PAGE 1 / 29

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

PORIVI 3	For An Auth	orized Com	mittee	0	ffice Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	 -	cample: If typing, typ	e 12FE4M5	
Brock For Congress					1
ADDRESS (number and street)	PO Box 6611				
▼ Check if different					
than previously reported. (ACC)	Vacaville			CA 95	5696
2. FEC IDENTIFICATION N	UMBER ▼	CITY ▲		STATE ▲	ZIP CODE ▲
C C00807735		3. IS THIS REPORT	NEW (N) OF	AMENDED (A)	STATE ▼ DISTRICT CA O4 O4
4. TYPE OF REPORT (CH	noose One) (b)	12-Day PRF	-Election Report for	the:	
(a) Quarterly Reports:		12 Day THE			
April 15 Quarterly	Report (Q1)	Ш	Primary (12P)	General (120	G) Runoff (12R)
			Convention (12C)	Special (12S)
July 15 Quarterly l	Report (Q2)		M M / D	D / Y Y Y Y	in the
October 15 Quarte	erly Report (Q3)	Election on			State of
January 31 Year-E	nd Report (YE) (c)	30-Day POS	ST -Election Report fo	or the:	
		·П	General (30G)	Runoff (30R)	Special (30S)
			General (30G)	Hulloll (30H)	Special (303)
Termination Repor	t (TER)	Election on	M M / D	D / Y " Y " Y	in the State of
5. Covering Period	M / D D / Y	Y Y Y Y 2022	through	M M / D D / 30	Y Y Y Y Y 2022
I certify that I have examined to	Kiger, Robert, , ,	best of my kr	nowledge and belief	it is true, correct and c	complete.
	ver, Robert, , ,		[Electronically Filed]	Date 10	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false, erron	neous, or incomplete in	formation may	subject the person sign	gning 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

PAGE 2 / 29

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name Brock For Congress

2022 2022 09 30 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 2205.00 3612.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 2205.00 3612.00 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 4021.50 7921.38 (from Line 17) (b) Total Offsets to Operating 38.00 38.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 3983.50 7883.38 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 778.62 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 5050.00 Schedule C and/or Schedule D).....

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 05/2016)

PAGE 3 / 29

Write or Type Committee Name

07 09 01 2022 30 2022 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 1200.00 1950.00 (i) Itemized (use Schedule A)..... 1005.00 1662.00 (ii) Unitemized (iii) TOTAL of contributions 2205.00 3612.00 from individuals 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs)..... 0.00 0.00 The Candidate..... (d) TOTAL CONTRIBUTIONS (other than loans) 2205.00 3612.00 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES 13. LOANS: (a) Made or Guaranteed by the 1750.00 5050.00 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 1750.00 5050.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 38.00 38.00 (Refunds, Rebates, etc.) 15. OTHER RECEIPTS 0.00 0.00 (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) 3993.00 8700.00 (Carry Total to Line 24, page 4).....

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	4021.50	7921.38
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
	(I) D III D O III	0.00	0.00
	(b) Political Party Committees(c) Other Political Committees	, , ,	, 0.00
	(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)	4021.50	7921.38
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	RTING PERIOD	807.12
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	3993.00
25.	SUBTOTAL (add Line 23 and Line 24)		4800.12
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	4021.50
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		778.62

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SCHEDULE A (FEC Form 3)

Use separate schedule(s)

FOR LINE NUMBER:					PAGE		5	OF		29		
(check only one)												
	X	11a		11b		11c		11	d			
		12		13a		13b		14	. [15	

for each category of the ITEMIZED RECEIPTS **Detailed Summary Page** 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) **Brock For Congress** Full Name (Last, First, Middle Initial) Hunter, THEODORE, , , Date of Receipt Mailing Address 319 KILGARVAN CT 2022 30 City State Zip Code Transaction ID: SA11AI.4253 CA 95688 Vacaville FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 250.00 Name of Employer Occupation Retired Retired Memo Item Receipt For: 2022 Election Cycle-to-Date Contribution Primary 🗶 General 350.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) Reece, Norman, , , Date of Receipt Mailing Address 145 Larsen Circle 2022 07 07 City State Zip Code Transaction ID: SA11AI.4193 Vallejo CA 94589 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation Retired Retired Memo Item Receipt For: 2022 Election Cycle-to-Date Contribution Primary ✗ General 350.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) Reece, Norman, , , Date of Receipt Mailing Address 145 Larsen Circle 09 2022 City State Zip Code Transaction ID: SA11AI.4283 CA Vallejo 94589 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation Retired Retired Memo Item Receipt For: 2022 Election Cycle-to-Date Contribution Primary ✗ General Other (specify) 450.00 SUBTOTAL of Receipts This Page (optional).....

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

SCHEDULE A (FEC Form 3)

Use separate schedule(s) for each category of the

FOR LINE NUMBER:					PAGE		6	OF		29	
(0	(check only one)										
	×	11a		11b		11c		11	d		
		12		13a		13h		14			15

ITEMIZED RECEIPTS **Detailed Summary Page** 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) **Brock For Congress** Full Name (Last, First, Middle Initial) Rowland, Herman, , , Date of Receipt Mailing Address 1 Jelly Belly Lane 2022 13 City State Zip Code Transaction ID: SA11AI.4285 CA 94533 Fairfield FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 500.00 Occupation Name of Employer Requested Requested Memo Item Receipt For: 2022 Election Cycle-to-Date Contribution **X** General Primary 500.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) Wells, Kristy, , , Date of Receipt Mailing Address 33 Vine Street 2022 07 28 City State Zip Code Transaction ID: SA11AI.4217 Vacaville CA 95688 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Retired Retired Memo Item Receipt For: 2022 Election Cycle-to-Date Contribution Primary 🗶 General 250.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)..... 1200.00 TOTAL This Period (last page this line number only).....

			-				
SCHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 OF 29 (check only one)				
TEMIZED RECEIPTS		for each category of the	11a 11b 11c 11d				
ILMILLD RECEIP 13		Detailed Summary Page					
And to form out the constant of the constant o	1.01-1	l	1 12 100 100 17				
			person for the purpose of soliciting contributions tee to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)							
Brock For Congress							
Full Name (Last Eirst Middle Initial)							
Full Name (Last, First, Middle Initial) Brock, Matthew, , ,							
Mailing Address PO Box 6611			Date of Receipt				
ag / taa. eee O Box oo			07 19 2022				
City	State	Zip Code	Transaction ID : SA13A.4195				
Vacaville	CA	95696	Transaction ID: SA13A.4195				
FEC ID number of contributing							
federal political committee.	C		Amount of Each Receipt this Period				
			250.00				
Name of Employer	Occupation	1	100.00				
Self	Candidate		Memo Item				
Receipt For: 2022	Election C	ycle-to-Date ┏	Loan from Matt Brook				
Primary		2550.00	T Esail Wall Brook				
Other (specify) ▼		3550.00					
Full Name (Last First Middle Initial)							
Full Name (Last, First, Middle Initial) Brock, Matthew, , ,			Date of Receipt				
Mailing Address PO Box 6611			M M / D D / Y Y Y Y				
a	07 26 2022						
City	State	Zip Code	Transaction ID : SA13A.4201				
City Vacaville	State CA	Zip Code 95696	Transaction ID : SA13A.4201				
•	CA	'					
Vacaville		'	Amount of Each Receipt this Period				
Vacaville FEC ID number of contributing federal political committee.	CA	95696					
Vacaville FEC ID number of contributing federal political committee. Name of Employer	CA C	95696	Amount of Each Receipt this Period				
Vacaville FEC ID number of contributing federal political committee. Name of Employer Self	CA C Occupation Candidate	95696	Amount of Each Receipt this Period				
Vacaville FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2022	CA C Occupation Candidate	95696	Amount of Each Receipt this Period 250.00				
Vacaville FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2022 Primary General	CA C Occupation Candidate	95696	Amount of Each Receipt this Period 250.00 Memo Item				
Vacaville FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2022	CA C Occupation Candidate	95696 Organization of the state of the stat	Amount of Each Receipt this Period 250.00 Memo Item				
Vacaville FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2022 Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	CA C Occupation Candidate	95696 Organization of the state of the stat	Amount of Each Receipt this Period 250.00 Memo Item Loan from Matt Brook				
Vacaville FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2022 Primary	CA C Occupation Candidate	95696 Organization of the state of the stat	Amount of Each Receipt this Period 250.00 Memo Item				
Vacaville FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2022 Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	CA C Occupation Candidate	95696 Organization of the state of the stat	Amount of Each Receipt this Period 250.00 Memo Item Loan from Matt Brook Date of Receipt				
Vacaville FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2022 Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Brock, Matthew, , , Mailing Address PO Box 6611	CA C Occupation Candidate Election C	95696 Orange	Amount of Each Receipt this Period 250.00 Memo Item Loan from Matt Brook Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Vacaville FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2022 Primary	CA C Occupation Candidate	95696 10 11 12 13800.00 2ip Code	Amount of Each Receipt this Period 250.00 Memo Item Loan from Matt Brook Date of Receipt				
Vacaville FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2022 Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Brock, Matthew, , , Mailing Address PO Box 6611 City Vacaville	CA C Occupation Candidate Election C	95696 Orange	Amount of Each Receipt this Period 250.00 Memo Item Loan from Matt Brook Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Vacaville FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2022 Primary	CA C Occupation Candidate Election C State CA	95696 10 11 12 13800.00 2ip Code	Amount of Each Receipt this Period 250.00 Memo Item Loan from Matt Brook Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Vacaville FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2022 Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Brock, Matthew, , , Mailing Address PO Box 6611 City Vacaville	CA C Occupation Candidate Election C	95696 10 11 12 13800.00 2ip Code	Amount of Each Receipt this Period 250.00 Memo Item Loan from Matt Brook Date of Receipt M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Vacaville FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2022 Primary	CA C Occupation Candidate Election C State CA	95696 ycle-to-Date 3800.00 Zip Code 95696	Amount of Each Receipt this Period 250.00 Memo Item Loan from Matt Brook Date of Receipt 08 08 2022 Transaction ID: SA13A.4225				
Vacaville FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2022 Primary	CA C Occupation Candidate Election C State CA C	95696 ycle-to-Date 3800.00 Zip Code 95696	Amount of Each Receipt this Period 250.00 Memo Item Loan from Matt Brook Date of Receipt 08 08 2022 Transaction ID: SA13A.4225 Amount of Each Receipt this Period 500.00				
Vacaville FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2022 Primary	CA C Occupation Candidate Election C State CA C Occupation Candidate	95696 ycle-to-Date 3800.00 Zip Code 95696	Amount of Each Receipt this Period 250.00 Memo Item Loan from Matt Brook Date of Receipt 08				
Vacaville FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2022 Primary	CA C Occupation Candidate Election C State CA C Occupation Candidate	95696 Solution	Amount of Each Receipt this Period 250.00 Memo Item Loan from Matt Brook Date of Receipt 08 08 2022 Transaction ID: SA13A.4225 Amount of Each Receipt this Period 500.00				
Vacaville FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2022 Primary	CA C Occupation Candidate Election C State CA C Occupation Candidate	95696 3800.00 Zip Code 95696	Amount of Each Receipt this Period 250.00 Memo Item Loan from Matt Brook Date of Receipt 08 08 2022 Transaction ID: SA13A.4225 Amount of Each Receipt this Period 500.00 Memo Item				
Vacaville FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2022 Primary	CA C Occupation Candidate Election C State CA C Occupation Candidate	95696 Solution	Amount of Each Receipt this Period 250.00 Memo Item Loan from Matt Brook Date of Receipt 08				
Vacaville FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2022 Primary	CA C Occupation Candidate Election C State CA C Occupation Candidate	95696 Solution	Amount of Each Receipt this Period 250.00 Memo Item Loan from Matt Brook Date of Receipt 08				

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

PAGE 8 OF FOR LINE NUMBER: 29 SCHEDULE A (FEC Form 3) (check only one) Use separate schedule(s) for each category of the ITEMIZED RECEIPTS 11a 11b 11d 11c **Detailed Summary Page x** | 13a 12 13b 14 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) **Brock For Congress** Full Name (Last, First, Middle Initial) Brock, Matthew, , , Date of Receipt Mailing Address PO Box 6611 2022 City State Zip Code Transaction ID: SA13A.4234 CA 95696 Vacaville FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 500.00 Name of Employer Occupation Candidate Self Memo Item Receipt For: 2022 Election Cycle-to-Date Loan from Matt Brook Primary 🗶 General 4800.00 Other (specify) Full Name (Last, First, Middle Initial) Brock, Matthew, , , Date of Receipt Mailing Address PO Box 6611 2022 09 10 City State Zip Code Transaction ID: SA13A.4276 Vacaville CA 95696 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Self Candidate Memo Item Receipt For: 2022 Election Cycle-to-Date Loan from Matt Brook Primary 🗶 General 5050.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional).....

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

1750.00

SCHEDULE B (FEC Form 3)

PAGE 9 29 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **x** 17 18 19a Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 19b 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) **Brock For Congress** Full Name (Last, First, Middle Initial) Date of Disbursement Facebook 08 2022 22 Mailing Address 1 Hacker Way City State Zip Code **FEC Identification Number** CA Menlo Park 94025 Purpose of Disbursement Digital Marketing C00807735 004 Candidate Name Amount of Each Disbursement this Period Category/ **Brock For Congress** Type Disbursement For: 2022 Office Sought: ✗ House 79.94 Senate Primary ✗ General Transaction ID: SB17.4239 Other (specify) President Memo Item CA State: District: Full Name (Last, First, Middle Initial) Facebook Date of Disbursement Mailing Address 1 Hacker Way 2022 19 09 City State Zip Code **FEC Identification Number** CA 94025 Menlo Park Purpose of Disbursement Digital Marketing C00807735 004 Candidate Name Amount of Each Disbursement this Period Category/ **Brock For Congress** Type 65.00 Office Sought: Disbursement For: 2022 House -95 Senate Primary ✗ General Transaction ID: SB17.4287 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) c. FEC Infusion Date of Disbursement Mailing Address PO Box 3475 05 2022 City State Zip Code **FEC Identification Number** Palm Beach FL 33480 Purpose of Disbursement Reporting & Compliance C00807735 001 Candidate Name Amount of Each Disbursement this Period Category/ **Brock For Congress** Type Office Sought: 106.50 House Disbursement For: 2022 🗶 | General Senate Primary Transaction ID: SB17.4191 President Other (specify) Memo Item State: CA District: 04 SUBTOTAL of Disbursements This Page (optional)..... 251.44 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3)

PAGE 10 OF FOR LINE NUMBER: Use separate schedule(s) (check only one)

TEMI	ZED DISBURSEMENTS	for each categor Detailed Summa		17 18 19a 19b 20a 20b 20c 21
Any info	ormation copied from such Reports and Statements ommercial purposes, other than using the name an	may not be sold or d address of any pol	used by any per itical committee	rson for the purpose of soliciting contributions
\	e of committee (In Full) ock For Congress			
A. My	Name (Last, First, Middle Initial) Creative/GoDaddy ng Address 14455 N. Hayden Rd			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Purpo Web Cand Bro Office	c: CA District: 04		001 Category/ Type	FEC Identification Number C C00807735 Amount of Each Disbursement this Period 252.93 Transaction ID: SB17.4288 Memo Item
3. Sig	Name (Last, First, Middle Initial) Jn Anatomy ng Address 51 Commerce PI			Date of Disbursement OT 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Sign Cand Bro Office State	ose of Disbursement didate Name OCK For Congress e Sought: Senate Prima President CA District: 04		006 Category/ Type	FEC Identification Number C C00807735 Amount of Each Disbursement this Period 533.43 Transaction ID: SB17.4199 Memo Item
c. Sig	Name (Last, First, Middle Initial) In Anatomy In Address 51 Commerce PI			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Siġr Cand Br (ose of Disbursement didate Name OCK For Congress e Sought: X House Disbursement F Senate Prima President Other		006 Category/ Type	FEC Identification Number C C00807735 Amount of Each Disbursement this Period 173.00 Transaction ID: SB17.4250 Memo Item
SUBT	OTAL of Disbursements This Page (optional)			959.36
TOTA	L This Period (last page this line number only)			•

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

House

Senate

District:

President

04

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

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

Brock For Congress

Office Sought:

State:

CA

lm	age# 202210029532047692						
	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS		Use separate sch for each category Detailed Summar	of the	FOR LINE NUMBER: PAGE 11 OF 29 (check only one) 17 18 19a 19b 20a 20b 20c 21		
	y information copied from such Reports and Sta for commercial purposes, other than using the n						
$\frac{\overline{y}}{y}$	NAME OF COMMITTEE (In Full) Brock For Congress	arro arro a	eaross or any poin	ilour committee	2 to some sommone nom sach somme.		
	Full Name (Last, First, Middle Initial)						
۹.	Sign Anatomy				Date of Disbursement		
	Mailing Address 51 Commerce PI				09		
	City	State	Zip Code				
	Vacaville	CA	95687		FEC Identification Number C C00807735 Amount of Each Disbursement this Period		
	Purpose of Disbursement Signs			006			
	Candidate Name Brock For Congress			Category/ Type			
	Office Sought: X House Disburs Senate President State: CA District: 04	ement For: Primary Other (sp	2022 ✓ General Decify) ▼		Transaction ID : SB17.4280 Memo Item		
3.	Full Name (Last, First, Middle Initial) Solano County Registrar of Voter	S			Date of Disbursement		
	Mailing Address 675 Texas St. Suite 2600				08 12 2022		
	City	State	Zip Code		FEC Identification Number		
	Fairfield	CA	94533		TEC Identification Number		
	Purpose of Disbursement Registration Fees			001	C C00807735		
	Candidate Name			Category/	Amount of Each Disbursement this Period		
	Brock For Congress Office Sought: House Disburs	ement For:	2022	Туре	1679.86		
	Senate	Primary	∠022 X General		Transaction ID : SB17.4235		
	President State: CA District: 04	,	pecify) ▼		Memo Item		
	Full Name (Last, First, Middle Initial)						
С.	Vista Print				Date of Disbursement		
	Mailing Address 275 Wyman Street				07 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		

c. Vista Print Mailing Address 275 Wyman Street Zip Code City State Waltham MA 02451 Purpose of Disbursement Printing 006 Candidate Name

Disbursement For: 2022

Primary

Other (specify)

✗ General

Category/ Type

FEC Identification Number

Amount of Each Disbursement this Period

C00807735

114.39 Transaction ID: SB17.4192

Memo Item

1924.00

ITEMIZED DISBURSEMENTS

Senate

District:

State:

CA

President

04

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

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

PAGE 12 29 FOR LINE NUMBER: SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the **x** 17 18 19a 19b Detailed Summary Page 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) **Brock For Congress** Full Name (Last, First, Middle Initial) Date of Disbursement Vista Print 2022 26 Mailing Address 275 Wyman Street City State Zip Code **FEC Identification Number** MA Waltham 02451 Purpose of Disbursement Printing C00807735 006 Candidate Name Amount of Each Disbursement this Period Category/ **Brock For Congress** Type Disbursement For: 2022 112.84 Office Sought: ✗ House Senate Primary ✗ General Transaction ID: SB17.4203 Other (specify) President Memo Item CA State: District: Full Name (Last, First, Middle Initial) Vista Print Date of Disbursement Mailing Address 275 Wyman Street 2022 City State Zip Code **FEC Identification Number** MA 02451 Waltham Purpose of Disbursement Printing C00807735 006 Candidate Name Amount of Each Disbursement this Period Category/ **Brock For Congress** Type 115.47 Office Sought: Disbursement For: 2022 House Senate Primary ✗ General Transaction ID: SB17.4204 Other (specify) President Memo Item State: CA District: Full Name (Last, First, Middle Initial) c. Vista Print Date of Disbursement Mailing Address 275 Wyman Street 2022 City State Zip Code **FEC Identification Number** Waltham MA 02451 Purpose of Disbursement C00807735 006 Candidate Name Amount of Each Disbursement this Period Category/ **Brock For Congress** Type Office Sought: 140.23 House Disbursement For: 2022

🗶 | General

Primary

Other (specify)

368.54

Transaction ID: SB17.4240

Memo Item

SCHEDULE B (FEC Form 3)

PAGE 13 OF 29 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **x** 17 18 19a Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 19b 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) **Brock For Congress** Full Name (Last, First, Middle Initial) Date of Disbursement Vista Print 2022 10 Mailing Address 275 Wyman Street State City Zip Code FEC Identification Number MA Waltham 02451 Purpose of Disbursement Printing C00807735 006 Candidate Name Amount of Each Disbursement this Period Category/ **Brock For Congress** Type Office Sought: Disbursement For: 2022 House 82.62 Senate Primary ✗ General Transaction ID: SB17.4277 Other (specify) President Memo Item CA State: District: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: Office Sought: House Senate Primary General Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 82.62 TOTAL This Period (last page this line number only)..... 3585.96

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

PAGE 14
FOR LINE NUMBER: (check only one)

13a

		Detailed Garrinary ragi	13b				
NAME OF COMMITTEE (In Full)		Transact	tion ID : SC/10.4100				
Brock For Congress							
LOAN SOURCE Full Name (Last, First	t, Middle Initial)	Memo Item	Election: 2022				
Brock, Matthew, , ,			x Primary				
, , , ,			General				
Mailing Address PO Box 6611			Other (specify) ▼				
City	State	ZIP Code					
Vacaville	CA	95696	✗ Personal Funds of the Candidate				
Original Amount of Loan	Cumulative Pag	yment To Date Balar	nce Outstanding at Close of This Period				
100.00		0.00	100.00				
9 9	9	9	9 9				
TERMS Date Incurred		Pate Due Interest Rate (If none, enter					
M03 ^M / D14 ^D / Y Ž02Ž Y	^M 09 ^M / □01 ^D	/ Y Ŏ01 Ì Y 4.0	% (apr) Yes X No				
List All Endorsers or Guarantors (if a	ny) to Loan Source						
1. Full Name (Last, First, Middle Initia	l)	Name of Employer					
Mailing Address		Occupation					
		Amount					
City Sta	te ZIP Code	Guaranteed					
July July July July July July July July	211 0000	Outstanding:	7				
2. Full Name (Last, First, Middle Initial)		Name of Employer					
Mailing Address		Occupation	Occupation Amount				
		Amount					
City	te ZIP Code	Guaranteed					
O. Fall Name (Leas Fines Middle Leisten)		Outstanding:	, , , -				
3. Full Name (Last, First, Middle Initial)		Name of Employer	Name of Employer				
Mailing Address		Occupation	Occupation				
		Amount					
City	te ZIP Code	Guaranteed Outstanding:	, , , , , , , , , , , , , , , , , , , ,				
4. Full Name (Last, First, Middle Initial)		Name of Employer					
Mailing Address		Occupation	Occupation				
		Amount					
City	te ZIP Code	Guaranteed Outstanding:	9 9				
SUBTOTALS This Period This Page (option	onal)	······································	100.00				
TOTALS This Period (last page in this line	e only)						
Carry outstanding balance only to LINE 3	Cohodulo D. for the	a line If no Schadule D. serve from	ard to appropriate line of Commercia				
Carry outstanding palance only to LINE 3	, achequie D, for this	s inie. Il no ocnequie D, carry forw	aru to appropriate line of Summary.				

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

PAGE 15 C
FOR LINE NUMBER: (check only one)

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	13b

			, , , , , , , , , , , , , , , , , , , ,
AME OF COMMITTEE (In Full) Brock For Congress			Transaction ID : SC/10.4101
LOAN SOURCE Full Name (Last,	First Mid	ddle Initial)	Momo Itom Election: 2022
Brock, Matthew, , ,	i ii ot, IVIIC	adie iiiliaij	☐ Memo Item
Mailing Address PO Box 6611			Other (specify) ▼
City		State	ZIP Code Personal Funds of the Candi
Vacaville		CA	95696
Original Amount of Loan		Cumulative Pay	yment To Date Balance Outstanding at Close of This Po
500	0.00	7	0.00 500.00
TERMS Date Incurred		D	Date Due Interest Rate Secured: (If none, enter 0)
^M 03 ^M / □14 ^D / Y Ž02Ž	Υ	[™] 09 [™] / □01 [□]	/ Y Ŏ011 Y 4.00 (apr) Yes
List All Endorsers or Guarantors	(if any) t	o Loan Source	
1. Full Name (Last, First, Middle I	nitial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle In	itial)	1	Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle In	itial)		Name of Employer
Mailing Address			Occupation
	1		Amount
City	State	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle In	itial)	'	Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
UDTOTAL C This Desired This D			
UBTOTALS This Period This Page (optional).		500.00
OTALS This Period (last page in this	line only	/)	
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zarry outstanding palance only to Li	NE J, JCI	iedule D, IOI this	s line. It no ochedule b, carry forward to appropriate line of Summa

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

FOR LINE NUMBER: (check only one)

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OF

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	ME OF COMMITTEE (In Full) rock For Congress				Trans	action ID : SC/10.4102		
oxdot		Firm 1 2.41	L-II- 1-22 N					
	Brock, Matthew, , ,	FIRST, MIC	iale initial)		☐ Memo Itel	m Election: 2022 x Primary General		
	Mailing Address PO Box 6611					Other (specify) ▼		
	City State ZIP Cod					X Personal Funds of the Candidate		
	Vacaville		CA	95696		T ersonal Tunus of the Candidate		
	Original Amount of Loan		Cumulative Pay	yment To	Date Ba	alance Outstanding at Close of This Period		
	250	0.00	7		0.00	250.00		
	TERMS Date Incurred		D	ate Due	Interest Ra (If none, en			
	M03M / D14D / Y Ž02Ž	Y	^M 09 ^M / □01 ^D	/ Y	ŎO1Ť Y	4.00 % (apr) Yes No		
	List All Endorsers or Guarantors	(if any) to	o Loan Source					
	1. Full Name (Last, First, Middle I	nitial)			Name of Employer			
	Mailing Address				Occupation			
					Amount			
	City	State	ZIP Code		Guaranteed Outstanding:	, , , , , , , , , , , , , , , , , , ,		
	2. Full Name (Last, First, Middle Initial)				Name of Employer			
	Mailing Address				Occupation			
					Amount			
	City	State	ZIP Code		Guaranteed Outstanding:	, , , , , , , ,		
	3. Full Name (Last, First, Middle In	itial)			Name of Employer Occupation			
	Mailing Address							
					Amount			
	City	State	ZIP Code		Guaranteed Outstanding:	7 7		
	4. Full Name (Last, First, Middle In	itial)			Name of Employer			
	Mailing Address				Occupation			
					Amount			
	City	State	ZIP Code		Guaranteed Outstanding:	7 7		
S	UBTOTALS This Period This Page (optional)			······	250.00		
Т	OTALS This Period (last page in this	s line only	r)		······			
0	Carry outstanding balance only to LI	NE 3, Sch	nedule D, for this	s line. If	no Schedule D, carry fo	orward to appropriate line of Summary.		
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Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 17 OF
FOR LINE NUMBER:
(check only one)

X 13a

						130		
	ME OF COMMITTEE (In Full) rock For Congress				Transa	action ID : SC/10.4103		
	LOAN SOURCE Full Name (Last, Brock, Matthew, , ,	First, Mic	ddle Initial)	☐ Memo Item	Election: 2022 Primary General			
Mailing Address PO Box 6611						Other (specify)		
	City State ZIP Code Vacaville CA 95696			de	Personal Funds of the Candidate			
-	Original Amount of Loan		Cumulative Pay		Date Ba	 ance Outstanding at Close of This Period		
		0.00	Cultidative Fa	yment 10	0.00	450.00		
	TERMS Date Incurred		D	Date Due	Interest Ra (If none, ente			
	M03M / D14D / Y Z02Ž	Y	MO9 M / D01 D	/ Y		4.00		
	List All Endorsers or Guarantors	(if any) to	o Loan Source					
	1. Full Name (Last, First, Middle I	nitial)			Name of Employer			
-	Mailing Address				Occupation			
-	City	State	ZIP Code		Amount Guaranteed Outstanding:	7		
-	2. Full Name (Last, First, Middle In	itial)			Name of Employer			
-	Mailing Address				Occupation			
					Amount			
	City	State	ZIP Code		Guaranteed Outstanding:	yy		
	3. Full Name (Last, First, Middle In	itial)			Name of Employer			
	Mailing Address				Occupation			
-	City	State	ZIP Code		Amount Guaranteed Outstanding:	7 7 7		
	4. Full Name (Last, First, Middle In	itial)			Name of Employer			
-	Mailing Address				Occupation			
_		I	T=:=		Amount			
	City	State	ZIP Code		Guaranteed Outstanding:	y y		
SL	JBTOTALS This Period This Page (optional)			······	450.00		
тс	DTALS This Period (last page in this	line only	·) ·······					
C	arry outstanding balance only to LII	NE 3. Sch	nedule D. for this	s line. If	no Schedule D. carry for	rward to appropriate line of Summary.		
	. ,	,	, . 					

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

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Brock For Congress		Transaction ID : SC/10.4127
LOAN SOURCE Full Name (Last, First, Mid Brock, Matthew, , ,	ddle Initial)	Memo Item Election: 2022 X Primary General
Mailing Address PO Box 6611	Other (specify) ▼	
City Vacaville	ZIP Code 95696 Personal Funds of the Candidate	
Original Amount of Loan	CA Cumulative Pay	
500.00	Cumulative Fa	0.00 Sound
TERMS Date Incurred	С	ate Due Interest Rate Secured: (If none, enter 0)
M04 ^M / D07 ^D / Y Ž02Ž Y	M09 M / D01 D	/ Y 001 f Y 4.00
List All Endorsers or Guarantors (if any) t	o Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
	1	Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	ZIP Code	Amount Guaranteed
City	ZIP Code	Outstanding:
SUBTOTALS This Period This Page (optional).		500.00
TOTALS This Period (last page in this line only	/)	7 7 7
Carry outstanding balance only to LINE 3, Sci	nedule D, for this	line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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		Detailed Guillilary Lage	13b				
NAME OF COMMITTEE (In Full)		Transaction ID : SC/10.4129					
Brock For Congress							
LOAN SOURCE Full Name (Last, F	rst, Middle Initial)	Memo Item Election: 2022					
Brock, Matthew, , ,		✓ Primary					
		General					
Mailing Address PO Box 6611		☐ Other (specify) ▼					
City	State	ZIP Code					
Vacaville	CA	95696 Personal Funds of the Ca	andidate				
Original Amount of Loan	Cumulative Pa	ayment To Date Balance Outstanding at Close of Thi	s Period				
500.0	0	0.00 500.0	00				
7 7		9 9 9 9					
TERMS Date Incurred		Date Due Interest Rate Secured: (If none, enter 0)					
M04 ^M / D18 ^D / Y Ž02Ž	MO9 M / DO1	¹	x No				
List All Endorsers or Guarantors (if	any) to Loan Source	9					
1. Full Name (Last, First, Middle Ini	ial)	Name of Employer					
Mailing Address		Occupation	Occupation				
		Amount					
City	State ZIP Code	Guaranteed	1				
		Outstanding:					
2. Full Name (Last, First, Middle Initi	al)	Name of Employer					
Mailing Address		Occupation					
		Amount					
City	State ZIP Code	Guaranteed					
		Outstanding:					
3. Full Name (Last, First, Middle Initi	al)	Name of Employer					
Mailing Address		Occupation					
		Amount					
City	State ZIP Code	Guaranteed					
·		Outstanding:					
4. Full Name (Last, First, Middle Initi	al)	Name of Employer					
Mailing Address		Occupation					
		Amount					
City	State ZIP Code	Guaranteed Outstanding:					
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Use separate schedule(s) for each category of the Detailed Summary Page

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OF

						130		
	ME OF COMMITTEE (In Full) OCK For Congress				Transa	ction ID : SC/10.4138		
	LOAN SOURCE Full Name (Last, Brock, Matthew, , ,	First, Mic	☐ Memo Item	x Primary				
Mailing Address PO Box 6611						General Other (specify) ▼		
	City State ZIP Cod Vacaville CA 95696			Y Personal Funds of the Ca				
-	Original Amount of Loan		Cumulative Pay		Date Rai	ance Outstanding at Close of This Period		
		0.00	Cumulative 1 a	yment to	0.00	100.00		
Ī	TERMS Date Incurred		C	ate Due	Interest Rat (If none, ente			
	M05 ^M / D02 ^D / Y Ž02Ž	Υ	^M 09 ^M / □01 ^D	/ Y	ŏo1i ^Y ^Y	.00 % (apr) Yes X No		
	List All Endorsers or Guarantors	(if any) to	o Loan Source					
	1. Full Name (Last, First, Middle I	Initial)			Name of Employer			
	Mailing Address				Occupation			
	City	State	ZIP Code		Amount Guaranteed Outstanding:	7		
	2. Full Name (Last, First, Middle Ir	nitial)			Name of Employer Occupation			
	Mailing Address							
-		Ta			Amount Guaranteed			
	City	State	ZIP Code			7		
	3. Full Name (Last, First, Middle In	nitial)			Name of Employer			
	Mailing Address				Occupation			
	City	State	ZIP Code		Amount Guaranteed Outstanding:	7		
ŀ	4. Full Name (Last, First, Middle In	nitial)			Name of Employer			
	Mailing Address			Occupation				
		1_			Amount			
	City	State	ZIP Code		Guaranteed Outstanding:	9 9		
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	nry outstanding balance colurt.	NE 2 Cal	odulo D. for this	lino If	no Sobodulo D. some for	ward to appropriate line of Commercia		
l Ca	arry outstanding balance only to Li	INE J, JCI	ieuule D, lor (Nis	s mie. if	no ochedule D, carry for	ward to appropriate line of Summary.		

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

PAGE 21 (FOR LINE NUMBER: (check only one)

13a 13b

					Detailed Guillinary	1 agc			13b
	ME OF COMMITTEE (In Full) rock For Congress				Tran	saction II	D : SC/10.4150		
Щ	LOAN COURCE Full Name // ant	□:	-1-11- 1:4:-1\			T =:			
	LOAN SOURCE Full Name (Last,	First, Mid	adie initial)		☐ Memo Ite	CIII	tion: 2022		
	Brock, Matthew, , ,						Primary		
	Mailing Address						General		
	Mailing Address PO Box 6611						Other (specify) ▼		
	City		State CA	ZIP Cod 95696	е	×	Personal Funds of the	Can	didate
	Vacaville		CA	95090					
	Original Amount of Loan		Cumulative Pay	yment To [Date E	Balance O	outstanding at Close of	This	Period
	150				0.00				
	150	0.00	9	, ,	0.00		15	50.00	
	TERMS Date Incurred		D	Date Due	Interest F		Secure	d:	
	M-M / D D / V V V	V	M M / D D	, v	(If none, e	4.00	-		
	M05 ^M / D10 ^D / Y 2022	الـ	[№] 09 ^M / ^D 01 ^D	/ Y =	Ŏ01Ť ^Ÿ	4.00	% (apr)	s	No
	List All Endorsers or Guarantors	(if anv) t	o Loan Source						
	Full Name (Last, First, Middle I			T	Name of Employer				
		,			, ,				
	Mailing Address				Occupation				
				-	Amount				
	City	State	ZIP Code		Guaranteed				
					Outstanding:	7	7		
	2. Full Name (Last, First, Middle In	itial)			Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	-			
	3. Full Name (Last, First, Middle In	itial)			Name of Employer		,		
	, , ,								
	Mailing Address				Occupation				
					Amount			_	
	City	State	ZIP Code		Guaranteed Outstanding:	7	7		
	4. Full Name (Last, First, Middle In	itial)			Name of Employer				
	Mailing Address				Occupation				
				-	A				
	City	State	ZIP Code		Amount Guaranteed				
	Oity	State	Zii Oode		Outstanding:	7	7	_	
		•	•						
SI	UBTOTALS This Period This Page (ontional).							7
Ľ	DI TIME TO THE TOTAL THIS Tage (اراما احال					15	0.00	
т	OTALS This Period (last page in this	line only	y)		······		7		
<u> </u>	carry outstanding balance only to LI	NE 3 Sal	hadula D. for this	e line If =	o Schedule D. carry	forward +	o appropriate line of S	limn	narv
	an v Juisianumu palance umv lu Li	11L U, UU	neadle D, IVI lills	. m.c. II II	o ochicuule Di Cally I	ıvı watu t	o appropriate lille Of 3	uiiiii	ıaı y.

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

FOR LINE NUMBER: (check only one)

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OF

						130		
	COMMITTEE (In Full) For Congress				Transa	action ID : SC/10.4171		
	SOURCE Full Name (Last, , , Matthew, , ,	, First, Mic	☐ Memo Iter	Election: 2022 Primary General				
Mailing Address PO Box 6611						Other (specify)		
City				Y Personal Funds of the C				
	nal Amount of Loan		Cumulative Pay		Data Po	alance Outstanding at Close of This Period		
Origin		0.00	Cultidiative Fa	yment 10	0.00	200.00		
TERMS	Date Incurred		С	Date Due	Interest Ra (If none, ent			
^M 05	5 ^M / D23 ^D / Y Ž02Ž	Y	M09 M / D01 D	/ Y	ŎO1Ť Ý	4.00 % (apr) Yes X No		
List All	I Endorsers or Guarantors	(if any) to	o Loan Source					
1. Full	l Name (Last, First, Middle	Initial)			Name of Employer			
Ma	iling Address				Occupation			
City	V	State	ZIP Code		Amount Guaranteed Outstanding: Name of Employer			
		:+: - I\						
2. Full	Name (Last, First, Middle I	nitiai)			Name of Employer			
Mail	ling Address				Occupation			
City		State	ZIP Code		Guaranteed	7 7		
3. Full	Name (Last, First, Middle I	nitial)	•		Name of Employer Occupation			
Mail	ling Address							
O:t-		04-4-	ZIP Code		Amount Guaranteed			
City		State	ZIP Code		Outstanding:	9 9		
4. Full	Name (Last, First, Middle I	nitial)			Name of Employer			
Mailing Address					Occupation			
City		State	ZIP Code		Amount Guaranteed Outstanding:	7		
SUBTOTA	ALS This Period This Page	(optional)				200.00		
TOTALS	This Period (last page in thi	is line only	·)		·····	7 7 7		
Carry out	tstanding halance only to I	INF 3 Set	edule D for this	s line If	no Schedule D. carry fo	rward to appropriate line of Summary.		
l Carry Out	totalium palance only to L	0, 001	caule D, IOI IIII	. IIII . II	no ochedule b, carry lo	i maia to appropriate inte di outilitaly.		

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

PAGE 23
FOR LINE NUMBER: (check only one)

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			Detailed Outfilliary 1 a	.90	13b		
NAME OF COMMITTEE (In Full) Brock For Congress			Transa	ction ID : SC/10.4174			
LOAN SOURCE Full Name (Last, First, Mic	ddla Initial)			Floation			
, , , , , , , , , , , , , , , , , , , ,	adie initial)						
Brock, Matthew, , ,				Y Primary General			
Mailing Address				⊣			
Mailing Address PO Box 6611				Other (specify) ———————————————————————————————————			
City	State	ZIP Code	•				
Vacaville	CA	95696		Y Personal Funds of the C	andidate		
Original Amount of Loan	Cumulative Pay	yment To D	ate Bal	ance Outstanding at Close of Th	nis Period		
400.00			0.00	400	00		
400.00	7	7	0.00	, 400			
TERMS Date Incurred		ate Due	Interest Rat (If none, ente	er 0)			
M06M / D02D / Y Z02Z Y	[™] 09 [™] / [□] 01 [□]	/ Y (001ť Ý 4	% (apr) Yes	x No		
List All Endorsers or Guarantors (if any) t	o Loan Source						
1. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address			Occupation				
			Amount				
City	ZIP Code	<u> </u>	Guaranteed Outstanding:	7			
2. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address			Occupation				
			Amount		_		
City	ZIP Code		Guaranteed Outstanding:	7 7 7			
3. Full Name (Last, First, Middle Initial)	-		Name of Employer				
Mailing Address			Occupation				
			Amount				
City	ZIP Code		Guaranteed Outstanding:	y y x			
4. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address			Occupation				
			Amount				
City	ZIP Code		Guaranteed Outstanding:	7			
	'	<u>'</u>					
SUBTOTALS This Period This Page (optional).			······	400	.00		
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Carry outstanding balance only to LINE 3, Sch	nedule D for this	s line If no	Schedule D. carry for	ward to appropriate line of Su	mmary		

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

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X 13a

					Detailed Currinary	r age		13b	
	OMMITTEE (In Full) r Congress				Trar	nsaction II	D : SC/10.4183		
LOAN SC	DURCE Full Name (Last,	First Mis	امام استختما/				P		
	•	FIRST, IVIIC	idie initial)		☐ Memo I	(CIII	etion: 2022		
Brock,	Matthew, , ,						Primary		
Mailing A	Mailing Address PO Box 6611						General		
PO Box 6	adress 611						Other (specify) ▼		
City			State	ZIP Code	Э				
Vacaville			CA	95696		X	Personal Funds of the	Candidate	
Original	Amount of Loan		Cumulative Pay	yment To D	ate	Balance C	Outstanding at Close of	This Period	
	450	.00			0.00				
	150	.00	9		0.00		7	60.00	
TERMS	Date Incurred			ate Due	Interest (If none,	enter 0)	Secure	d:	
^M 06 ^M	/ ^D 21 ^D / Y Ž02Ž	Y	[™] 09 [™] / [□] 01 [□]	/ Y	Ŏ01Ť ^Ÿ	4.00	% (apr)	s x No	
List All E	Endorsers or Guarantors	(if any) to	o Loan Source						
	lame (Last, First, Middle I	• • • • • • • • • • • • • • • • • • • •			Name of Employer				
Mailin	ng Address				Occupation				
					Amount				
City		State	ZIP Code		Guaranteed				
					Outstanding:				
2. Full Na	ame (Last, First, Middle In	itial)			Name of Employer				
Mailing	g Address				Occupation				
					Amount				
City		State	ZIP Code	I	Guaranteed Outstanding:	9			
3. Full Na	ame (Last, First, Middle In	itial)			Name of Employer				
Mailing	g Address				Occupation				
					Amount				
City		State	ZIP Code		Guaranteed				
					Outstanding:	7	,		
4. Full Na	ame (Last, First, Middle In	itial)			Name of Employer				
Mailing	g Address				Occupation				
					Amount				
City		State	ZIP Code		Guaranteed Outstanding:	7	9		
				·					
SUBTOTALS	S This Period This Page (optional)			······	l	15	0.00	
TOTALS Thi	is Period (last page in this	line only	·) ·······		·····•		7	丗	
					<u> </u>				
□ Carry outst	anding balance only to LII	NE 3, Sch	neaule D, for this	s line. If no	Schedule D, carry	torward t	o appropriate line of S	ummary.	

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

PAGE 25
FOR LINE NUMBER: (check only one)

X 13a

			Detailed Currintary	i age	13b		
NAME OF COMMITTEE (In Full)			Tran	saction ID : SC/10.4195			
Brock For Congress							
LOAN SOURCE Full Name (Last, First, Mic	ddle Initial)		☐ Memo Ite	em Election: 2022			
Brock, Matthew, , ,				Primary			
				∡ General			
Mailing Address PO Box 6611				Other (specify) ▼			
City	State	ZIP Code	•				
Vacaville	CA	95696		Personal Funds of the	Candidate		
Original Amount of Loan	Cumulative Pa	yment To D	ate E	Balance Outstanding at Close of	This Period		
250.00			0.00	75	50.00		
250.00	9	7		3 3	10.00		
TERMS Date Incurred	С	Date Due	Interest F (If none, e		:d:		
M07 ^M / D19 ^D / Y Ž02Ž Y	[™] 09 ^M / ^D 01 ^D	/ Y d	б01 й ^Ү	4.00 % (apr) Ye	s 🗴 No		
List All Endorsers or Guarantors (if any) t	o Loan Source						
1. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address		(Occupation				
		<u> </u>	Amount				
City State	ZIP Code		Guaranteed Outstanding:	, , , , , , , , , , , , , , , , , , ,			
2. Full Name (Last, First, Middle Initial)		1	Name of Employer				
Mailing Address		(Occupation				
		-	Amount				
City State	ZIP Code		Guaranteed Outstanding:	7 7			
3. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address		(Occupation				
			Amount		$\overline{}$		
City	ZIP Code		Guaranteed Outstanding:				
4. Full Name (Last, First, Middle Initial)		1	Name of Employer				
Mailing Address		- (Occupation				
			Amount				
City	ZIP Code		Guaranteed Outstanding:	9 9			
	l						
SUBTOTALS This Period This Page (optional)			······•	25	50.00		
TOTALS This Period (last page in this line only	y)		······•	7 7			
Carry outstanding balance only to LINE 3, Sch	nedule D. for this	s line. If no	Schedule D. carry f	forward to appropriate line of S	 Summarv.		

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

PAGE 26
FOR LINE NUMBER: (check only one)

13a

		Detailed Surffillary 1 ag		13b		
NAME OF COMMITTEE (In Full) Brock For Congress	_	Transact	tion ID : SC/10.4201			
LOAN COURCE Full Names // ast First Middle In	:4:-1\		Florification			
LOAN SOURCE Full Name (Last, First, Middle In	iliai)	☐ Memo Item	Election: 2022			
Brock, Matthew, , ,			Primary General			
Mailing Address			✗ GeneralOther (specify) ▼			
Mailing Address PO Box 6611			Office (specify) •			
City	ZIP Code	e				
Vacaville CA	95696		X Personal Funds of the C	andidate		
Original Amount of Loan Cum	nulative Payment To D	Date Balar	nce Outstanding at Close of Th	is Period		
050.00		0.00	250	20		
250.00	<u> </u>	0.00	250.	00		
TERMS Date Incurred	Date Due	Interest Rate (If none, enter	0)			
M07 ^M / D26 ^D / Y Ž02Ž Y M09 M	/ D01 D / Y (ŎO1Ť ^Ŷ 4.C	% (apr) Yes	x No		
List All Endorsers or Guarantors (if any) to Loa	n Source					
Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
	-	Amount				
City State ZIP		Guaranteed		1		
Gity State Zir	Code	Outstanding:	9			
2. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
		Amount				
City State ZIP	Code	Guaranteed Outstanding:	7			
3. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
		Amount				
City State ZIP		Guaranteed				
July State 2.1	0000	Outstanding:	7 7			
4. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
		Amount				
City State ZIP	Codo	Guaranteed Outstanding:	7 7 7			
SUBTOTALS This Period This Page (optional)						
CODICIALO INISTENOS INISTAGE (Optional)			250.	UU		
TOTALS This Period (last page in this line only)		······				
Carry outstanding balance only to LINE 3, Schedule	D. for this line If n	o Schedule D. carry forw	ard to appropriate line of Sur	nmarv		

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

PAGE 27
FOR LINE NUMBER: (check only one)

X 13a

				13b		
NAME OF COMMITTEE (In Full) Brock For Congress			Transact	ion ID : SC/10.4225		
	مامات استختما/			Floring		
LOAN SOURCE Full Name (Last, First, Mi	ddie initial)		☐ Memo Item	Election: 2022		
Brock, Matthew, , ,				Primary General		
Mailing Address				Other (specify)		
PO Box 6611				- Carlet (opeony) •		
City	State	ZIP Code		▼ Personal Funds of the Candidate		
Vacaville	CA	95696		r ersonal runus or the Candidate		
Original Amount of Loan	Cumulative Pay	ment To Date	Balar	nce Outstanding at Close of This Period		
500.00	2	,	0.00	500.00		
TERMS Date Incurred	C	ate Due	Interest Rate (If none, enter	Secured:		
M08 ^M / D08 ^D / Y Z02Z Y	MO9 M / D01 D	/ Y Ŏ011 Y	4.0	% (apr) Yes X No		
List All Endorsers or Guarantors (if any)	to Loan Source					
1. Full Name (Last, First, Middle Initial)		Name of	Employer			
Mailing Address		Occupati	Occupation			
		Amount				
City	ZIP Code	Guarante Outstand		7		
2. Full Name (Last, First, Middle Initial)		Name of	Employer			
Mailing Address		Occupati	ion			
		Amount				
City	ZIP Code	Guarante Outstand		, ,		
3. Full Name (Last, First, Middle Initial)	·	Name of	Employer			
Mailing Address		Occupati	ion			
		Amount				
City	ZIP Code	Guarante Outstand		9		
4. Full Name (Last, First, Middle Initial)		Name of	Employer			
Mailing Address		Occupati	ion			
		Amount				
City	ZIP Code	Guarante Outstand		7		
SUBTOTALS This Period This Page (optional)				500.00		
TOTALS This Period (last page in this line onl			— H	500.00		
Carry outstanding balance only to LINE 3. Sc	nedule D for this	: line. If no Schedi	ule D. carry forw	ard to appropriate line of Summary		

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

PAGE 28
FOR LINE NUMBER: (check only one)

13a

		Detailed Curimary 1 a	ge 13b				
NAME OF COMMITTEE (In Full)		Transa	ction ID : SC/10.4234				
Brock For Congress							
LOAN SOURCE Full Name (Last, First	, Middle Initial)	☐ Memo Item	Election: 2022				
Brock, Matthew, , ,			Primary				
, , , ,			✗ General				
Mailing Address PO Box 6611			Other (specify)				
City	State	ZIP Code	M D 15 1 (1) 0 111				
Vacaville	CA	95696	Personal Funds of the Candidate				
Original Amount of Loan	Cumulative Pa	yment To Date Bala	ance Outstanding at Close of This Period				
500.00		0.00	500.00				
TERMS Date Incurred		Date Due Interest Rat					
M ₀₈ M / D ₁₁ D / Y Ž ₀₂ Ž Y	M ₀₉ M / D ₀₁ D	(If none, ente	.00				
			% (apr) Yes No				
List All Endorsers or Guarantors (if a							
1. Full Name (Last, First, Middle Initial)	Name of Employer					
Mailing Address		Occupation					
		Amount					
City	te ZIP Code	Guaranteed Outstanding:	, , , , , ,				
2. Full Name (Last, First, Middle Initial)		Name of Employer	Name of Employer				
Mailing Address		Occupation					
		Amount					
City	te ZIP Code	Guaranteed					
		Outstanding:	7 - 7				
3. Full Name (Last, First, Middle Initial)		Name of Employer					
Mailing Address		Occupation					
		Amount					
City	te ZIP Code	Guaranteed Outstanding:	y				
4. Full Name (Last, First, Middle Initial)		Name of Employer					
Mailing Address		Occupation					
		Amount					
City	te ZIP Code	Guaranteed Outstanding:	9				
		o atotanamig.					
SUBTOTALS This Period This Page (option	nal)	······	500.00				
TOTALS This Period (last page in this line	only)						
Carry outstanding balance only to LINE 3	, Schedule D, for this	s line. It no Schedule D, carry for	ward to appropriate line of Summary.				

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

PAGE 29
FOR LINE NUMBER: (check only one)

13a

OF

		100
NAME OF COMMITTEE (In Full) Brock For Congress		Transaction ID : SC/10.4276
LOAN SOURCE Full Name (Last, First, Mid Brock, Matthew, , ,	Memo Item Election: 2022 Primary	
Mailing Address PO Box 6611		✓ General Other (specify) ▼
City Vacaville	State CA	ZIP Code 95696 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pay	
250.00	0.00 250.00	
TERMS Date Incurred	C	ate Due Interest Rate Secured: (If none, enter 0)
M09 ^M / □10		
List All Endorsers or Guarantors (if any) t	o Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed
		Outstanding: Name of Employer
2. Full Name (Last, First, Middle Initial)		патте от сттрюует
Mailing Address		Occupation
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	ZIP Code	Amount Guaranteed
City	ZIP Code	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).		250.00
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.		