



**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**Steve Knight for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	- 2480.00	- 936.69
(b) Total Contribution Refunds (from Line 20(d)) .....	14400.00	17753.14
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	- 16880.00	- 18689.83
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	12372.74	80835.89
(b) Total Offsets to Operating Expenditures (from Line 14).....	362.90	3546.56
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	12009.84	77289.33
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	28063.83	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	

**For further information contact:**

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

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

DETAILED SUMMARY PAGE  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Steve Knight for Congress

Report Covering the Period: From: MM / DD / YYYY 11 / 27 / 2018 To: MM / DD / YYYY 12 / 31 / 2018

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).....	- 2700.00	- 1212.69
(ii) Unitemized.....	220.00	276.00
(iii) TOTAL of contributions from individuals ▶	- 2480.00	- 936.69
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	- 2480.00	- 936.69
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.).....	362.90	3546.56
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)..... ▶	- 2117.10	2609.87

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 16

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	12372.74	80835.89
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 .....	14400.00	17753.14
(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)).....	14400.00	17753.14
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	26772.74	98589.03

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	56953.67
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	- 2117.10
25. SUBTOTAL (add Line 23 and Line 24).....	54836.57
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	26772.74
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	28063.83

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 16  
(check only one)  
 11a 12  11b 13a  11c 13b  11d 14  15

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NAME OF COMMITTEE (In Full)  
**Steve Knight for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Reily, Jason, S, ,**

Mailing Address 3427 Indian Mesa Drive

City: Thousand Oaks      State: CA      Zip Code: 91360

FEC ID number of contributing federal political committee: **C**

Name of Employer: Self Employed      Occupation: Electrical Contractor

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 - 5400.00

Date of Receipt  
 /  /

**Transaction ID : A-39081**

Amount of Each Receipt this Period  
 - 2700.00

Memo Item  
 Returned 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  
 /  /

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  
 /  /

Amount of Each Receipt this Period

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

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

- 2700.00

- 2700.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 16	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Steve Knight for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Cardmember Service**

Mailing Address PO Box 6294

City Carol Stream State IL Zip Code 60197

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
18356.92

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 30 / 2018

**Transaction ID : A-39076**

Amount of Each Receipt this Period  
246.55

Memo Item  
Refund on Fees

**B.** Full Name (Last, First, Middle Initial)  
**United States Treasury**

Mailing Address P.O. Box 7704

City San Francisco State CA Zip Code 94120

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
27242.19

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 27 / 2018

**Transaction ID : A-28442**

Amount of Each Receipt this Period  
116.35

Memo Item  
Payroll Tax Refund

**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 Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	362.90
<b>TOTAL</b> This Period (last page this line number only).....▶	362.90

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 16	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Steve Knight for Congress**

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2018	
Mailing Address PO Box 06649			FEC Identification Number C	
City Chicago	State IL	Zip Code 60606-0649	Amount of Each Disbursement this Period 200.00	
Purpose of Disbursement Travel		Category/ Type 002	Transaction ID : B-39049	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: Subvendor of-Cardmember Service- Elan		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Intuit</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2018	
Mailing Address 2632 Marine Way			FEC Identification Number C	
City Mountain View	State CA	Zip Code 94043	Amount of Each Disbursement this Period 317.00	
Purpose of Disbursement Payroll Service		Category/ Type 001	Transaction ID : B-28487	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Employment Development Department</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2018	
Mailing Address 3321 Power Inn Road Suite 220			FEC Identification Number C	
City Sacramento	State CA	Zip Code 95826	Amount of Each Disbursement this Period 199.67	
Purpose of Disbursement Payroll Taxes		Category/ Type 001	Transaction ID : B-39038	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	516.67
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 16	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Steve Knight for Congress**

**A. Cardmember Service**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 6294

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement  
Credit Card Payments: See Memos

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  
 Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
11 / 27 / 2018

FEC Identification Number  
C

Amount of Each Disbursement this Period  
204.00

Transaction ID : B-28449

Memo Item

**B. California Republican Party Federal Account**

Full Name (Last, First, Middle Initial)  
Mailing Address 1001 K Street  
4th Floor

City Sacramento State CA Zip Code 95814

Purpose of Disbursement  
Telephone Minutes

Candidate Name  
California Republican Party Federal Account

Office Sought:  House  Senate  President

Disbursement For: 2018  
 Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
12 / 07 / 2018

FEC Identification Number  
C C00140590

Amount of Each Disbursement this Period  
3031.93

Transaction ID : B-38966

Memo Item

**C. United Airlines**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 06649

City Chicago State IL Zip Code 60606-0649

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  
 Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
12 / 26 / 2018

FEC Identification Number  
C

Amount of Each Disbursement this Period  
376.40

Transaction ID : B-39046

Memo Item MEMO: Subvendor of-Cardmember Service- Elan

**SUBTOTAL** of Disbursements This Page (optional).....▶ 3235.93

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



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 16			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Steve Knight for Congress**

**A. Cardmember Service- Elan**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 790408

City St. Louis State MO Zip Code 63179-0408

Purpose of Disbursement Credit Card Payment: See Memos

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 27 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 3452.27

Transaction ID : B-28448

Memo Item

**B. Trump International Hotel**

Full Name (Last, First, Middle Initial)  
Mailing Address 1100 Pennsylvania Avenue Northwest

City Washington State DC Zip Code 20004

Purpose of Disbursement Lodging

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 26 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 442.00

Transaction ID : B-39054

Memo Item MEMO: Subvendor of-Cardmember Service- Elan

**C. Hotels.com**

Full Name (Last, First, Middle Initial)  
Mailing Address 5400 Lbj Freeway Suite 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement Lodging

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 26 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 687.10

Transaction ID : B-39045

Memo Item MEMO: Subvendor of-Cardmember Service- Elan

**SUBTOTAL** of Disbursements This Page (optional).....▶ 3452.27

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 16			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Steve Knight for Congress**

Full Name (Last, First, Middle Initial) <b>A. The KAL Group</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2018		
Mailing Address 9460 Tegner Road			FEC Identification Number C		
City Hilmar	State CA	Zip Code 95324	Amount of Each Disbursement this Period 1370.00		
Purpose of Disbursement Bookkeeping		Category/ Type 001	Transaction ID : B-39036		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Cardmember Service- Elan</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2018		
Mailing Address PO Box 790408			FEC Identification Number C		
City St. Louis	State MO	Zip Code 63179-0408	Amount of Each Disbursement this Period 2889.02		
Purpose of Disbursement Credit Card Payment:See Memos		Category/ Type 001	Transaction ID : B-39039		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Integrated Solutions Political</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2018		
Mailing Address 4142 Adams Avenue #103-550			FEC Identification Number C		
City San Diego	State CA	Zip Code 92116	Amount of Each Disbursement this Period 825.00		
Purpose of Disbursement Software		Category/ Type 001	Transaction ID : B-39078		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5084.02
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 16	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Steve Knight for Congress**

Full Name (Last, First, Middle Initial) <b>A. Holiday Inn Capitol</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2018	
Mailing Address 550 C Street Southwest			FEC Identification Number C	
City Washington	State DC	Zip Code 20024	Amount of Each Disbursement this Period 105.34	
Purpose of Disbursement Travel		Category/ Type 002	Transaction ID : B-39061	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: Subvendor of-Cardmember Service- Elan		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2018	
Mailing Address 942 South Shady Grove Road			FEC Identification Number C	
City Memphis	State TN	Zip Code 38120	Amount of Each Disbursement this Period 251.70	
Purpose of Disbursement Shipping		Category/ Type 001	Transaction ID : B-28451	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: Subvendor of-Cardmember Service		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Holiday Inn Capitol</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2018	
Mailing Address 550 C Street Southwest			FEC Identification Number C	
City Washington	State DC	Zip Code 20024	Amount of Each Disbursement this Period 77.00	
Purpose of Disbursement Travel		Category/ Type 002	Transaction ID : B-39059	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: Subvendor of-Cardmember Service- Elan		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 16	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Steve Knight for Congress**

Full Name (Last, First, Middle Initial) <b>A. Hotels.com</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2018
Mailing Address 5400 Lbj Freeway Suite 500		FEC Identification Number C
City Dallas	State TX	Zip Code 75240-1019
Purpose of Disbursement Lodging	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 128.46	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-39048
State: District:	<input checked="" type="checkbox"/> Memo Item MEMO: Subvendor of-Cardmember Service- Elan	

Full Name (Last, First, Middle Initial) <b>B. Salt Creek Grille</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2018
Mailing Address 24415 Town Center Drive #115		FEC Identification Number C
City Santa Clarita	State CA	Zip Code 91355
Purpose of Disbursement 10.19.18 Fundraising Event	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 2510.39	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-28466
State: District:	<input checked="" type="checkbox"/> Memo Item MEMO: Subvendor of-Cardmember Service- Elan	

Full Name (Last, First, Middle Initial) <b>c. Holiday Inn Capitol</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2018
Mailing Address 550 C Street Southwest		FEC Identification Number C
City Washington	State DC	Zip Code 20024
Purpose of Disbursement Travel	Category/Type 002	
Candidate Name	Amount of Each Disbursement this Period 28.77	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-39055
State: District:	<input checked="" type="checkbox"/> Memo Item MEMO: Subvendor of-Cardmember Service- Elan	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	12288.89

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 16			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Steve Knight for Congress**

Full Name (Last, First, Middle Initial) <b>A. Reily, Jason, S, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2018		
Mailing Address 3427 Indian Mesa Drive			FEC Identification Number C		
City Thousand Oaks	State CA	Zip Code 91360	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Refund		Category/ Type 010	Transaction ID : B-28456		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Brauer, Stephen, F, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2018		
Mailing Address 11250 Hunter Drive			FEC Identification Number C		
City Bridgeton	State MO	Zip Code 63044	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Refund		Category/ Type 010	Transaction ID : B-28452		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Jones, Jerry, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2018		
Mailing Address 27808 Alder Glen Circle			FEC Identification Number C		
City Santa Clarita	State CA	Zip Code 91354	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Refund		Category/ Type 010	Transaction ID : B-28455		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 16			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Steve Knight for Congress**

Full Name (Last, First, Middle Initial) <b>A. Norris, Mark, L, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2018		
Mailing Address 3336 Camino Hermanos					
City Lancaster	State CA	Zip Code 93536-2801	FEC Identification Number C		
Purpose of Disbursement Refund		Category/ Type 010	Amount of Each Disbursement this Period 400.00		
Candidate Name		Transaction ID : B-28458			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Gallagher, Joanne, L, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2018		
Mailing Address 23951 Decoro Drive #202					
City Santa Clarita	State CA	Zip Code 91354	FEC Identification Number C		
Purpose of Disbursement Refund		Category/ Type 010	Amount of Each Disbursement this Period 2700.00		
Candidate Name		Transaction ID : B-28454			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Green, Jeffrey, A, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2018		
Mailing Address 9633 Eagle Ridge Drive					
City Bethesda	State MD	Zip Code 20817-3920	FEC Identification Number C		
Purpose of Disbursement Refund		Category/ Type 010	Amount of Each Disbursement this Period 500.00		
Candidate Name		Transaction ID : B-28457			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 16			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Steve Knight for Congress**

Full Name (Last, First, Middle Initial) <b>A. Gallagher, Karri, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2018		
Mailing Address 27808 Alder Glen Circle			FEC Identification Number C		
City Santa Clarita	State CA	Zip Code 91354	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Refund		Category/ Type 010	Transaction ID : B-28453		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement M M / D D / Y Y Y Y		
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) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	14400.00

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Steve Knight for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>California Republican Party Federal Account</b>		Nature of Debt (Purpose): Telephone Minutes	
Mailing Address 1001 K Street 4th Floor			
City Sacramento	State CA	Zip Code 95814	

Outstanding Balance Beginning This Period 3031.93		Transaction ID : D-38962	
Amount Incurred This Period 0.00	Payment This Period 3031.93	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):	
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):	
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	0.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	0.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	