

**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

KIM KLACIK FOR CONGRESS

ADDRESS (number and street)

9618 MAXWELL ROAD



Check if different than previously reported. (ACC)

MIDDLE RIVER

MD

21220

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00726117

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

MD

07

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
04 / 01 / 2022

through

M M / D D / Y Y Y Y
06 / 30 / 2022

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

CRATE, BRADLEY, T., MR.,

Type or Print Name of Treasurer

Signature of Treasurer

CRATE, BRADLEY, T., MR.,

[Electronically Filed]

Date

M M / D D / Y Y Y Y
07 / 15 / 2022

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 05/2016)

PAGE 2 / 15

Write or Type Committee Name
KIM KLACIK FOR CONGRESS

Report Covering the Period:

From:

M M / D D / Y Y Y Y
04 / 01 / 2022

To:

M M / D D / Y Y Y Y
06 / 30 / 2022

	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))....	0.00	8248646.13
(b) Total Contribution Refunds (from Line 20(d))	0.00	51847.12
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	8196799.01
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	156724.74	7909748.83
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	6246.18
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	156724.74	7903502.65
8. Cash on Hand at Close of Reporting Period (from Line 27)	180740.56	
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)	32680.00	

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

PAGE 3 / 15

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

KIM KLACIK FOR CONGRESS

Report Covering the Period:

From:

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

To:

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

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).....

0.00

2810585.99

(ii) Unitemized

0.00

5416886.14

(iii) TOTAL of contributions
from individuals ▶

0.00

8227472.13

(b) Political Party Committees.....

0.00

1000.00

(c) Other Political Committees
(such as PACs)

0.00

20174.00

(d) The Candidate

0.00

0.00

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

0.00

8248646.13

**12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES**

0.00

0.00

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.)**

0.00

6246.18

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

0.00

76.20

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

0.00

8254968.51

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 15

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	156724.74	7909748.83
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	51847.12
(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	51847.12
21. OTHER DISBURSEMENTS	10000.00	112632.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	166724.74	8074227.95

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	347465.30
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	347465.30
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	166724.74
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	180740.56

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

PAGE 5 OF 15

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

KIM KLACIK FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. 2205 YORK ROAD LLCMailing Address 100 W. PENNSYLVANIA AVENUE
SUITE 200City
TOWSONState
MDZip Code
21204Purpose of Disbursement
RENT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		31		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

2964.00

Transaction ID : SB17.19748

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AMAZON

Mailing Address 440 TERRY AVE N

City
SEATTLEState
WAZip Code
98109Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

1.99

Transaction ID : SB17.19749

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AMAZON

Mailing Address 440 TERRY AVE N

City
SEATTLEState
WAZip Code
98109Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

1.99

Transaction ID : SB17.19782

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

2967.98

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)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

KIM KLACIK FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. BB&T BANK

Mailing Address 200 W 2ND ST

City
WINSTON SALEM

State
NC

Zip Code
27101

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 21 / 2022

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.19750

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BB&T BANK

Mailing Address 200 W 2ND ST

City
WINSTON SALEM

State
NC

Zip Code
27101

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 23 / 2022

FEC Identification Number

C

Amount of Each Disbursement this Period

35.00

Transaction ID : SB17.19751

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BB&T BANK

Mailing Address 200 W 2ND ST

City
WINSTON SALEM

State
NC

Zip Code
27101

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 21 / 2022

FEC Identification Number

C

Amount of Each Disbursement this Period

15.00

Transaction ID : SB17.19783

☐ Memo Item

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

100.00

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 PageFOR LINE NUMBER:
(check only one)

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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

KIM KLACIK FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. COMCAST

Mailing Address 1701 JFK BOULEVARD

City
PHILADELPHIAState
PAZip Code
19103Purpose of Disbursement
BROADBAND SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		18		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

332.27

Transaction ID : SB17.19754

☐ Memo Item**B. COMCAST**

Mailing Address 1701 JFK BOULEVARD

City
PHILADELPHIAState
PAZip Code
19103Purpose of Disbursement
BROADBAND SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		17		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

332.14

Transaction ID : SB17.19755

☐ Memo Item**C. COMCAST**

Mailing Address 1701 JFK BOULEVARD

City
PHILADELPHIAState
PAZip Code
19103Purpose of Disbursement
BROADBAND SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		17		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

332.14

Transaction ID : SB17.19784

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

996.55

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

KIM KLACIK FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CONSTANT CONTACT

Mailing Address 1601 TRAPELO ROAD

City
WALTHAMState
MAZip Code
02451Purpose of Disbursement
SOFTWARE SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

132.50

Transaction ID : SB17.19756

☐ Memo Item**B. CONSTANT CONTACT**

Mailing Address 1601 TRAPELO ROAD

City
WALTHAMState
MAZip Code
02451Purpose of Disbursement
SOFTWARE SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

132.50

Transaction ID : SB17.19757

☐ Memo Item**C. CONSTANT CONTACT**

Mailing Address 1601 TRAPELO ROAD

City
WALTHAMState
MAZip Code
02451Purpose of Disbursement
SOFTWARE SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

132.50

Transaction ID : SB17.19785

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

397.50

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 PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

KIM KLACIK FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DICKINSON WRIGHT PLLCMailing Address 1825 EYE STREET, N.W.
SUITE 900City
WASHINGTONState
DCZip Code
20006Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		13		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

126806.72

Transaction ID : SB17.19758

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GODADDY.COMMailing Address 14455 N. HAYDEN ED
#219City
SCOTTSDALEState
AZZip Code
85260Purpose of Disbursement
WEB HOSTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		11		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

21.99

Transaction ID : SB17.19759

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GODADDY.COMMailing Address 14455 N. HAYDEN ED
#219City
SCOTTSDALEState
AZZip Code
85260Purpose of Disbursement
WEB HOSTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		11		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

21.99

Transaction ID : SB17.19760

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

126850.70

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

KIM KLACIK FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GODADDY.COMMailing Address 14455 N. HAYDEN ED
#219City
SCOTTSDALEState
AZZip Code
85260Purpose of Disbursement
WEB HOSTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

24.99

Transaction ID : SB17.19786

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GODADDY.COMMailing Address 14455 N. HAYDEN ED
#219City
SCOTTSDALEState
AZZip Code
85260Purpose of Disbursement
WEB HOSTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

94.99

Transaction ID : SB17.19787

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. INTEGRATED SOLUTIONS: POLITICALMailing Address 4142 ADAMS AVENUE
SUITE 103-550City
SAN DIEGOState
CAZip Code
92116Purpose of Disbursement
SOFTWARE SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

770.00

Transaction ID : SB17.19763

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

889.98

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 PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

KIM KLACIK FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. INTEGRATED SOLUTIONS: POLITICALMailing Address 4142 ADAMS AVENUE
SUITE 103-550City
SAN DIEGOState
CAZip Code
92116Purpose of Disbursement
SOFTWARE SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

770.00

Transaction ID : SB17.19764

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. INTEGRATED SOLUTIONS: POLITICALMailing Address 4142 ADAMS AVENUE
SUITE 103-550City
SAN DIEGOState
CAZip Code
92116Purpose of Disbursement
SOFTWARE SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

770.00

Transaction ID : SB17.19789

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. IUBENDAMailing Address VIA SAN RAFFAELE
1-20121City
MILANState
ZZZip Code
99999Purpose of Disbursement
SOFTWARE SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

57.00

Transaction ID : SB17.19765

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

1597.00

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 PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

KIM KLACIK FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. IUBENDAMailing Address VIA SAN RAFFAELE
1-20121City
MILANState
ZZZip Code
99999Purpose of Disbursement
SOFTWARE SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		03		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

57.00

Transaction ID : SB17.19766

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. IUBENDAMailing Address VIA SAN RAFFAELE
1-20121City
MILANState
ZZZip Code
99999Purpose of Disbursement
SOFTWARE SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

57.00

Transaction ID : SB17.19790

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement 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).....▶

114.00

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

133913.71

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

PAGE 13 OF 15

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

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NAME OF COMMITTEE (In Full)

KIM KLACIK FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ANTONIO PITOCOCCO FOR CONGRESS

Mailing Address PO BOX 5154

City
ANNAPOLISState
MDZip Code
21403Purpose of Disbursement
FEDERAL CONTRIBUTION

Candidate Name

PITOCCO, ANTONIO, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: MD

District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	2	2

FEC Identification Number

C C00771162

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.19775

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANTONIO PITOCOCCO FOR CONGRESS

Mailing Address PO BOX 5154

City
ANNAPOLISState
MDZip Code
21403Purpose of Disbursement
FEDERAL CONTRIBUTION

Candidate Name

PITOCCO, ANTONIO, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: MD

District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	2	2

FEC Identification Number

C C00771162

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.19776

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JAROME BELL FOR CONGRESS

Mailing Address PO BOX 6775

City
VIRGINIA BEACHState
VAZip Code
23456Purpose of Disbursement
FEDERAL CONTRIBUTION

Candidate Name

BELL, JAROME, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: VA

District: 02

Date of Disbursement

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

FEC Identification Number

C C00725267

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.19778

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

6000.00

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)

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

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NAME OF COMMITTEE (In Full)

KIM KLACIK FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. REGINA MAURO FOR CONGRESS

Mailing Address PO BOX 56

City
DEVON

State
PA

Zip Code
19333

Purpose of Disbursement
FEDERAL CONTRIBUTION

Candidate Name

MAURO, REGINA, , ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: PA

District: 06

Date of Disbursement

M M / D D / Y Y Y Y
04 / 14 / 2022

FEC Identification Number

C C00801183

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.19780

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. REGINA MAURO FOR CONGRESS

Mailing Address PO BOX 56

City
DEVON

State
PA

Zip Code
19333

Purpose of Disbursement
FEDERAL CONTRIBUTION

Candidate Name

MAURO, REGINA, , ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: PA

District: 06

Date of Disbursement

M M / D D / Y Y Y Y
04 / 14 / 2022

FEC Identification Number

C C00801183

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.19781

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

4000.00

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

10000.00

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 15 OF 15

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

KIM KLACIK FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

DICKINSON WRIGHT PLLC

Nature of Debt (Purpose):

LEGAL CONSULTING

Mailing Address 1825 EYE STREET, N.W.
SUITE 900City
WASHINGTONState
DCZip Code
20006

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.19799

Amount Incurred This Period

32680.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

32680.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)

32680.00

2) **TOTALS** This Period (last page this line number only)

32680.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

32680.00