

**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

Conroy for Congress

ADDRESS (number and street)

PO Box 906

Check if different
than previously
reported. (ACC)

Spokane

WA

99201

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

C00849794

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

WA

05

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
11 / 26 / 2024

through

M M / D D / Y Y Y Y
12 / 31 / 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

Bennett, Jason, , ,

Signature of Treasurer

Bennett, Jason, , ,

Date

M M / D D / Y Y Y Y
03 / 24 / 2025

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

Conroy for Congress

Report Covering the Period:

From:

M M / D D / Y Y Y Y
11 / 26 / 2024

To:

M M / D D / Y Y Y Y
12 / 31 / 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))	692.00	3615.00
(b) Total Contribution Refunds (from Line 20(d))	20.00	20.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	672.00	3595.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	17355.29	27532.17
(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))	17355.29	27532.17
8. Cash on Hand at Close of Reporting Period (from Line 27)	13141.59	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information, contact 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

Conroy for Congress

Report Covering the Period:

From:

M M / D D / Y Y Y Y
11 / 26 / 2024

To:

M M / D D / Y Y Y Y
12 / 31 / 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).....

0.00

761.00

(ii) Unitemized

692.00

1854.00

(iii) TOTAL of contributions
from individuals ▶

692.00

2615.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

1000.00

(d) The Candidate

0.00

0.00

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

692.00

3615.00

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

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)..... ▶

692.00

3615.00

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.....	17355.29	27532.17
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	20.00	20.00
(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)).....	20.00	20.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	17375.29	27552.17

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	29824.88
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	692.00
25. SUBTOTAL (add Line 23 and Line 24).....	30516.88
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	17375.29
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	13141.59

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)

Conroy for Congress

Full Name (Last, First, Middle Initial)

A. ActBlue

Mailing Address P.O. Box 441146

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		27		2024

City
SomervilleState
MAZip Code
02144

FEC Identification Number

C

Purpose of Disbursement
credit card fees

001

Amount of Each Disbursement this Period

11.16

Candidate Name
ActBlueCategory/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

Transaction ID : B-10664

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

B. ActBlue

Mailing Address P.O. Box 441146

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		29		2024

City
SomervilleState
MAZip Code
02144

FEC Identification Number

C

Purpose of Disbursement
credit card fees

001

Amount of Each Disbursement this Period

4.91

Candidate Name
ActBlueCategory/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

Transaction ID : B-10668

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

C. ActBlue

Mailing Address P.O. Box 441146

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		04		2024

City
SomervilleState
MAZip Code
02144

FEC Identification Number

C

Purpose of Disbursement
credit card fees

001

Amount of Each Disbursement this Period

20.08

Candidate Name
ActBlueCategory/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

Transaction ID : B-10684

☐ Memo Item

State:

District:

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

36.15

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)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Conroy for Congress

Full Name (Last, First, Middle Initial)

A. ActBlue

Mailing Address P.O. Box 441146

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		18		2024

City
SomervilleState
MAZip Code
02144

FEC Identification Number

C

Purpose of Disbursement
credit card fees

001

Amount of Each Disbursement this Period

0.49

Candidate Name
ActBlueCategory/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

Transaction ID : B-10695

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

B. ActBlue

Mailing Address P.O. Box 441146

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		26		2024

City
SomervilleState
MAZip Code
02144

FEC Identification Number

C

Purpose of Disbursement
credit card fees

001

Amount of Each Disbursement this Period

6.05

Candidate Name
ActBlueCategory/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

Transaction ID : B-10699

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

C. Argo Strategies

Mailing Address 5606 14th Ave W

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		26		2024

City
SeattleState
WAZip Code
98107

FEC Identification Number

C

Purpose of Disbursement
treasury compliance fee

001

Amount of Each Disbursement this Period

2500.00

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☐	Primary	☒	General
☐	Other (specify) ▼		

Transaction ID : B-10637

☐ Memo Item

State:

District:

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

2506.54

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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NAME OF COMMITTEE (In Full)

Conroy for Congress

Full Name (Last, First, Middle Initial)

A. Argo Strategies

Mailing Address 5606 14th Ave W

City
SeattleState
WAZip Code
98107Purpose of Disbursement
treasury compliance fee

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : B-10638

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Argo Strategies

Mailing Address 5606 14th Ave W

City
SeattleState
WAZip Code
98107Purpose of Disbursement
treasury compliance fee

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : B-10701

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BlackWalsh Consulting

Mailing Address 1221 West Riverside Avenue

City
SpokaneState
WAZip Code
99201Purpose of Disbursement
consulting fee

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : B-10678

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

6500.00

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)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Conroy for Congress

Full Name (Last, First, Middle Initial)

A. Blue Wave Political PartnersMailing Address 401 2nd Avenue South
Suite 303City
SeattleState
WAZip Code
98104Purpose of Disbursement
digital fundraising fee

003

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3913.96

Transaction ID : B-10679

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Blue Wave Political PartnersMailing Address 401 2nd Avenue South
Suite 303City
SeattleState
WAZip Code
98104Purpose of Disbursement
email fees

003

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

47.83

Transaction ID : B-10702

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Conroy, Carmela, , ,

Mailing Address PO Box 906

City
SpokaneState
WAZip Code
99201Purpose of Disbursement
reimbursement; see breakdown

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

626.93

Transaction ID : B-10676

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

4588.72

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

Conroy for Congress

Full Name (Last, First, Middle Initial)

A. Dombrowski, Mary, , ,

Mailing Address 2228 West Mission Avenue

City
SpokaneState
WAZip Code
99201Purpose of Disbursement
payroll

001

Candidate Name

Category/
Type

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
1	1		2	9		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

724.71

Transaction ID : B-10660

☒ Memo Item MEMO: Subvendor of-Gusto

Full Name (Last, First, Middle Initial)

B. Gusto

Mailing Address 525 20th Street

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
payroll; see breakdown

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

724.71

Transaction ID : B-10659

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Gusto

Mailing Address 525 20th Street

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
payroll taxes

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

225.91

Transaction ID : B-10661

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

950.62

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Conroy for Congress

Full Name (Last, First, Middle Initial)

A. Gusto

Mailing Address 525 20th Street

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
payroll processing fee

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

114.76

Transaction ID : B-10685

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Gusto

Mailing Address 525 20th Street

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
payroll and w2 processing fee

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

237.26

Transaction ID : B-10700

☐ 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
Compliance software fee

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B-10686

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

852.02

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)

Conroy 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
Compliance software fee

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B-10696

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kirby, Stephen, , ,

Mailing Address 1088 South Napa Street

City
SpokaneState
WAZip Code
99202Purpose of Disbursement
website and technology fees

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

674.24

Transaction ID : B-10677

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Northwest CPA Group PLLCMailing Address 1333 Columbia Park Trail
Suite 120City
RichlandState
WAZip Code
99352Purpose of Disbursement
accounting services fee

001

Candidate Name

Category/
Type

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
1	1		2	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

288.00

Transaction ID : B-10672

☒ Memo Item MEMO: Debt Subvendor of Carmela Conrov**SUBTOTAL** of Disbursements This Page (optional).....▶

1174.24

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 12 OF 15

☒ 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)

Conroy for Congress

Full Name (Last, First, Middle Initial)

A. Northwest CPA Group PLLCMailing Address 1333 Columbia Park Trail
Suite 120City
RichlandState
WAZip Code
99352Purpose of Disbursement
accounting services fee

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

744.00

Transaction ID : B-10647

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

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

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).....▶

744.00

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

17352.29

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)

Conroy for Congress

Full Name (Last, First, Middle Initial)

A. Singleterry, Jan, , ,

Mailing Address 6817 N Belt St

City
SpokaneState
WAZip Code
99208Purpose of Disbursement
refund

010

Candidate Name

Category/
Type

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
1	2		0	3		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : B-10658

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

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

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).....▶

20.00

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

20.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE 14 OF 15

FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Conroy for Congress

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

Argo Strategies

Nature of Debt (Purpose):

treasury compliance fee

Mailing Address 5606 14th Ave W

City

Seattle

State

WA

Zip Code

98107

Outstanding Balance Beginning This Period

2500.00

Transaction ID : D-10590

Amount Incurred This Period

0.00

Payment This Period

2500.00

Outstanding Balance at Close of This Period

0.00

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

Argo Strategies

Nature of Debt (Purpose):

treasury compliance fee

Mailing Address 5606 14th Ave W

City

Seattle

State

WA

Zip Code

98107

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-10598

Amount Incurred This Period

2500.00

Payment This Period

2500.00

Outstanding Balance at Close of This Period

0.00

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

Argo Strategies

Nature of Debt (Purpose):

treasury compliance fee

Mailing Address 5606 14th Ave W

City

Seattle

State

WA

Zip Code

98107

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-10636

Amount Incurred This Period

2500.00

Payment This Period

2500.00

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

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

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)

Conroy for Congress

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

Conroy, Carmela, , ,

Nature of Debt (Purpose):

reimbursement; see breakdown

Mailing Address PO Box 906

City

Spokane

State

WA

Zip Code

99201

Outstanding Balance Beginning This Period

626.93

Transaction ID : D-10669

Amount Incurred This Period

0.00

Payment This Period

626.93

Outstanding Balance at Close of This Period

0.00

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

Kirby, Stephen, , ,

Nature of Debt (Purpose):

website and technology fees

Mailing Address 1088 South Napa Street

City

Spokane

State

WA

Zip Code

99202

Outstanding Balance Beginning This Period

674.24

Transaction ID : D-10674

Amount Incurred This Period

0.00

Payment This Period

674.24

Outstanding Balance at Close of This Period

0.00

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

Northwest CPA Group PLLC

Nature of Debt (Purpose):

accounting services fee

Mailing Address 1333 Columbia Park Trail
Suite 120

City

Richland

State

WA

Zip Code

99352

Outstanding Balance Beginning This Period

744.00

Transaction ID : D-10646

Amount Incurred This Period

0.00

Payment This Period

744.00

Outstanding Balance at Close of This Period

0.00

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

0.00

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

0.00

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

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