

FEC FORM 3P

REPORT OF RECEIPTS AND DISBURSEMENTS

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

Example: If typing, type over the lines.

KANYE 2020

ADDRESS (number and street)

Check if different than previously reported. (ACC)

-

CITY

STATE

ZIP CODE

2. FEC IDENTIFICATION NUMBER

3. TYPE OF REPORT (Choose One)

Check here if this is a Termination Report (TER)

Quarterly Reports:

Monthly Reports:

- April 15 (Q1)
- October 15 (Q3)
- Feb 20 (M2)
- May 20 (M5)
- Aug 20 (M8)
- Nov 20 (M11)
- July 15 (Q2)
- January 31 Year-End Report (YE)
- Mar 20 (M3)
- Jun 20 (M6)
- Sep 20 (M9)
- Dec 20 (M12)
- Apr 20 (M4)
- Jul 20 (M7)
- Oct 20 (M10)
- Jan 31 (YE)

- 12-Day Pre-Election Report for the Election on in the State of
- 30-Day Post-Election Report for the General Election on

4. IS THIS REPORT AN AMENDMENT?

yes no

5. COVERING PERIOD

07 / 01 / 2022 THROUGH 09 / 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.

Type or Print Name of Treasurer Cook, Zachary, , ,

Signature of Treasurer Cook, Zachary, , , *[Electronically Filed]* Date 10 / 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. All previous versions of this form are obsolete and should no longer be used.

| | | | | | | | | | |
|-----------------------|--|--|--|--|--|--|--|--|--|
| Office Use Only | | | | | | | | | |
|-----------------------|--|--|--|--|--|--|--|--|--|

Write or Type Committee Name

KANYE 2020

Report Covering the Period: From: / / To: / /

SUMMARY

| | |
|--|--|
| 6. CASH ON HAND AT BEGINNING OF REPORTING PERIOD | <input type="text" value="372054.03"/> |
| 7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 3) | <input type="text" value="233.98"/> |
| 8. SUBTOTAL (Lines 6 and 7) | <input type="text" value="372288.01"/> |
| 9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 4) | <input type="text" value="1137.98"/> |
| 10. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 9 from 8)..... | <input type="text" value="371150.03"/> |
| 11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)..... | <input type="text" value="0.00"/> |
| 12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)..... | <input type="text" value="0.00"/> |
| 13. EXPENDITURES SUBJECT TO LIMITATION (Use the worksheet on Page 8 to calculate this amount.)..... | <input type="text" value="0.00"/> |

NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES

| | |
|---|---|
| 14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B on Page 4 from 17e, Column B on Page 3)..... | <input type="text" value="170520.00"/> |
| 15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B on Page 3 from 23, Column B on Page 4)..... | <input type="text" value="1740023.74"/> |

DETAILED SUMMARY PAGE
of Receipts

NAME OF COMMITTEE (in Full)

KANYE 2020

Report Covering the Period: From:

/ /

To:

/ /

| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|---|-------------------------------|------------------------------------|
| 16. FEDERAL FUNDS (Itemize on Schedule A-P) | 0.00 | 0.00 |
| 17. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) itemized | 0.00 | 183000.00 |
| (ii) unitemized | 0.00 | 226520.00 |
| (iii) Total contributions | 0.00 | 409520.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees | 0.00 | 0.00 |
| (d) The Candidate | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17(c) and 17(d)) | 0.00 | 409520.00 |
| 18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOANS RECEIVED: | | |
| (a) Loans Received From or Guaranteed by Candidate | 0.00 | 0.00 |
| (b) Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOANS (Add 19(a) and 19(b)) | 0.00 | 0.00 |
| 20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.): | | |
| (a) Operating | 0.00 | 45514.08 |
| (b) Fundraising | 0.00 | 0.00 |
| (c) Legal and Accounting | 0.00 | 0.00 |
| (d) TOTAL OFFSETS TO EXPENDITURES (Add 20(a), 20(b) and 20(c)) | 0.00 | 45514.08 |
| 21. OTHER RECEIPTS (Dividends, Interest, etc.) | 233.98 | 233.98 |
| 22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21) | 233.98 | 455268.06 |

DETAILED SUMMARY PAGE

FEC Form 3P (Rev. 05/2016)

of Disbursements and Contributed Items

PAGE 4 / 10

NAME OF COMMITTEE (in Full)

KANYE 2020

Report Covering the Period: From:

07 / 01 / 2022

To:

09 / 30 / 2022

II. DISBURSEMENTS

**COLUMN A
Total This Period**

**COLUMN B
Election Cycle-to-Date**

| | | |
|--|---------|------------|
| 23. OPERATING EXPENDITURES..... | 904.00 | 1785537.82 |
| 24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 25. FUNDRAISING DISBURSEMENTS | 0.00 | 0.00 |
| 26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS..... | 0.00 | 0.00 |
| 27. LOAN REPAYMENTS MADE: | | |
| (a) Repayments of Loans made or Guaranteed by Candidate..... | 0.00 | 250000.00 |
| (b) Other Repayments | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)) | 0.00 | 250000.00 |
| 28. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees..... | 0.00 | 239000.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees | 0.00 | 0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b) and 28(c)) | 0.00 | 239000.00 |
| 29. OTHER DISBURSEMENTS | 233.98 | 233.98 |
| 30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29) | 1137.98 | 2274771.80 |

**III. CONTRIBUTED ITEMS
(Stock, Art Objects, Etc.)**

| | | |
|---|------|--|
| 31. ITEMS ON HAND TO BE LIQUIDATED (Attach List) | 0.00 | |
|---|------|--|

FEC Form 3P (Rev. 05/2016)
Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

**ALLOCATION OF PRIMARY EXPENDITURES
BY STATE FOR
A PRESIDENTIAL CANDIDATE**
(Used Only by Primary Committees Receiving
or Expecting To Receive Federal Funds)

1. NAME OF COMMITTEE (in full, type or print)

2. FEC IDENTIFICATION NUMBER

C C00751701

KANYE 2020

ADDRESS (number and street) 3202 BIG HORN AVE

CODY

CITY

WY

STATE

82414

ZIP CODE

3. NAME OF CANDIDATE

ALLOCATION BY STATE

| STATE | ALLOCATION This Period | TOTAL ALLOCATION To Date |
|----------------------|------------------------|--------------------------|
| Alabama | 0.00 | 0.00 |
| Alaska | 0.00 | 0.00 |
| Arizona | 0.00 | 0.00 |
| Arkansas | 0.00 | 0.00 |
| California | 0.00 | 0.00 |
| Colorado | 0.00 | 0.00 |
| Connecticut | 0.00 | 0.00 |
| Delaware | 0.00 | 0.00 |
| District of Columbia | 0.00 | 0.00 |
| Florida | 0.00 | 0.00 |
| Georgia | 0.00 | 0.00 |
| Hawaii | 0.00 | 0.00 |
| Idaho | 0.00 | 0.00 |
| Illinois | 0.00 | 0.00 |

| <i>STATE</i> | <i>ALLOCATION This Period</i> | <i>TOTAL ALLOCATION To Date</i> |
|----------------|-------------------------------|---------------------------------|
| Indiana | 0.00 | 0.00 |
| Iowa | 0.00 | 0.00 |
| Kansas | 0.00 | 0.00 |
| Kentucky | 0.00 | 0.00 |
| Louisiana | 0.00 | 0.00 |
| Maine | 0.00 | 0.00 |
| Maryland | 0.00 | 0.00 |
| Massachusetts | 0.00 | 0.00 |
| Michigan | 0.00 | 0.00 |
| Minnesota | 0.00 | 0.00 |
| Mississippi | 0.00 | 0.00 |
| Missouri | 0.00 | 0.00 |
| Montana | 0.00 | 0.00 |
| Nebraska | 0.00 | 0.00 |
| Nevada | 0.00 | 0.00 |
| New Hampshire | 0.00 | 0.00 |
| New Jersey | 0.00 | 0.00 |
| New Mexico | 0.00 | 0.00 |
| New York | 0.00 | 0.00 |
| North Carolina | 0.00 | 0.00 |
| North Dakota | 0.00 | 0.00 |
| Ohio | 0.00 | 0.00 |
| Oklahoma | 0.00 | 0.00 |
| Oregon | 0.00 | 0.00 |
| Pennsylvania | 0.00 | 0.00 |

| STATE | ALLOCATION This Period | TOTAL ALLOCATION To Date |
|----------------|------------------------|--------------------------|
| Rhode Island | 0.00 | 0.00 |
| South Carolina | 0.00 | 0.00 |
| South Dakota | 0.00 | 0.00 |
| Tennessee | 0.00 | 0.00 |
| Texas | 0.00 | 0.00 |
| Utah | 0.00 | 0.00 |
| Vermont | 0.00 | 0.00 |
| Virginia | 0.00 | 0.00 |
| Washington | 0.00 | 0.00 |
| West Virginia | 0.00 | 0.00 |
| Wisconsin | 0.00 | 0.00 |
| Wyoming | 0.00 | 0.00 |
| Puerto Rico | 0.00 | 0.00 |
| Guam | 0.00 | 0.00 |
| Virgin Islands | 0.00 | 0.00 |
| TOTALS | 0.00 | 0.00 |

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|--|
| <input type="checkbox"/> 16 | <input type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input checked="" type="checkbox"/> 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)
KANYE 2020

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

Mailing Address **One Verizon Way**

City
New Jersey

State
NJ

Zip Code
07920

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

233.98

Transaction ID : SA21.33769

Date of Receipt

M M / D D / Y Y Y Y
07 / 22 / 2022

Fraudulent Charge Returned

Amount of Each Receipt this Period

233.98

Memo Item

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

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

233.98

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

233.98

SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)
KANYE 2020

| | | | | | |
|---|--|------------------------------------|--|--|--|
| Full Name (Last, First, Middle Initial) A. CT Corporation | | | Date of Disbursement MM / DD / YYYY 09 / 19 / 2022 | | |
| Mailing Address PO Box 4349 | | | FEC Identification Number C | | |
| City Carol Stream | State IL | Zip Code 60197 | Transaction ID : SB23.33762 | | |
| Purpose of Disbursement Representation Services | | Category/ Type 101 | Amount of Each Disbursement this Period 904.00 | | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: | District: | | | | |

| | | | | | |
|---|--|-------------------|---|--|--|
| Full Name (Last, First, Middle Initial) B. | | | Date of Disbursement MM / DD / YYYY | | |
| Mailing Address | | | FEC Identification Number C | | |
| City | State | Zip Code | Amount of Each Disbursement this Period | | |
| Purpose of Disbursement | | Category/ Type | <input type="checkbox"/> Memo Item | | |
| Candidate Name | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: | District: | | | | |

| | | | | | |
|---|--|-------------------|---|--|--|
| Full Name (Last, First, Middle Initial) C. | | | Date of Disbursement MM / DD / YYYY | | |
| Mailing Address | | | FEC Identification Number C | | |
| City | State | Zip Code | Amount of Each Disbursement this Period | | |
| Purpose of Disbursement | | Category/ Type | <input type="checkbox"/> Memo Item | | |
| Candidate Name | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: | District: | | | | |

Subtotal Of Receipts This Page (optional)..... **904.00**

Total This Period (last page this line number only)..... **904.00**

SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|
| <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)
KANYE 2020

| | | | | | |
|---|--|------------------------------------|--|--|--|
| Full Name (Last, First, Middle Initial) A. Verizon | | | Date of Disbursement MM / DD / YYYY 07 / 17 / 2022 | | |
| Mailing Address One Verizon Way | | | FEC Identification Number C | | |
| City New Jersey | State NJ | Zip Code 07920 | Transaction ID : SB29.33765 | | |
| Purpose of Disbursement Fraudulent Charge Returned | | Category/ Type 101 | Amount of Each Disbursement this Period 233.98 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: | District: | | | | |

| | | | | | |
|---|--|-------------------|---|--|--|
| Full Name (Last, First, Middle Initial) B. | | | Date of Disbursement MM / DD / YYYY | | |
| Mailing Address | | | FEC Identification Number C | | |
| City | State | Zip Code | Amount of Each Disbursement this Period | | |
| Purpose of Disbursement | | Category/ Type | Memo Item <input type="checkbox"/> | | |
| Candidate Name | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: | District: | | | | |

| | | | | | |
|---|--|-------------------|---|--|--|
| Full Name (Last, First, Middle Initial) C. | | | Date of Disbursement MM / DD / YYYY | | |
| Mailing Address | | | FEC Identification Number C | | |
| City | State | Zip Code | Amount of Each Disbursement this Period | | |
| Purpose of Disbursement | | Category/ Type | Memo Item <input type="checkbox"/> | | |
| Candidate Name | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: | District: | | | | |

Subtotal Of Receipts This Page (optional)..... 233.98

Total This Period (last page this line number only)..... 233.98