

**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

MCCONKEY FOR CONGRESS

ADDRESS (number and street)

PO BOX 147



Check if different than previously reported. (ACC)

NEW HILL

NC

27562

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00833889

3. IS THIS REPORT

☐ NEW (N)

OR

☒ AMENDED (A)

STATE ▼ DISTRICT

NC

13

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y
03 / 05 / 2024

in the State of

NC

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
01 / 01 / 2024

through

M M / D D / Y Y Y Y
02 / 14 / 2024

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 KELLEY, JINGER, , ,

Signature of Treasurer

KELLEY, JINGER, , ,

Date

M M / D D / Y Y Y Y
06 / 16 / 2024

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

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

MCCONKEY FOR CONGRESS

Report Covering the Period: From: 01 / 01 / 2024 To: 02 / 14 / 2024

	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))	22780.25	234952.42
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	22780.25	234952.42
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	284176.88	416264.27
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	284176.88	416264.27
8. Cash on Hand at Close of Reporting Period (from Line 27)	68700.30	
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)	250100.00	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

MCCONKEY FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2024

To:

MM / DD / YYYY
02 / 14 / 2024**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).....

12105.00

216521.91

(ii) Unitemized

675.25

6382.51

(iii) TOTAL of contributions
from individuals ▶

12780.25

222904.42

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

10000.00

12000.00

(d) The Candidate

0.00

48.00

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

22780.25

234952.42

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

0.00

250000.00

(b) All Other Loans.....

0.00

0.00

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

0.00

250000.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS
(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

22780.25

484952.42

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	284176.88	416264.27
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	284176.88	416264.27

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	330096.93
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	22780.25
25. SUBTOTAL (add Line 23 and Line 24).....	352877.18
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	284176.88
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	68700.30

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

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☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

BARTLETT, BRUCE, , ,

A.

Mailing Address 6853 AVENIDA LAS PERLAS

City

RANCHO SANTA FE

State

CA

Zip Code

92067

FEC ID number of contributing
federal political committee.

C

Name of Employer

BARTLETT GROUP

Occupation

TREASURER

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

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

Transaction ID : SA11AI.4891

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BENNETT, SARA, LEE, ,

B.

Mailing Address 431 E SECOND ST

City

OCEAN ISLE BEACH

State

NC

Zip Code

28469

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11AI.4961

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DIGIORGIO, ANTHONY, , ,

C.

Mailing Address 111 REED BLVD

City

MILL VALLEY

State

CA

Zip Code

94941

FEC ID number of contributing
federal political committee.

C

Name of Employer

UCSF

Occupation

NEUROSURGEON

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	8		2	0	2	4

Transaction ID : SA11AI.4898

Amount of Each Receipt this Period

1000.00

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

5300.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

ESCOVER, JOHN, , ,

A.

Mailing Address 114 SILVERSTONE DR

City

GEORGETOWN

State

TX

Zip Code

78633

FEC ID number of contributing
federal political committee.

C

Name of Employer
LAW OFFICES OF JOHN ESCOVEROccupation
ATTORNEY

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.4900

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

EVANS, FRED, W, ,

B.

Mailing Address 4949 TRIPLE T RD

City

STANLEY

State

ND

Zip Code

58784

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
RANCHER

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	8		2	0	2	4

Transaction ID : SA11AI.4963

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FALVEY, PATRICK, , ,

C.

Mailing Address 404 ELECTRA DR

City

CARY

State

NC

Zip Code

27513

FEC ID number of contributing
federal political committee.

C

Name of Employer
DUKE MEDICAL CENTEROccupation
NURSE

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	7		2	0	2	4

Transaction ID : SA11AI.4902

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

2750.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

FERRIS, MAXINE, , ,

A.

Mailing Address 11312 OLD CREEDMOOR RD

City

RALEIGH

State

NC

Zip Code

27613

FEC ID number of contributing
federal political committee.

C

Name of Employer

ALLEN AESTHETIC SURGERY

Occupation

PRACTICE MANAGER

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	6		2	0	2	4

Transaction ID : SA11AI.4905

Amount of Each Receipt this Period

50.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

HALL, BLAINE, , ,

Mailing Address 2104 CROSSWAY LN

City

HOLLY SPRINGS

State

NC

Zip Code

27540

FEC ID number of contributing
federal political committee.

C

Name of Employer

BLAINE'S BARBER SHOP

Occupation

BARBER

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	2	4

Transaction ID : SA11AI.4953

Amount of Each Receipt this Period

30.00



Memo Item

In-kind - CANDIDATE HAIRCUT

C.

Full Name (Last, First, Middle Initial)

HALL, BLAINE, , ,

Mailing Address 2104 CROSSWAY LN

City

HOLLY SPRINGS

State

NC

Zip Code

27540

FEC ID number of contributing
federal political committee.

C

Name of Employer

BLAINE'S BARBER SHOP

Occupation

BARBER

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

330.00

Date of Receipt

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

Transaction ID : SA11AI.4954

Amount of Each Receipt this Period

30.00



Memo Item

In-kind - CANDIDATE HAIRCUT

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

110.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

HALL, BLAINE, , ,

A. Mailing Address 2104 CROSSWAY LN

City
HOLLY SPRINGSState
NCZip Code
27540FEC ID number of contributing
federal political committee.

C

Name of Employer
BLAINE'S BARBER SHOPOccupation
BARBER

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 22 2024

Transaction ID : SA11AI.4957

Amount of Each Receipt this Period

30.00

☐ Memo Item

In-kind - CANDIDATE HAIRCUT

Full Name (Last, First, Middle Initial)

HALL, BLAINE, , ,

B. Mailing Address 2104 CROSSWAY LN

City
HOLLY SPRINGSState
NCZip Code
27540FEC ID number of contributing
federal political committee.

C

Name of Employer
BLAINE'S BARBER SHOPOccupation
BARBER

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 02 2024

Transaction ID : SA11AI.4959

Amount of Each Receipt this Period

30.00

☐ Memo Item

In-kind - CANDIDATE HAIRCUT

Full Name (Last, First, Middle Initial)

HALL, BLAINE, , ,

C. Mailing Address 2104 CROSSWAY LN

City
HOLLY SPRINGSState
NCZip Code
27540FEC ID number of contributing
federal political committee.

C

Name of Employer
BLAINE'S BARBER SHOPOccupation
BARBER

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 12 2024

Transaction ID : SA11AI.4960

Amount of Each Receipt this Period

30.00

☐ Memo Item

In-kind - CANDIDATE HAIRCUT

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

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

90.00

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

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

KELLY, JOSEPH, , ,

A.

Mailing Address 173 RAINBOW DR

City

LIVINGSTON

State

TX

Zip Code

77399

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

355.00

Date of Receipt

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

Transaction ID : SA11AI.4969

Amount of Each Receipt this Period

355.00

☐ Memo Item

CONTRIBUTION EARMARKED THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

903.00

Date of Receipt

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

Transaction ID : SA11AI.4969.0

Amount of Each Receipt this Period

355.00

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. LIMIT
NOT AFFECTED

Full Name (Last, First, Middle Initial)

MCCANN, PETER, , ,

C.

Mailing Address PO BOX 416

City

GROVEPORT

State

OH

Zip Code

44125

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

RE DEVELOPER

Receipt For: 2024

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11AI.4973

Amount of Each Receipt this Period

1000.00

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

1355.00

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

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

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NAME OF COMMITTEE (In Full)

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

MITCHELL, BEN, , ,

A.

Mailing Address 2062 BLUE YONDER DR

City

FORT COLLINS

State

CO

Zip Code

80525

FEC ID number of contributing
federal political committee.

C

Name of Employer
VIGILINTOccupation
PHYSICIAN

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	2	4

Transaction ID : SA11AI.4975

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RIBLETT, DUSTIN, , ,

B.

Mailing Address 1630 SW 26TH ST

City

LINCOLN

State

NE

Zip Code

68522

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.4909

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SPENCE, CORINNE, , ,

C.

Mailing Address 2921 LAUREL DR

City

SACRAMENTO

State

CA

Zip Code

95864

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	2	4

Transaction ID : SA11AI.4913

Amount of Each Receipt this Period

1500.00

☐ Memo Item

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

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

2000.00

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

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

SUTLIFF, GREG, , ,

A.

Mailing Address 700 CREEK RD

City

CAMP HILL

State

PA

Zip Code

17011

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 09 / 2024

Transaction ID : SA11AI.4915

Amount of Each Receipt this Period

500.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

500.00

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

12105.00

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

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☐ 11a	☐ 11b	☒ 11c	☐ 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

HEALTHCARE FREEDOM FUND

A.

Mailing Address PO BOX 2485

City

SPRINGFIELD

State

VA

Zip Code

22152

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

C00528414

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	0		2	0	2	4

Transaction ID : SA11C.4919

Amount of Each Receipt this Period

5000.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

HEALTHCARE FREEDOM FUND

Mailing Address PO BOX 2485

City

SPRINGFIELD

State

VA

Zip Code

22152

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

C00528414

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Runoff

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	0		2	0	2	4

Transaction ID : SA11C.4920

Amount of Each Receipt this Period

5000.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

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

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period



Memo Item

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

10000.00

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

10000.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AM STRATEGIES

Mailing Address 1455 PENNSYLVANIA AVE NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		24		2024

City
WASHINGTONState
DCZip Code
20004

FEC Identification Number

C	C00833889
---	-----------

Purpose of Disbursement
FUNDRAISING CONSULTING

001

Amount of Each Disbursement this Period

5000.00

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Transaction ID : SB17.4851

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AM STRATEGIES

Mailing Address 1455 PENNSYLVANIA AVE NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		30		2024

City
WASHINGTONState
DCZip Code
20004

FEC Identification Number

C	C00833889
---	-----------

Purpose of Disbursement
DIRECT MAIL SERVICES

003

Amount of Each Disbursement this Period

25123.04

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Transaction ID : SB17.4852

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AM STRATEGIES

Mailing Address 1455 PENNSYLVANIA AVE NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		06		2024

City
WASHINGTONState
DCZip Code
20004

FEC Identification Number

C	C00833889
---	-----------

Purpose of Disbursement
GOTV TEXTS

001

Amount of Each Disbursement this Period

1982.76

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Transaction ID : SB17.4921

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

32105.80

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

SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ANEDOT, INCMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CC PROCESSING FEES - JAN

001

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M M / D D / Y Y Y Y
01 / 31 / 2024

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

288.81

Transaction ID : SB17.4853

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT, INCMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CC PROCESSING FEES - FEB

001

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M M / D D / Y Y Y Y
02 / 14 / 2024

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

68.50

Transaction ID : SB17.4922

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ASCENT STRATEGIC INC

Mailing Address 5382 N HWY 36

City
ERDAState
UTZip Code
87074Purpose of Disbursement
GOTV DOOR-TO-DOOR

001

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M M / D D / Y Y Y Y
01 / 03 / 2024

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

40000.00

Transaction ID : SB17.4854

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

40357.31

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

SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ASCENT STRATEGIC INC

Mailing Address 5382 N HWY 36

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		06		2024

City
ERDAState
UTZip Code
87074

FEC Identification Number

C	C00833889
---	-----------

Purpose of Disbursement
GOTV DOOR-TO-DOOR

001

Amount of Each Disbursement this Period

40000.00

Transaction ID : SB17.4923

☐ Memo ItemCandidate Name
MCCONKEY FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

State: NC

District: 13

Full Name (Last, First, Middle Initial)

B. GEORGETOWN ADVISORY

Mailing Address 414 SAYRE DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		02		2024

City
PRINCETONState
NJZip Code
08540

FEC Identification Number

C	C00833889
---	-----------

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

001

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB17.4856

☐ Memo ItemCandidate Name
MCCONKEY FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

State: NC

District: 13

Full Name (Last, First, Middle Initial)

C. GEORGETOWN ADVISORY

Mailing Address 414 SAYRE DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		29		2024

City
PRINCETONState
NJZip Code
08540

FEC Identification Number

C	C00833889
---	-----------

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

001

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB17.4857

☐ Memo ItemCandidate Name
MCCONKEY FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

State: NC

District: 13

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

60000.00

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

SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. HALL, BLAINE, , ,

Mailing Address 2104 CROSSWAY LN

City
HOLLY SPRINGSState
NCZip Code
27540Purpose of Disbursement
In-kind - CANDIDATE HAIRCUT

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.4956

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HALL, BLAINE, , ,

Mailing Address 2104 CROSSWAY LN

City
HOLLY SPRINGSState
NCZip Code
27540Purpose of Disbursement
In-kind - CANDIDATE HAIRCUT

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.4955

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HALL, BLAINE, , ,

Mailing Address 2104 CROSSWAY LN

City
HOLLY SPRINGSState
NCZip Code
27540Purpose of Disbursement
In-kind - CANDIDATE HAIRCUT

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.4958

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

90.00

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

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

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. HALL, BLAINE, , ,

Mailing Address 2104 CROSSWAY LN

City
HOLLY SPRINGSState
NCZip Code
27540Purpose of Disbursement
In-kind - CANDIDATE HAIRCUT

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.4984

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HALL, BLAINE, , ,

Mailing Address 2104 CROSSWAY LN

City
HOLLY SPRINGSState
NCZip Code
27540Purpose of Disbursement
In-kind - CANDIDATE HAIRCUT

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.4983

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HISPANOS DEL SURMailing Address 4904 WATERS EDGE DR
STE 152City
RALEIGHState
NCZip Code
27606Purpose of Disbursement
GOTV TEXTS

Candidate Name

MCCONKEY FOR CONGRESS

Office Sought:

☒	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State: NC

District: 13

Date of Disbursement

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

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

325.00

Transaction ID : SB17.4925

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

385.00

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

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

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. INTERNATIONAL MINUTE PRESSMailing Address 8450 CHAPEL HILL RD
STE 101City
CARYState
NCZip Code
27513Purpose of Disbursement
PRINTING

001

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M M / D D / Y Y Y Y
01 / 08 / 2024

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

212.72

Transaction ID : SB17.4858

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. INTERNATIONAL MINUTE PRESSMailing Address 8450 CHAPEL HILL RD
STE 101City
CARYState
NCZip Code
27513Purpose of Disbursement
PRINTING

001

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M M / D D / Y Y Y Y
01 / 11 / 2024

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

212.71

Transaction ID : SB17.4859

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. J-BOOKS SERVICES, INC

Mailing Address 236 SUMMERHOUSE POINT

City
NORWOODState
NCZip Code
28128Purpose of Disbursement
COMPLIANCE REPORTING

001

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M M / D D / Y Y Y Y
02 / 05 / 2024

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

112.50

Transaction ID : SB17.4928

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

537.93

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

SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. JOHNSTON NOW MAGAZINEMailing Address A SHADY COMMUNICATIONS PUBLICATION
1300 W MARKET STCity
SMITHFIELDState
NCZip Code
27577Purpose of Disbursement
AD BUY

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M M / D D / Y Y Y Y
01 / 10 / 2024

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

1325.00

Transaction ID : SB17.4860

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KEHOE, MICHAEL, , ,

Mailing Address 82 WATCHTOWER RD

City
CONTOOCOOKState
NHZip Code
03229Purpose of Disbursement
SALARY

001

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M M / D D / Y Y Y Y
01 / 02 / 2024

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

2838.71

Transaction ID : SB17.4878

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KEHOE, MICHAEL, , ,

Mailing Address 82 WATCHTOWER RD

City
CONTOOCOOKState
NHZip Code
03229Purpose of Disbursement
SALARY

001

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M M / D D / Y Y Y Y
02 / 01 / 2024

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

5500.00

Transaction ID : SB17.4942

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

9663.71

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

SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MAX OUT SOLUTIONS

Mailing Address 132 THORNTON CT

City
ST AUGUSTINEState
FLZip Code
32092Purpose of Disbursement
FUNDRAISING CONSULTING

003

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	2	4

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.4862

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. META PLATFORMS INC

Mailing Address 1601 WILLOW RD

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL ADVERTISING

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	6		2	0	2	4

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.4864

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. META PLATFORMS INC

Mailing Address 1601 WILLOW RD

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL ADVERTISING

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	8		2	0	2	4

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.4865

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

1200.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. META PLATFORMS INC

Mailing Address 1601 WILLOW RD

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL ADVERTISING

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	9		2	0	2	4

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

26.50

Transaction ID : SB17.4866

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. META PLATFORMS INC

Mailing Address 1601 WILLOW RD

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL ADVERTISING

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

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

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.4867

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. META PLATFORMS INC

Mailing Address 1601 WILLOW RD

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL ADVERTISING

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

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

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.4868

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

226.50

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. META PLATFORMS INC

Mailing Address 1601 WILLOW RD

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL ADVERTISING

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	2	4

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.4869

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. META PLATFORMS INC

Mailing Address 1601 WILLOW RD

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL ADVERTISING

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

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

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.4870

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. META PLATFORMS INC

Mailing Address 1601 WILLOW RD

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL ADVERTISING

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	6		2	0	2	4

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.4871

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

300.00

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. META PLATFORMS INC

Mailing Address 1601 WILLOW RD

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL ADVERTISING

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M M / D D / Y Y Y Y
01 / 18 / 2024

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.4872

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. META PLATFORMS INC

Mailing Address 1601 WILLOW RD

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL ADVERTISING

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M M / D D / Y Y Y Y
01 / 21 / 2024

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.4873

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. META PLATFORMS INC

Mailing Address 1601 WILLOW RD

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL ADVERTISING

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M M / D D / Y Y Y Y
01 / 27 / 2024

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.4874

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

300.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. META PLATFORMS INC

Mailing Address 1601 WILLOW RD

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL ADVERTISING

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	8		2	0	2	4

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.4875

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. META PLATFORMS INC

Mailing Address 1601 WILLOW RD

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL ADVERTISING

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	9		2	0	2	4

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.4876

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. META PLATFORMS INC

Mailing Address 1601 WILLOW RD

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL ADVERTISING

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	0		2	0	2	4

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.4877

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

300.00

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. META PLATFORMS INC

Mailing Address 1601 WILLOW RD

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL ADVERTISING

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

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

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.4930

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. META PLATFORMS INC

Mailing Address 1601 WILLOW RD

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL ADVERTISING

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	2	4

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.4931

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. META PLATFORMS INC

Mailing Address 1601 WILLOW RD

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL ADVERTISING

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

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

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.4933

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

600.00

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

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

PAGE 26 OF 35

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

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NAME OF COMMITTEE (In Full)

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. META PLATFORMS INC

Mailing Address 1601 WILLOW RD

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL ADVERTISING

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	2	4

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.4934

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. META PLATFORMS INC

Mailing Address 1601 WILLOW RD

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL ADVERTISING

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	6		2	0	2	4

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.4935

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. META PLATFORMS INC

Mailing Address 1601 WILLOW RD

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL ADVERTISING

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	2	4

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.4936

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

600.00

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

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

PAGE 27 OF 35

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

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NAME OF COMMITTEE (In Full)

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. META PLATFORMS INC

Mailing Address 1601 WILLOW RD

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL ADVERTISING

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M M / D D / Y Y Y Y
02 / 08 / 2024

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.4937

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. META PLATFORMS INC

Mailing Address 1601 WILLOW RD

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL ADVERTISING

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M M / D D / Y Y Y Y
02 / 09 / 2024

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

253.15

Transaction ID : SB17.4938

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. META PLATFORMS INC

Mailing Address 1601 WILLOW RD

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL ADVERTISING

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M M / D D / Y Y Y Y
02 / 10 / 2024

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.4939

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

453.15

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

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

PAGE 28 OF 35

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

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NAME OF COMMITTEE (In Full)

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. META PLATFORMS INC

Mailing Address 1601 WILLOW RD

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL ADVERTISING

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

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

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.4940

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. META PLATFORMS INC

Mailing Address 1601 WILLOW RD

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL ADVERTISING

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	3		2	0	2	4

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.4941

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. READYGOP LLC

Mailing Address 5100 MAIN ST

City
KANSAS CITYState
MOZip Code
64112Purpose of Disbursement
GOTV PHONE CALLS

001

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	2	4

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

1627.56

Transaction ID : SB17.4943

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

1927.56

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

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

PAGE 29 OF 35

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

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NAME OF COMMITTEE (In Full)

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SLASH STRATEGY LLC

Mailing Address 1107 POTOMAC LN

City
ALEXANDRIAState
VAZip Code
22308Purpose of Disbursement
FUNDRAISING COMMISSION

003

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	8		2	0	2	4

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

13388.44

Transaction ID : SB17.4946

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SMART MEDIA GROUP, LLC

Mailing Address PO BOX 26067

City
ALEXANDRIAState
VAZip Code
22313Purpose of Disbursement
TV AD BUY

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	6		2	0	2	4

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

14500.00

Transaction ID : SB17.4880

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SMART MEDIA GROUP, LLC

Mailing Address PO BOX 26067

City
ALEXANDRIAState
VAZip Code
22313Purpose of Disbursement
TV AD BUY

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	2	4

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

22863.40

Transaction ID : SB17.4884

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

50751.84

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

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

PAGE 30 OF 35

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

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NAME OF COMMITTEE (In Full)

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SMART MEDIA GROUP, LLC

Mailing Address PO BOX 26067

City
ALEXANDRIAState
VAZip Code
22313Purpose of Disbursement
TV AD BUY

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	9		2	0	2	4

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

23735.00

Transaction ID : SB17.4948

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SMART MEDIA GROUP, LLC

Mailing Address PO BOX 26067

City
ALEXANDRIAState
VAZip Code
22313Purpose of Disbursement
TV AD BUY

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

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

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

59135.00

Transaction ID : SB17.4948

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SUMMITT PRINTING INCMailing Address 800 E 101 TERR
STE 350City
KANSAS CITYState
MOZip Code
64131Purpose of Disbursement
PRINTING YARD SIGNS

004

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

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

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

1227.14

Transaction ID : SB17.4885

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

84097.14

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

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

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

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)

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. TWITTER INCMailing Address 1355 MARKET ST
STE 900City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
SUBSCRIPTION

001

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	5	/	2	0	2	4

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

8.00

Transaction ID : SB17.4888

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 112 3RD ST

City
HOLLY SPRINGSState
NCZip Code
27540Purpose of Disbursement
POSTAGE

001

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

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

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

138.35

Transaction ID : SB17.4950

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
STE 530City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
COST OF MERCHANDISE

001

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

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

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

67.00

Transaction ID : SB17.4951

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

213.35

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

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

PAGE 32 OF 35

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCCONKEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
STE 530City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
CC PROCESSING FEES

001

Candidate Name
MCCONKEY FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		11		2024

FEC Identification Number

C C00833889

Amount of Each Disbursement this Period

13.99

Transaction ID : SB17.4952

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

13.99

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

284123.28

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

PAGE 33 OF 35

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4116

MCCONKEY FOR CONGRESS

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

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼

MCCONKEY, JOSH, , ,

Mailing Address

PO BOX 147

City

NEW HILL

State

NC

ZIP Code

27562

☒ Personal Funds of the Candidate

Original Amount of Loan

100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100.00

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
11 / 22 / 2021

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

100.00

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

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

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

PAGE 34 OF 35

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4105

MCCONKEY FOR CONGRESS

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

MCCONKEY, JOSH, , ,

Mailing Address

PO BOX 147

City

NEW HILL

State

NC

ZIP Code

27562

☒ Personal Funds of the Candidate

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 / 24 / 2023

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

50000.00

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

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

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

PAGE 35 OF 35

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4364

MCCONKEY FOR CONGRESS

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

MCCONKEY, JOSH, , ,

Mailing Address

PO BOX 147

City

NEW HILL

State

NC

ZIP Code

27562

☒ Personal Funds of the Candidate

Original Amount of Loan

200000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

200000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
06 16 / 2023

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

200000.00

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

250100.00

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