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FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

ГОКМ 3		For An A	uthorized Co	mmittee		Office Use Only			
1. NAME OF COMMITTEE (in		PE OR PRINT	•	Example: If typing over the lines.	ı, type	12FE4M5			
Hattersley for	Congress						1		
ADDRESS (number a		PO Box 6998							
*	[
Check if di than previo	ously	Brandon			1	FL 335	508		
reported. (A	ACC) L		CITY ▲		<u> </u>	STATE A	ZIP CODE ▲		
2. FEC IDENTIFI	CATION NUM	IBER ▼					7		
C C007139	ΛΩ		3. IS THIS	NEW		∠ AMENDED	STATE ▼ DISTRICT		
C 000/139	09		REPORT	(N)	OR	(A)	FL 15		
4. TYPE OF RE	PORT (Choose	se One)	(b) 12-Day PF	RE -Election Repor	t for the:				
(a) Quarterly F	Reports:					1			
April 1	5 Quarterly Rep	port (Q1)		Primary (12P)	L	General (12G)	Runoff (12R)		
Luke 46	- Overterly Den	out (O2)		Convention (1	2C)	Special (12S)			
July 18	5 Quarterly Rep	ort (Q2)		M M /	D D /	YYYY	in the		
Octobe	er 15 Quarterly	Report (Q3)	Election of	n			State of		
x Januar	y 31 Year-End	Report (YE)	(c) 30-Day PC	DST -Election Repo	ort for the:				
				General (30G)	Г	Runoff (30R)	Special (30S)		
				General (30d)		Hulloli (30H)	Special (303)		
Termin	ation Report (Ti	ER)	Election of	M M /	D D /	YYYY	in the State of		
			Liection				State of		
	M M	/ D D /	у у у у 2020		M M	/ D D / Y	7 Y Y		
Covering Period	10	O1	2020	through	12	31	2020		
I certify that I have o	evamined this	Report and to	the hest of my	knowledge and h	elief it is tr	TUE correct and co	amplete		
Type or Print Name		Haggard, Lora		Knowledge and b	ener it is tr	ue, correct and co	impiete.		
Type of Time Name	or measurer								
Signature of Treasur		rd, Lora, , ,		[Electronically F	iled1 F	Date 05	05 / Y Y Y Y Y		
				- ·					
	false, erroneou	ıs, or incomplet	e information ma	y subject the pers	on signing t	this Report to the p	enalties of 52 U.S.C. §30109		
Office Use							FEC FORM 3		
Only							(Revised 05/2016)		

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name Hattersley for Congress

2020 10 2020 12 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) 0.00 710684.98 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 63406.38 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 647278.60 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 239.90 679124.63 (from Line 17) (b) Total Offsets to Operating 22524.57 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 239.90 656600.06 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 588.59 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 10000.00 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

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

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- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name Hattersley for Congress		
	10 01 2020 7	To: 12 31 2020
I. RECEIPTS		
COLUMN A Total this Period	COLUMN B Election Cycle Total as of	COLUMN C Total for
	11 03 2020 (date of general election)	11 04 2020 (date after general election)
 11. CONTRIBUTIONS (other than loans) FROM: (a) Individuals/Persons Other than Political Committees (i) Itemized (use Schedule A) 		through 12 31 2020 (last day of reporting period)
0.00 (ii) Unitemized	552053.50	0.00
0.00	127200.40	0.00
(iii) Total of contributions from individu	als	
0.00	679253.90	0.00
(b) Political Party Committees		
0.00	0.00	0.00
(c) Other Political Committees		
0.00	31156.08	0.00

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)							
	(d) The Candidate									
	0.00	275.00	0.00							
	(e) TOTAL CONTRIBUTIONS (other than lo	eans) (add Lines 11(a)(iii), (b), (c) and (d))								
	0.00	710684.98	0.00							
12.	2. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES									
	0.00	0.00	0.00							
13.	LOANS: (a) Made or Guaranteed by the Candidate									
	0.00	10000.00	0.00							
	(b) All Other Loans									
	0.00	0.00	0.00							
	(c) TOTAL LOANS (add Lines 13(a) and (b))									
	0.00	10000.00	0.00							
14.	OFFSETS TO OPERATING EXPENDITURES	S (Refunds, rebates, etc.)								
	0.00	22524.57	0.00							
15.	OTHER RECEIPTS (Dividends, Interest, etc.)									
	0.00	0.00	0.00							
16.	TOTAL RECEIPTS (add 11(e), 12, 13(c), 14	and 15)								
	0.00	743209.55	0.00							

Report of Receipts and Disbursements

	FEC Form 3 (Revised 1/01)	•	PAGE 5 / 11
Wr	ite or Type Committee Name		
Н	attersley for Congress		
Re	port Covering the Period: From:		To: 12 31 2020
	II. DISBURSEMENTS		
	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17.	OPERATING EXPENDITURES		
	239.90	679124.63	89.95
18.	TRANSFERS TO OTHER AUTHORIZED COM	MMITTEES	
	0.00	0.00	0.00
-	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Ca	andidate	
	0.00	0.00	0.00
	(b) Of All Other Loans		
	0.00	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines	19(a) and 19(b))	
	0.00	0.00	0.00
	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political C	Committees	
	0.00	58406.38	0.00
	(b) Political Party Committees		
	0.00	0.00	0.00

Report of Receipts and Disbursements

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FEC Form 3 (Revised 1/01)

	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)				
	(c) Other Political Committees (such as PAC	Cs)					
	0.00	5000.00	0.00				
	(d) TOTAL CONTRIBUTION REFUNDS (add	d Lines 20(a), (b) and (c))					
	0.00	63406.38	0.00				
21.	OTHER DISBURSEMENTS						
	0.00	0.00	0.00				
22.	TOTAL DISBURSEMENTS (add Lines 17, 18	3, 19(c), 20(d) and 21)					
	239.90	742531.01	89.95				
	III. NET CONTRIBUTIONS (OTHER (Note: Substitute in lieu of Line #6	THAN LOANS) of Summary Page for this report only; subtra	act Line 20(d) from Line 11(e))				
	0.00	647278.60	0.00				
	IV. NET OPERATING EXPENDITURE	ES .					
	(Note: Substitute in lieu of Line #	[‡] 7 of Summary Page for this report only; sub	otract Line 14 from Line 17)				
	239.90	656600.06	89.95				
	V. CASH SUI	MMARY					
23.	CASH ON HAND AT BEGINNING OF REPO	RTING PERIOD	828.49				
24.	TOTAL RECIEPTS THIS PERIOD (from Line	16)	0.00				
25.	SUBTOTAL (add Line 23 and Line 24)		828.49				
26.	TOTAL DISBURSEMENTS THIS PERIOD (fr	om Line 22)	239.90				
27.	CASH ON HAND AT CLOSE OF REPORTIN	IG PERIOD (subtract Line 26 from Line 25)	588.59				

SCHEDULE B (FEC Form 3)

PAGE 7 11 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) Hattersley for Congress Full Name (Last, First, Middle Initial) Date of Disbursement Google 2020 10 02 Mailing Address 1600 Amphitheatre Pkwy City State Zip Code **FEC Identification Number** CA Mountain View 94043-1351 Purpose of Disbursement Software Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2020 Office Sought: House 60.00 Senate Primary General **Transaction ID: 500713644** Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) Google Date of Disbursement Mailing Address 1600 Amphitheatre Pkwy 03 2020 City State Zip Code **FEC Identification Number** Mountain View CA 94043-1351 Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2020 60.00 Office Sought: House Senate Primary General **Transaction ID: 500738981** Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) c. NGP Van, Inc. Date of Disbursement Mailing Address 1101 15Th St NW 10 2020 Ste 500 City State Zip Code **FEC Identification Number** 20005-5006 Washington DC Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2020 150.00 Office Sought: House Senate Primary General **Transaction ID: 500738979** President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 270.00 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3)

PAGE 8 11 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

ITEMIZED DISBURSEMENTS 19b 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) Hattersley for Congress Full Name (Last, First, Middle Initial) Date of Disbursement Statecraft Digital 2020 10 02 Mailing Address 37 N Orange Ave Ste 500 City State Zip Code **FEC Identification Number** FΙ Orlando 32801-2459 Purpose of Disbursement Prior Period Void Reissued on 9/28/2020 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2020 - 150.00 Office Sought: House Senate Primary General **Transaction ID: 500738977** Other (specify) President Memo Item 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 Senate Primary General President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... -150.00TOTAL This Period (last page this line number only)..... 120.00

S

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS				Use separate sc for each categor Detailed Summa	hedule(s) (y of the	FOR LINE NUMBER: PAGE 9 OF 11 (check only one) 17					
						erson for the purpose of soliciting contributions to solicit contributions from such committee.					
I \	AME OF COMM Hattersley f	IITTEE (In Full) or Congress									
	ull Name (Last, Horwitz, Ro	First, Middle Initial) bert, , ,				Date of Disbursement					
М	failing Address	PO Box 329				12 31 2020					
	ity Suffern		State NY	Zip Code 10901-0329		FEC Identification Number					
Pı	urpose of Disbu Prior Period Voic	irsement I: Contribution Refund	<u>'</u>	-		C					
C	andidate Name				Category/ Type	Amount of Each Disbursement this Period					
	office Sought:	House Senate President District:	Disbursement For Primary Other (s		,,,,,,	Transaction ID : 500738975 Memo Item Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
В. М	Horwitz, Ro										
	ity Suffern		State NY	Zip Code 10901-0329		FEC Identification Number					
P	urpose of Disbu Reissue: Contrib	rsement oution Refund	1			C					
C	andidate Name				Category/ Type	Amount of Each Disbursement this Period					
				r: 2020 General specify)	, ,,	2800.00 Transaction ID : 500738976					
S	tate:	District:	,	·		Memo Item					
	ull Name (Last, Kohn, Lynn	First, Middle Initial)				Date of Disbursement					
M	failing Address	1014 Shepherd St				12 / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	ity Ourham		State NC	Zip Code 27707-1328		FEC Identification Number					
Pi [Purpose of Disbursement Prior Period Void: Contribution Refund					C					
C	andidate Name			Category/ Type	Amount of Each Disbursement this Period						
Office Sought: House Senate President Disbursement I Prima Other						- 25.00 Transaction ID : 500738973 Memo Item					
9	tate:	District:		▼		I WIGHTO ILGHT					

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

SCHEDULE B (FEC Form 3)

	FOR LINE NUMBER:					PAGE	10	OF	1	11
Use separate schedule(s)	(check only one)									
for each category of the	17 18			18		19a		1	19b	
Detailed Summary Page		×	20a		20b		20c			21
ly not be sold or used by any person for the purpose of soliciting contributions ddress of any political committee to solicit contributions from such committee.										

ITEMIZED DISBURSEMENTS Any information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ac NAME OF COMMITTEE (In Full) Hattersley for Congress Full Name (Last, First, Middle Initial) Date of Disbursement A. Kohn, Lynn, , , 2020 Mailing Address 1014 Shepherd St 31 City State Zip Code FEC Identification Number NC Durham 27707-1328 Purpose of Disbursement Reissue: Contribution Refund Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2020 25.00 Office Sought: House Senate Primary General **Transaction ID: 500738974** Other (specify) President Memo Item 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 Office Sought: Disbursement For: House Senate Primary General President Other (specify) 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: House Disbursement For: Senate Primary General President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 25.00 TOTAL This Period (last page this line number only)..... 0.00

SCHEDULE C (FEC Form 3) **LOANS**

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

PAGE 11 OF FOR LINE NUMBER: **X** 13a (check only one)

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13b Transaction ID: 7287590L NAME OF COMMITTEE (In Full) Hattersley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2020 Memo Item Primary Hattersley, Adam, , , General Mailing Address 5833 Tulip Flower Dr Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate FL 33578-3741 Riverview Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D27^D M 07M **2020** ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only) 10000.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.