: 75.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ - 375.00

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 57
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BRITTON, BEATRICE, T, MRS.,
Mailing Address PO BOX 2327

City SOUTH HAMILTON State MA Zip Code 01982-0327

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

Name of Employer NONE Occupation RETIRED

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
 04 / 17 / 2020

Transaction ID : **A2293A9D3C3CE407480E**

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BRUNING, JOAN, A, MRS.,
Mailing Address 701 RETREAT DR
UNIT 213

City NAPLES State FL Zip Code 34110-7961

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

Name of Employer NONE Occupation RETIRED

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
 05 / 08 / 2020

Transaction ID : **AC9BA0056E6414C56982**

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BRUNOFF, SUSAN, VALERIA, MRS.,
Mailing Address 334 W CEDAR ST

City NEW HOLLAND State PA Zip Code 17557-1202

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
770.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2020

Transaction ID : **AEE31843BD16049CBAD8**

Amount of Each Receipt this Period
210.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 510.00

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 9 OF 57
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CAPUTO, MICHAEL, F, MR.,

Mailing Address 24956 LETCHWORTH RD

City BEACHWOOD State OH Zip Code 44122-4151

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 580.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2020

Transaction ID : **AD31354716039401E81F**

Amount of Each Receipt this Period
 80.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CASSEL, EVERETT, , MR.,

Mailing Address 277 MCINTOSH RD

City WEST CHESTER State PA Zip Code 19382-1914

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2020

Transaction ID : **A5A1A459EC9C7437F8AD**

Amount of Each Receipt this Period
 200.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CEO, JOSEPH, S, MR.,

Mailing Address 982 CELIA LN

City LEXINGTON State KY Zip Code 40504-2255

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 925.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2020

Transaction ID : **A0D154782E0EC4A68BFB**

Amount of Each Receipt this Period
 200.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 480.00

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 57
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CONWAY, LINDA, A, MRS.,
Mailing Address 622 UNIVERSITY PL

City SWARTHMORE State PA Zip Code 19081-2309

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
625.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 20 / 2020

Transaction ID : **AC22EE4A5375C4FFEA80**

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
COUP, RONALD, L, MR.,
Mailing Address 17402 SE 72ND OVERBROOK CT

City THE VILLAGES State FL Zip Code 32162-5348

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
205.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2020

Transaction ID : **A06847A4DE0644F2CB3A**

Amount of Each Receipt this Period
35.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DEFORD, GERALD, L, MR.,
Mailing Address 2701 E SAWYER RD

City GREEN VALLEY State AZ Zip Code 85614-5227

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 01 / 2020

Transaction ID : **AB3E55ACC79E94C3996F**

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1285.00

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 11 OF 57
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DIANA, ANNA, MARIE, MS.,

Mailing Address 2200 TUSCARAWAS RD

City BEAVER State PA Zip Code 15009-1139

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 13 / 2020

Transaction ID : **A50542D68CA4B49FCA43**

Amount of Each Receipt this Period
150.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DRUMMOND, A, CAROLINE, MRS.,

Mailing Address 266 RICE BLUFF RD

City PAWLEYS ISLAND State SC Zip Code 29585-7971

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 13 / 2020

Transaction ID : **A9CDF7D05D5E74B138A2**

Amount of Each Receipt this Period
200.00

Memo Item

C. Full Name (Last, First, Middle Initial)
EVANS, HAROLD, L, MR.,

Mailing Address 3013 BEETHOVEN WAY

City SILVER SPRING State MD Zip Code 20904-6861

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
245.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 24 / 2020

Transaction ID : **A435ACB320FF0400F9F0**

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 385.00

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 57
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FIELDS, JACK, M., , JR.

Mailing Address 8 DEER RIDGE ESTATES BLVD

City KINGWOOD State TX Zip Code 77339-3503

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

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
05 / 06 / 2020

Transaction ID : **A3D9CB59D33CC4EDD9F8**

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
FOSTER, RICHARD, A, MR.,

Mailing Address 233 W 5TH ST

City EMPORIUM State PA Zip Code 15834-1009

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
725.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 12 / 2020

Transaction ID : **ADA4FCEB60A7D49E29F8**

Amount of Each Receipt this Period
375.00

Memo Item

C. Full Name (Last, First, Middle Initial)
GILBERT, WILLIAM, R, MR.,

Mailing Address 347 N SILVERVALE CT

City VISALIA State CA Zip Code 93291-5608

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

Name of Employer NONE Occupation RETIRED

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
04 / 01 / 2020

Transaction ID : **A878410599ED04B8885D**

Amount of Each Receipt this Period
250.00

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)
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FOR LINE NUMBER: PAGE 13 OF 57
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GRANDINETTI, JOHN, F, MR.,
Mailing Address 366 SHORE RD

City STATEN ISLAND	State NY	Zip Code 10307-1551
-----------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2020

Transaction ID : **A460CE92625A64673996**

Amount of Each Receipt this Period
25.00

Memo Item

B. Full Name (Last, First, Middle Initial)
HEPINSTALL, SHARON, L, MRS.,
Mailing Address 2326 WESTWINDE ST NW

City GRAND RAPIDS	State MI	Zip Code 49504-2366
----------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
230.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2020

Transaction ID : **AA7E9FE8C19A0464DA90**

Amount of Each Receipt this Period
35.00

Memo Item

C. Full Name (Last, First, Middle Initial)
HOFFMAN, RICHARD, J, MR.,
Mailing Address 213 ROBB LN

City GREENSBURG	State PA	Zip Code 15601-8508
--------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
313.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2020

Transaction ID : **AAAC97399ABCA4C9C89A**

Amount of Each Receipt this Period
188.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	248.00
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 14 OF 57
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HOLTON, LEYLA, G, MRS.,

Mailing Address 10288 IRON ORE RD

City CONROE	State TX	Zip Code 77303-2410
----------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
257.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 01 / 2020

Transaction ID : **A024D901334FD49ECA32**

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
KING, HARVEY, C, MR.,

Mailing Address 11 AALAPAPA PL

City KAILUA	State HI	Zip Code 96734-3118
----------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 10 / 2020

Transaction ID : **A39EC4C216701420AAC6**

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
KOSKY, MADELINE, M, MRS.,

Mailing Address 214 HICKORY GRADE RD

City BRIDGEVILLE	State PA	Zip Code 15017-1241
---------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

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
05 / 13 / 2020

Transaction ID : **AAC6558B94E4548E88F1**

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	200.00
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 57
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LARUE, PAULINE, M, MRS.,

Mailing Address 6141 BANYAN CIR

City FLEMING ISLAND State FL Zip Code 32003-8164

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 13 / 2020

Transaction ID : **AF9A4CCA759F844B38B3**

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LAUBACH, JAMES, T, MR.,

Mailing Address 815 SUWANEE LN

City HOUSTON State TX Zip Code 77090-1917

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
243.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 01 / 2020

Transaction ID : **AE88C2385C69F410E986**

Amount of Each Receipt this Period
104.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LEE, LONA, ANN, ,

Mailing Address 114 WILLOW LN

City HOUSTON State PA Zip Code 15342-1560

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
325.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 08 / 2020

Transaction ID : **ADD437A2644D846B1B16**

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 229.00

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 16 OF 57
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LUCAS, ALICE, P, MRS.,
Mailing Address 29045 LIVINGSTON DR

City MECHANICSVLLE State MD Zip Code 20659-3271

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

Name of Employer AMY E VANCANNON Occupation NANNY

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2020

Transaction ID : **A204BA17A3EEC434D877**

Amount of Each Receipt this Period
 100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LUISI, PATRICIA, B, MRS.,
Mailing Address 335 BEAVER RUN RD

City APOLLO State PA Zip Code 15613-8846

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
235.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2020

Transaction ID : **A3CEC53C2590D4ADABC9**

Amount of Each Receipt this Period
 100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MARTIN, EDWARD, S, MR.,
Mailing Address 1046 WOODBERRY RD

City NEW KENSINGTON State PA Zip Code 15068-5308

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2020

Transaction ID : **A2908887BC835459199E**

Amount of Each Receipt this Period
 200.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00

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 17 OF 57
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARTIN, JO, SLOAN, MS.,
 Mailing Address PO BOX 560
 City MILFORD State IA Zip Code 51351-0560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 01 / 2020
Transaction ID : A75F40B6154FF4B98940
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
MCINTYRE, WILLIAM, S, MR., JR
 Mailing Address 2005 MOUNTAIN SHADOW RD
 City HOPWOOD State PA Zip Code 15445-2151
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2020
Transaction ID : AF26F816DE86A41A08B9
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
MCMAHON, THOMAS, H, MR.,
 Mailing Address 444 N BROAD ST
 APT 6
 City GALESBURG State IL Zip Code 61401-3688
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2020
Transaction ID : ADE6122FD23774748B48
 Amount of Each Receipt this Period
 100.00
 Memo Item

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

1200.00

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

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

FOR LINE NUMBER: PAGE 18 OF 57
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MCMASTER, JUDITH, L, MRS.,
Mailing Address 115 WINDOVER CT

City MCMURRAY State PA Zip Code 15317-2777

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2020

Transaction ID : **ABDC52C6213494A7A9FF**

Amount of Each Receipt this Period
 _____ 100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MILLER, CLYDE, E, MR.,
Mailing Address 200 GLENWOOD DR

City WASHINGTON State PA Zip Code 15301-8214

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 235.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2020

Transaction ID : **AB2F2B1B52EA5493B91A**

Amount of Each Receipt this Period
 _____ 25.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MUSSER, FRED, A, MR., JR
Mailing Address 1880 ROUTE 119 HWY N

City INDIANA State PA Zip Code 15701-7341

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

Name of Employer MUSSER FORESTS INC. Occupation NURSERY

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 625.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2020

Transaction ID : **AC6D0BCCA2EB74001BAF**

Amount of Each Receipt this Period
 _____ 375.00

Memo Item

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 57
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NEVINS, KYLE, , ,

Mailing Address 5060 MACARTHUR BLVD NW

City WASHINGTON State DC Zip Code 20016-3338

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

Name of Employer HARBINGER STRATEGIES Occupation CONSULTANT

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
04 / 28 / 2020

Transaction ID : **AB575F19B55DB44768B1**

Amount of Each Receipt this Period
500.00

Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
11345.66

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 28 / 2020

Transaction ID : **A585838FA13EF4FB3A8A**

Amount of Each Receipt this Period
500.00

Memo Item
INTERMEDIARY
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

C. Full Name (Last, First, Middle Initial)
NICKOLAS, JANET, E, MRS.,

Mailing Address 6802 RIDGEVUE DR

City PITTSBURGH State PA Zip Code 15236-3644

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
290.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 12 / 2020

Transaction ID : **AEDDB3BDA4C014001A0B**

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00

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 20 OF 57
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PARKER, JOHN, S, DR., MD

Mailing Address 330 BIRKDALE DR

City GREENSBURG State PA Zip Code 15601-7409

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

Name of Employer NONE Occupation RETIRED

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
05 / 08 / 2020

Transaction ID : **A8690E66CABDF4652B6C**

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
PEMBERTON, CARLA, P, MRS., TTEE

Mailing Address 2905 POPLAR BLVD

City ALHAMBRA State CA Zip Code 91803-1017

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 13 / 2020

Transaction ID : **A77DABD8D40594DA5835**

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name (Last, First, Middle Initial)
POWERS, KENNETH, R, MR.,

Mailing Address 4214 LANIER RIDGE WALK

City CUMMING State GA Zip Code 30041-7496

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1660.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 12 / 2020

Transaction ID : **A31C309E0F5C746FA9B7**

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00

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 21 OF 57
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PROFIO, CHARLES, A, MR.,
Mailing Address 326 PROFIO RD

City MC DONALD	State PA	Zip Code 15057-9728
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FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 12 / 2020

Transaction ID : A43910329988547C79FF

Amount of Each Receipt this Period
90.00

Memo Item

B. Full Name (Last, First, Middle Initial)
RATH, EUNICE, MARY, MS.,
Mailing Address 1720 E LAWN DR

City SAVANNA	State IL	Zip Code 61074-1810
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FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
800.00

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 13 / 2020

Transaction ID : A9BD80008E9304A978FB

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
REINHARD, DONALD, G, MR.,
Mailing Address 75 HARVARD AVE

City PALMERTON	State PA	Zip Code 18071-1212
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FEC ID number of contributing federal political committee. **C**

Name of Employer P. C.	Occupation EXECUTIVE
---------------------------	-------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
800.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 07 / 2020

Transaction ID : AA0FC0F90D40242589A6

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	390.00
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 22 OF 57
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
REINHARD, DONALD, G, MR.,
Mailing Address 75 HARVARD AVE

City PALMERTON State PA Zip Code 18071-1212

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

Name of Employer P. C. Occupation EXECUTIVE

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1100.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 12 / 2020

Transaction ID : **A80E31AB48F9E4F9F901**

Amount of Each Receipt this Period
300.00

Memo Item

B. Full Name (Last, First, Middle Initial)
RICHARDSON, THELMA, R, MRS.,
Mailing Address 335 VILLAGE GREEN DR

City MCMURRAY State PA Zip Code 15317-5421

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 07 / 2020

Transaction ID : **AC0C95B0E8B1F40B3B79**

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
RICHMOND, JOEL, C, MR.,
Mailing Address 63 VALLEY VIEW RD

City CLAYSVILLE State PA Zip Code 15323-1023

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

Name of Employer OTIS EASTERN SERVICE Occupation PROJECT MANAGER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
244.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 08 / 2020

Transaction ID : **A338A73A577834DD1817**

Amount of Each Receipt this Period
52.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 452.00

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 23 OF 57
(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)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RISIUS, BARBARA, F, DR., MD

Mailing Address 2202 ACACIA PARK DR
APT 2518

City LYNDHURST State OH Zip Code 44124-3868

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

Name of Employer NONE Occupation RETIRED

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
04 / 01 / 2020

Transaction ID : **A7FDF34ACC136402CAEE**

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ROEDER, MARJORIE, O, MRS.,

Mailing Address 135 PLAZA DR
APT 211

City KERRVILLE State TX Zip Code 78028-2210

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
270.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 13 / 2020

Transaction ID : **AB566ED90C0664BC2973**

Amount of Each Receipt this Period
40.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SCHAKE, ARTHUR, J, MR.,

Mailing Address 456 UTOPIA RD

City APOLLO State PA Zip Code 15613-9637

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 15 / 2020

Transaction ID : **AA5C534975A42497E9F1**

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 340.00

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 24 OF 57
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SCHWAB, MARILYN, E, MRS.,
Mailing Address 184 BLACK OAK DR

City: PITTSBURGH State: PA Zip Code: 15220-2008

FEC ID number of contributing federal political committee: C

Name of Employer: INFORMATION REQUESTED Occupation: INFORMATION REQUESTED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 300.00

Date of Receipt: 05 / 13 / 2020
Transaction ID : AB0C7D2F3CDC74700BCC

Amount of Each Receipt this Period: 100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SIEFFERT, JOHN, J, MR., JR
Mailing Address 740 RANDALL DR

City: TROY State: MI Zip Code: 48085-4853

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 800.00

Date of Receipt: 05 / 12 / 2020
Transaction ID : A9C0DC63266EF489D8D9

Amount of Each Receipt this Period: 200.00

Memo Item

C. Full Name (Last, First, Middle Initial)
STOMBRES, STEVE, , ,
Mailing Address 10092 DANIELS RUN WAY

City: FAIRFAX State: VA Zip Code: 22030-2448

FEC ID number of contributing federal political committee: C

Name of Employer: HARBINGER STRATEGIES Occupation: PARTNER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 500.00

Date of Receipt: 04 / 28 / 2020
Transaction ID : A50D2E3AEFB1F45D8A10

Amount of Each Receipt this Period: 500.00

Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00

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 25 OF 57
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
11345.66

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 28 / 2020

Transaction ID : A11C500D2D3D6402CB36

Amount of Each Receipt this Period
500.00

Memo Item
INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

B. Full Name (Last, First, Middle Initial)
STULTZ, MARY, N, MRS.,

Mailing Address 262 DEERFIELD CIR

City KINGWOOD State WV Zip Code 26537-1358

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

Name of Employer Occupation
NONE RETIRED

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
 05 / 13 / 2020

Transaction ID : A96EC69C5A6004E24B4A

Amount of Each Receipt this Period
375.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SUBLETTE, FREDERICK, W, MR.,

Mailing Address 320 HOLLYWOOD BLVD SE

City FT WALTON BCH State FL Zip Code 32548-5771

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

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
 04 / 01 / 2020

Transaction ID : A419810570FB644CF993

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00

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 26 OF 57
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SUBLETTE, FREDERICK, W, MR.,
 Mailing Address 320 HOLLYWOOD BLVD SE
 City FT WALTON BCH State FL Zip Code 32548-5771
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2020
Transaction ID : A110E109032684A3EB68
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
TOMI, ALICE, F, MRS.,
 Mailing Address 1761 KINGS CT
 City SOUTH PARK State PA Zip Code 15129-8834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2020
Transaction ID : A513E1A9327F44E6B9AF
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
TRUSHEL, NELSON, E, MR.,
 Mailing Address 4750 BEAR CREEK RD
 City FAIRVIEW State PA Zip Code 16415-2012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 07 / 2020
Transaction ID : A6DDB2735A3E946A0B11
 Amount of Each Receipt this Period
 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 27 OF 57
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
UTLEY, JOHN, W, MR.,

Mailing Address 2204 NW 118TH ST

City OKLAHOMA CITY State OK Zip Code 73120-7806

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 07 / 2020

Transaction ID : **AFFE3BCBE8E9F45EF917**

Amount of Each Receipt this Period
350.00

Memo Item

B. Full Name (Last, First, Middle Initial)
WALLACE, JOHN, C, MR.,

Mailing Address 4153 COUNTRY CLUB DR

City LONG BEACH State CA Zip Code 90807-1905

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

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
04 / 28 / 2020

Transaction ID : **A3196586D05D745E3B4C**

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
WARD, ANN, D, MRS.,

Mailing Address 25 WREN DR

City HILTON HEAD ISLAND State SC Zip Code 29928-4021

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 01 / 2020

Transaction ID : **ABCEAB5F7196B4AEC9A0**

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 385.00

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 28 OF 57
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WARD, ANN, D, MRS.,
Mailing Address 25 WREN DR

City: HILTON HEAD ISLAND State: SC Zip Code: 29928-4021

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

Name of Employer: INFORMATION REQUESTED Occupation: INFORMATION REQUESTED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt: 05 / 13 / 2020
Transaction ID : **A2DFA56E13E8A4268B09**

Amount of Each Receipt this Period: 150.00

Memo Item

B. Full Name (Last, First, Middle Initial)
WEBER, HOWARD, K, MR.,
Mailing Address 831 FIVE PINES RD

City: NORTH HUNTINGDON State: PA Zip Code: 15642-1627

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

Name of Employer: INFORMATION REQUESTED Occupation: INFORMATION REQUESTED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
315.00

Date of Receipt: 05 / 12 / 2020
Transaction ID : **A5152EA02FFC0415CA0E**

Amount of Each Receipt this Period: 50.00

Memo Item

C. Full Name (Last, First, Middle Initial)
WELSH, JACQUELINE, V, MS.,
Mailing Address 114 WILLOW LN

City: HOUSTON State: PA Zip Code: 15342-1560

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

Name of Employer: INFORMATION REQUESTED Occupation: INFORMATION REQUESTED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt: 05 / 08 / 2020
Transaction ID : **A32F46FC233F74BD8B50**

Amount of Each Receipt this Period: 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 250.00

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: (check only one)				PAGE 29 OF 57	
<input checked="" type="checkbox"/>	11a 12	<input type="checkbox"/>	11b 13a	<input type="checkbox"/>	11c 13b
<input type="checkbox"/>		<input type="checkbox"/>	11d 14	<input type="checkbox"/>	15

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WHITE, PATRICIA, E, MS.,

Mailing Address 3337 14TH ST

City LEWISTON	State ID	Zip Code 83501-5638
------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , 300.00

Date of Receipt
 / / 04 / 15 / 2020

Transaction ID : ADDA7ED0DBF414491A62

Amount of Each Receipt this Period
 , , 50.00

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
 / /

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
 / /

Amount of Each Receipt this Period
 , ,

Memo Item

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

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

<input type="text" value=""/> , <input type="text" value=""/> , <input type="text" value=""/> 50.00
<input type="text" value=""/> , <input type="text" value=""/> , <input type="text" value=""/> 11969.00

**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 30 OF 57	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

Full Name (Last, First, Middle Initial)
AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE (PT-PAC)

A. Mailing Address 1111 NORTH FAIRFAX ST.

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00012880

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 20 / 2020

Transaction ID : A08239E27E0C848ACAB1

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

Full Name (Last, First, Middle Initial)
CARPENTERS LEGISLATIVE IMPROVEMENT COMMITTEE UNITED BROTHERHOOD OF CARPENTERS AND JOINERS

B. Mailing Address 101 CONSTIUTION AVENUE, NW
10TH FLOOR WEST

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00001016

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 20 / 2020

Transaction ID : A5843EC3252574759A0B

Amount of Each Receipt this Period
 _____ 5000.00

Memo Item

Full Name (Last, First, Middle Initial)
COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL

C. Mailing Address 1701 JFK BLVD, 49TH FLOOR

City PHILADELPHIA	State PA	Zip Code 19103
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 8000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 20 / 2020

Transaction ID : AEE85C4645C8E4123BB8

Amount of Each Receipt this Period
 _____ 2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 8000.00
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 31 OF 57
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION

Mailing Address 99 M ST, SE
SUITE 300

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2020

Transaction ID : **AD610783028CC426781E**

Amount of Each Receipt this Period
3000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JIM JORDAN FOR CONGRESS

Mailing Address 1709 S STATE ROUTE 560

City URBANA State OH Zip Code 43078-9637

FEC ID number of contributing federal political committee. **C** C00416594

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 07 / 2020

Transaction ID : **A68B1972ACB3B41958FE**

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LIBERTY MUTUAL INSURANCE COMPANY - PAC

Mailing Address 175 BERKELEY ST

City BOSTON State MA Zip Code 02116-5066

FEC ID number of contributing federal political committee. **C** C00171843

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 20 / 2020

Transaction ID : **AC49B0AC6C6BE42869EC**

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 7000.00

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 32 OF 57
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 NORTH MICHIGAN AVENUE

City CHICAGO State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2020

Transaction ID : **A92470FDB7B68489C8CE**

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SHEET METAL AND AIR CONDITIONING CONTRACTORS POLITICAL ACTION COMMITTEE

Mailing Address 4201 LAFAYETTE CENTER DRIVE

City CHANTILLY State VA Zip Code 20151

FEC ID number of contributing federal political committee. **C** C00013961

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2020

Transaction ID : **A5530014C3DF34313B6E**

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
WESTMORELAND COUNTY REPUBLICAN COMMITTEE

Mailing Address 23 N MAPLE AVE

City GREENSBURG State PA Zip Code 15601-2503

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 16 / 2020

Transaction ID : **AF4942C5DDB0F467D824**

Amount of Each Receipt this Period
100.00

Memo Item
IN-KIND:REFUND ISSUED

SUBTOTAL of Receipts This Page (optional)..... ▶ 3600.00

TOTAL This Period (last page this line number only)..... ▶ 18600.00

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)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GLOBAL PAYMENTS

Mailing Address 10705 RED RUN BLVD

City: ROCKVILLE State: MD Zip Code: 20855

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

Name of Employer: Occupation:

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2020

Transaction ID : **A744C521E7D8F4212AA9**

Amount of Each Receipt this Period
 299.00

Memo Item
 REFUND

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).....▶	299.00
TOTAL This Period (last page this line number only).....▶	299.00

**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 34 OF 57			
	<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)
GUY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. 814 CONSULTING LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2020		
Mailing Address 5827 COLFAX AVE					
City ALEXANDRIA	State VA	Zip Code 22311	FEC Identification Number C		
Purpose of Disbursement SEE MEMO		Category/ Type 001	Amount of Each Disbursement this Period 20830.57		
Candidate Name		Transaction ID : B517228830FE7464BAAA			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:		<input type="checkbox"/> Memo Item	
<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> General				
State:	District:				

Full Name (Last, First, Middle Initial) B. THE CAPITAL GRILLE			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2020		
Mailing Address 601 PENNSYLVANIA AVE NW					
City WASHINGTON	State DC	Zip Code 20004	FEC Identification Number C		
Purpose of Disbursement EVENT EXPENSE		Category/ Type 001	Amount of Each Disbursement this Period 5302.15		
Candidate Name		Transaction ID : BA8789B6345944236964			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:		<input checked="" type="checkbox"/> Memo Item	
<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> General				
State:	District:				

Full Name (Last, First, Middle Initial) C. ACQUA AL 2			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2020		
Mailing Address 212 7TH ST SE					
City WASHINGTON	State DC	Zip Code 20003-4311	FEC Identification Number C		
Purpose of Disbursement EVENT CATERING		Category/ Type 001	Amount of Each Disbursement this Period 2990.28		
Candidate Name		Transaction ID : BEFEB97712135446F869			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:		<input checked="" type="checkbox"/> Memo Item	
<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> General				
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	20830.57
TOTAL This Period (last page this line number only).....	20830.57

**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 57	
	<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)
GUY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BULLFEATHER'S		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2020
Mailing Address 410 FIRST ST SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-1819
Purpose of Disbursement EVENT CATERING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 2130.00
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. MORTON'S GRILLE		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2020
Mailing Address 25 WATERWAY AVE		FEC Identification Number C
City THE WOODLANDS	State TX	Zip Code 77380-3152
Purpose of Disbursement EVENT CATERING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 2371.94
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2020
Mailing Address 3610 HACKS CROSS ROAD		FEC Identification Number C
City MEMPHIS	State TN	Zip Code 38125
Purpose of Disbursement POSTAGE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 36.20
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:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 36 OF 57	
	<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)
GUY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. 814 CONSULTING LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2020	
Mailing Address 5827 COLFAX AVE			FEC Identification Number C	
City ALEXANDRIA	State VA	Zip Code 22311	Amount of Each Disbursement this Period 8000.00	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : B5DBA3DC615B74731841	
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. ADP			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2020	
Mailing Address 100 COMMERCE DRIVE			FEC Identification Number C	
City PITTSBURGH	State PA	Zip Code 19034	Amount of Each Disbursement this Period 38.34	
Purpose of Disbursement PAYROLL FEES		Category/ Type 001	Transaction ID : B0C9292CF603B4273A37	
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) C. ADP			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2020	
Mailing Address 100 COMMERCE DRIVE			FEC Identification Number C	
City PITTSBURGH	State PA	Zip Code 19034	Amount of Each Disbursement this Period 752.37	
Purpose of Disbursement PAYROLL TAXES		Category/ Type 001	Transaction ID : BB2482F0CA81C4938AF4	
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:				

SUBTOTAL of Disbursements This Page (optional).....▶	790.71
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 57			
	<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)
GUY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement
Mailing Address 100 COMMERCE DRIVE		M M / D D / Y Y Y Y 04 / 24 / 2020
City PITTSBURGH	State PA	Zip Code 19034
Purpose of Disbursement PAYROLL FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 38.34
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 : B3E1EDBEDA3EE47FFB11 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ADP		Date of Disbursement
Mailing Address 100 COMMERCE DRIVE		M M / D D / Y Y Y Y 04 / 30 / 2020
City PITTSBURGH	State PA	Zip Code 19034
Purpose of Disbursement PAYROLL TAXES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 752.36
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 : B8FEDC891DA1548B2B5E <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. ADP		Date of Disbursement
Mailing Address 100 COMMERCE DRIVE		M M / D D / Y Y Y Y 05 / 08 / 2020
City PITTSBURGH	State PA	Zip Code 19034
Purpose of Disbursement PAYROLL FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 38.34
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 : B4E01F267F5B34F97A3A <input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	829.04
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 57	
	<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)
GUY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2020	
Mailing Address PO BOX 650448			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75265-0448	Amount of Each Disbursement this Period 2260.65	
Purpose of Disbursement SEE MEMO		Category/ Type	Transaction ID : B59D3FB276F3A42169B1	
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. THE CAPITAL GRILLE			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2020	
Mailing Address 601 PENNSYLVANIA AVE NW			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20004	Amount of Each Disbursement this Period 553.63	
Purpose of Disbursement EVENT EXPENSE		Category/ Type 001	Transaction ID : BC9B9A49F04AA4418AC5	
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) C. UBER			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2020	
Mailing Address 1455 MARKET ST SUITE 400			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94103	Amount of Each Disbursement this Period 56.39	
Purpose of Disbursement GROUND TRANSPORTATION		Category/ Type 001	Transaction ID : B747A393F4C7C4333A26	
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:				

SUBTOTAL of Disbursements This Page (optional).....▶	2260.65
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 39 OF 57	
	<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)
GUY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TELLURIDE SKI RESORT			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2020	
Mailing Address 565 MOUNTAIN VILLAGE BLVD			FEC Identification Number C	
City MOUNTAIN VILLAGE	State CO	Zip Code 81435-9521	Amount of Each Disbursement this Period 401.99	
Purpose of Disbursement LODGING		Category/ Type 001	Transaction ID : B3A68892CC7EF41DCA01	
Candidate Name			<input checked="" 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. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2020	
Mailing Address 300 FIRST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 22.75	
Purpose of Disbursement EVENT EXPENSE		Category/ Type 001	Transaction ID : BDECC926730F74958911	
Candidate Name			<input checked="" 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) C. UNITED AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2020	
Mailing Address 233 S WACKER DR			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60606	Amount of Each Disbursement this Period 70.00	
Purpose of Disbursement AIRFARE		Category/ Type 001	Transaction ID : B97942FBB272D4525969	
Candidate Name			<input checked="" 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:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 40 OF 57			
	<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)
GUY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2020
Mailing Address 475 LENFANT PLAZA SW		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20260
Purpose of Disbursement POSTAGE		001
Candidate Name		Amount of Each Disbursement this Period 62.75
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 : B70542C041EA04285B8F
State: District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2020
Mailing Address 140 W ST		FEC Identification Number C
City NEW YORK	State NY	Zip Code 10007
Purpose of Disbursement TELEPHONE SERVICES		001
Candidate Name		Amount of Each Disbursement this Period 954.26
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 : B3D5460637623462E9DD
State: District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2020
Mailing Address PO BOX 650448		FEC Identification Number C
City DALLAS	State TX	Zip Code 75265-0448
Purpose of Disbursement SEE MEMO		
Candidate Name		Amount of Each Disbursement this Period 338.12
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 : BB6F1D7EE95DC4D98A83
State: District:		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	338.12
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 41 OF 57			
	<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)
GUY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AMAZON		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2020
Mailing Address 440 TERRY AVENUE NORTH		FEC Identification Number C
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement OFFICE SUPPLIES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 41.28
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2020
Mailing Address 475 LENFANT PLAZA SW		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20260
Purpose of Disbursement POSTAGE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 15.50
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2020
Mailing Address 300 FIRST ST SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement MEMBERSHIP & DUES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 271.34
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:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 42 OF 57			
	<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)
GUY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BASK DIGITAL MEDIA, LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2020		
Mailing Address 225 BROADWAY SUITE 420			FEC Identification Number C		
City SAN DIEGO	State CA	Zip Code 92101	Amount of Each Disbursement this Period 225.00		
Purpose of Disbursement DIGITAL CONSULTING		Category/ Type 001	Transaction ID : BFFB1056BD1A644BF89A		
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. CHALMERS & ADAMS LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2020		
Mailing Address 5805 STATE BRIDGE RD #G77			FEC Identification Number C		
City JOHNS CREEK	State GA	Zip Code 30097	Amount of Each Disbursement this Period 490.00		
Purpose of Disbursement LEGAL CONSULTING		Category/ Type 001	Transaction ID : B736C7F69D803400B9EA		
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) C. COLDSPARK			Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2020		
Mailing Address 307 FOURTH AVENUE 14TH FLOOR			FEC Identification Number C		
City PITTSBURGH	State PA	Zip Code 15222	Amount of Each Disbursement this Period 4538.52		
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type 001	Transaction ID : BF82E8525CEB84FF8886		
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:					

SUBTOTAL of Disbursements This Page (optional).....▶	5253.52
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 57			
	<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)
GUY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. COLDSPARK		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2020
Mailing Address 307 FOURTH AVENUE 14TH FLOOR		FEC Identification Number C
City PITTSBURGH	State PA	Zip Code 15222
Purpose of Disbursement MEDIA BUY	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 10000.00
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 : BE7D29AAFCE59424DA1F <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. DONORBUREAU, LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2020
Mailing Address 1900 N CULPEPER STREET		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22207
Purpose of Disbursement POLLING EXPENSE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 333.05
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 : B610457B992C34EB9A94 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FIRST VIRGINIA COMMUNITY BANK		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2020
Mailing Address 11325 RANDOM HILLS BLVD. STE. 240		FEC Identification Number C
City FAIRFAX	State VA	Zip Code 22030
Purpose of Disbursement BANK FEE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 95.16
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 : BA18859B467D74212B67 <input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	10428.21
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 57			
	<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)
GUY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FIRST VIRGINIA COMMUNITY BANK			Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2020		
Mailing Address 11325 RANDOM HILLS BLVD. STE. 240			FEC Identification Number C		
City FAIRFAX	State VA	Zip Code 22030	Amount of Each Disbursement this Period 54.51		
Purpose of Disbursement BANK FEE		Category/ Type 001	Transaction ID : BE78B6DA4845049F1802		
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. GLOBAL PAYMENTS			Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2020		
Mailing Address 10705 RED RUN BLVD			FEC Identification Number C		
City ROCKVILLE	State MD	Zip Code 20855	Amount of Each Disbursement this Period 766.94		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : BFA729FD5EC88450FB08		
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) C. GLOBAL PAYMENTS			Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2020		
Mailing Address 10705 RED RUN BLVD			FEC Identification Number C		
City ROCKVILLE	State MD	Zip Code 20855	Amount of Each Disbursement this Period 184.76		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : B4F68B6CF4E1A4ABF936		
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:					

SUBTOTAL of Disbursements This Page (optional).....▶	1006.21
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 57	
	<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)
GUY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GOVPREDICT, INC.			Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2020	
Mailing Address 2021 SPRUCE ST 1F			FEC Identification Number C	
City PHILADELPHIA	State PA	Zip Code 19103-5647	Amount of Each Disbursement this Period 833.33	
Purpose of Disbursement SOFTWARE		Category/ Type 001	Transaction ID : B9E9468541D694ECA87F	
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. HODGE, MALLORY, , ,			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2020	
Mailing Address 520 TENTH STREET			FEC Identification Number C	
City OAKMONT	State PA	Zip Code 15139-1114	Amount of Each Disbursement this Period 2042.80	
Purpose of Disbursement PAYROLL EXPENSE		Category/ Type 001	Transaction ID : BA9CFCF5E842F4E45830	
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) C. HODGE, MALLORY, , ,			Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2020	
Mailing Address 520 TENTH STREET			FEC Identification Number C	
City OAKMONT	State PA	Zip Code 15139-1114	Amount of Each Disbursement this Period 2042.81	
Purpose of Disbursement PAYROLL EXPENSE		Category/ Type 001	Transaction ID : B1BDC6566129142D2BCF	
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:				

SUBTOTAL of Disbursements This Page (optional).....▶	4918.94
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 46 OF 57
	<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)
GUY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HSP DIRECT		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2020
Mailing Address 20130 LAKEVIEW CENTER PLAZA #300		FEC Identification Number C
City ASHBURN	State VA	Zip Code 20147
Purpose of Disbursement DIRECT MAIL SERVICES	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 792.75
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 : BCB34F50D863C452D825	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. HSP DIRECT		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2020
Mailing Address 20130 LAKEVIEW CENTER PLAZA #300		FEC Identification Number C
City ASHBURN	State VA	Zip Code 20147
Purpose of Disbursement DIRECT MAIL SERVICES	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 3000.00
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 : BDCFBC94AC10D4355B13	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. IMAGE DIRECT		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2020
Mailing Address 200 MONROE AVE		FEC Identification Number C
City FREDERICK	State MD	Zip Code 21701-3139
Purpose of Disbursement POSTAGE & DELIVERY	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 5013.33
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 : BE88ADA7FB0A84C3AAA6	
		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	8806.08
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 47 OF 57			
	<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)
GUY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. IMAGE DIRECT			Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2020		
Mailing Address 200 MONROE AVE			FEC Identification Number C		
City FREDERICK	State MD	Zip Code 21701-3139	Amount of Each Disbursement this Period 274.65		
Purpose of Disbursement POSTAGE & DELIVERY		Category/ Type 001	Transaction ID : BE1F3D0B61BD24488A90		
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. INTEGRAM			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2020		
Mailing Address 22695 COMMERCE CENTER CT			FEC Identification Number C		
City STERLING	State VA	Zip Code 20166-2088	Amount of Each Disbursement this Period 3224.49		
Purpose of Disbursement PRINTING EXPENSE		Category/ Type 001	Transaction ID : BDE9E335E31914BC6A06		
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) C. INTEGRAM			Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2020		
Mailing Address 22695 COMMERCE CENTER CT			FEC Identification Number C		
City STERLING	State VA	Zip Code 20166-2088	Amount of Each Disbursement this Period 3627.95		
Purpose of Disbursement PRINTING EXPENSE		Category/ Type 001	Transaction ID : BBFC57EFE98DD44978CA		
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:					

SUBTOTAL of Disbursements This Page (optional).....▶	7127.09
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 48 OF 57			
	<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)
GUY FOR CONGRESS

A. NOVA LIST COMPANY

Full Name (Last, First, Middle Initial)
NOVA LIST COMPANY

Mailing Address 20130 LAKEVIEW CENTER PLAZA
SUITE 300

City ASHBURN State VA Zip Code 20147

Purpose of Disbursement LIST RENTAL Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 04 / 09 / 2020

FEC Identification Number C

Amount of Each Disbursement this Period 2703.89

Transaction ID : BE4DC92FA1DE84BCE8DA

Memo Item

B. OSAGE STRATEGIES

Full Name (Last, First, Middle Initial)
OSAGE STRATEGIES

Mailing Address 307 4TH AVE
14TH FLOOR

City PITTSBURGH State PA Zip Code 15222

Purpose of Disbursement POLLING EXPENSE Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 04 / 14 / 2020

FEC Identification Number C

Amount of Each Disbursement this Period 5800.00

Transaction ID : B8EA91C79B5404B878C1

Memo Item

C. PRINT MAIL COMMUNICATIONS, INC

Full Name (Last, First, Middle Initial)
PRINT MAIL COMMUNICATIONS, INC

Mailing Address 4333 DAVENPORT RD

City FREDERICKSBURG State VA Zip Code 22408-8716

Purpose of Disbursement POSTAGE & DELIVERY Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 05 / 11 / 2020

FEC Identification Number C

Amount of Each Disbursement this Period 2500.00

Transaction ID : BCB88E3D86E344B53A0F

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 11003.89

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 49 OF 57			
	<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)
GUY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PRINT MAIL COMMUNICATIONS, INC		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2020
Mailing Address 4333 DAVENPORT RD		FEC Identification Number C
City FREDERICKSBURG	State VA	Zip Code 22408-8716
Purpose of Disbursement POSTAGE & DELIVERY	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 3590.66
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. PROFESSIONAL DATA SERVICES		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2020
Mailing Address 824 S MILLEDGE AVE STE 101		FEC Identification Number C
City ATHENS	State GA	Zip Code 30605-1332
Purpose of Disbursement COMPLIANCE SERVICES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 3055.00
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. SUNRISE DATA SERVICES		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2020
Mailing Address 20130 LAKEVIEW CENTER PLAZA SUITE 300		FEC Identification Number C
City ASHBURN	State VA	Zip Code 20147
Purpose of Disbursement DATA WORK	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1098.77
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	7744.43
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 50 OF 57			
	<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)
GUY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SUNRISE DATA SERVICES		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2020
Mailing Address 20130 LAKEVIEW CENTER PLAZA SUITE 300		FEC Identification Number C
City ASHBURN	State VA	Zip Code 20147
Purpose of Disbursement DATA WORK	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 560.00
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 : B430DF787827A45F1A11 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. THE CONGRESSIONAL INSTITUTE, INC.		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2020
Mailing Address 1700 DIAGONAL ROAD SUITE 730		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement EVENT EXPENSE	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 1520.22
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 : B9815ED7D1D874EB7A17 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WASHINGTON INTELLIGENCE BUREAU		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2020
Mailing Address 4128 PEPSI PLACE		FEC Identification Number C
City CHANTILLY	State VA	Zip Code 20151
Purpose of Disbursement CAGING & ESCROW	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 1290.87
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 : BFB9FD6F7291D4F56959 <input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	3371.09
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 51 OF 57			
	<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)
GUY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WASHINGTON INTELLIGENCE BUREAU			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2020		
Mailing Address 4128 PEPSI PLACE			FEC Identification Number C		
City CHANTILLY	State VA	Zip Code 20151	Amount of Each Disbursement this Period 200.00		
Purpose of Disbursement POSTAGE & DELIVERY		Category/ Type 001	Transaction ID : B32C62E98E3064ED396D		
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. WASHINGTON INTELLIGENCE BUREAU			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2020		
Mailing Address 4128 PEPSI PLACE			FEC Identification Number C		
City CHANTILLY	State VA	Zip Code 20151	Amount of Each Disbursement this Period 300.00		
Purpose of Disbursement POSTAGE & DELIVERY		Category/ Type 001	Transaction ID : BCC14089643594C3DA92		
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) C. WASHINGTON INTELLIGENCE BUREAU			Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2020		
Mailing Address 4128 PEPSI PLACE			FEC Identification Number C		
City CHANTILLY	State VA	Zip Code 20151	Amount of Each Disbursement this Period 1491.28		
Purpose of Disbursement POSTAGE & DELIVERY		Category/ Type 001	Transaction ID : BF9E7FD486611413CAD1		
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:					

SUBTOTAL of Disbursements This Page (optional).....▶	1991.28
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 52 OF 57			
	<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)
GUY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WESTMORELAND COUNTY REPUBLICAN COMMITTEE			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2020		
Mailing Address 23 N MAPLE AVE			FEC Identification Number C		
City GREENSBURG	State PA	Zip Code 15601-2503	Amount of Each Disbursement this Period 100.00		
Purpose of Disbursement IN-KIND:REFUND ISSUED		Category/Type	Transaction ID : BF4942C5DDB0F467D824		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:				

Full Name (Last, First, Middle Initial) B. WINRED			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2020		
Mailing Address PO BOX 9891			FEC Identification Number C C00694323		
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 0.69		
Purpose of Disbursement CC TRANSACTION FEES		Category/Type 001	Transaction ID : BC13BEFA90A964EF7A9A		
Candidate Name WINRED		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:				

Full Name (Last, First, Middle Initial) C. WINRED			Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2020		
Mailing Address PO BOX 9891			FEC Identification Number C C00694323		
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 2.48		
Purpose of Disbursement CC TRANSACTION FEES		Category/Type 001	Transaction ID : B6AEE72C615FB4500A52		
Candidate Name WINRED		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	103.17
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 53 OF 57			
	<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)
GUY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WINRED			Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2020		
Mailing Address PO BOX 9891			FEC Identification Number C C00694323		
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 2.22		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : B2C2F123D40B5461E915		
Candidate Name WINRED		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. WINRED			Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2020		
Mailing Address PO BOX 9891			FEC Identification Number C C00694323		
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 2.58		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : B0D3074AAA6524229A16		
Candidate Name WINRED		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) C. WINRED			Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2020		
Mailing Address PO BOX 9891			FEC Identification Number C C00694323		
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 40.78		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : BB2CA0BC31AD848D8987		
Candidate Name WINRED		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:					

SUBTOTAL of Disbursements This Page (optional).....▶	45.58
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 54 OF 57			
	<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)
GUY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WINRED			Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2020		
Mailing Address PO BOX 9891			FEC Identification Number C C00694323		
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 7.07		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : BF56E0201C6B74B6DBBD		
Candidate Name WINRED		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. WINRED			Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2020		
Mailing Address PO BOX 9891			FEC Identification Number C C00694323		
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 15.06		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : B82EB7A687CAC4563A95		
Candidate Name WINRED		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) C.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
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: _____				

SUBTOTAL of Disbursements This Page (optional).....▶	22.13
TOTAL This Period (last page this line number only).....▶	86870.71

**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 55 OF 57			
	<input type="checkbox"/> 17 <input checked="" 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)
GUY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CLARIDGE VOLUNTEER FIRE DEPARTMENT			Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2020		
Mailing Address PO BOX 400			FEC Identification Number C		
City CLARIDGE	State PA	Zip Code 15623-0400	Amount of Each Disbursement this Period 375.00		
Purpose of Disbursement REFUND		Category/ Type 010	Transaction ID : BB687F76164D34115891		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input 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: District:					

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
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) C.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
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:					

SUBTOTAL of Disbursements This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	375.00

**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 56 OF 57	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
GUY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WESTMORELAND COUNTY REPUBLICAN COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2020
Mailing Address 23 N MAPLE AVE		FEC Identification Number C
City GREENSBURG	State PA	Zip Code 15601-2503
Purpose of Disbursement REFUND	Category/Type 010	
Candidate Name WESTMORELAND COUNTY REPUBLICAN COMMITTEE	Amount of Each Disbursement this Period 100.00	
Office Sought: <input 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) ▼	Transaction ID : BE40742ED8E124BECA85
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	100.00

**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 57 OF 57
	<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)
GUY FOR CONGRESS

A. MIKE GARCIA FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mike Garcia

Mailing Address 1451 QUAIL ST
STE 101

City NEWPORT BEACH State CA Zip Code 92660-2747

Purpose of Disbursement POLITICAL DONATION Category/Type 011

Candidate Name GARCIA, MICHAEL, , ,

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

State: CA District: 25

Date of Disbursement 04 / 30 / 2020

FEC Identification Number C C00701102

Amount of Each Disbursement this Period 1000.00

Transaction ID : B1E9FBF647FD44A0994E

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

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