

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
TOM NORTON FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	468.68	12407.89
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	468.68	12407.89
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	74.72	21996.57
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	74.72	21996.57
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1321.68	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	36405.60	

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

TOM NORTON FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	4900.00
(ii) Unitemized.....	468.68	7507.89
(iii) TOTAL of contributions from individuals ▶	468.68	12407.89
(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))..	468.68	12407.89
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	10910.33
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	10910.33
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.03
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	468.68	23318.25

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	74.72	21996.57
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
(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)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	74.72	21996.57

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	927.72
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	468.68
25. SUBTOTAL (add Line 23 and Line 24).....	1396.40
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	74.72
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1321.68

**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 5 OF 18
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
TOM NORTON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Norton, Thomas, John, ,

Mailing Address 4208 Pettis Ave

City Ada	State MI	Zip Code 48301
-------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** H0MI03266

Name of Employer Self	Occupation Candidat
--------------------------	------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10910.33

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2019

Transaction ID : SA11D.4554

Amount of Each Receipt this Period
6000.00

Memo Item
advance for legal services; listed in schedule D

B. Full Name (Last, First, Middle Initial)
Norton, Thomas, John, ,

Mailing Address 4208 Pettis Ave

City Ada	State MI	Zip Code 48301
-------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** H0MI03266

Name of Employer Self	Occupation Candidat
--------------------------	------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10910.33

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2019

Transaction ID : SA11D.4555

Amount of Each Receipt this Period
4721.00

Memo Item
advance for event cost; listed in schedule D

C. Full Name (Last, First, Middle Initial)
Norton, Thomas, John, ,

Mailing Address 4208 Pettis Ave

City Ada	State MI	Zip Code 48301
-------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** H0MI03266

Name of Employer Self	Occupation Candidat
--------------------------	------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10910.33

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2019

Transaction ID : SA11D.4556

Amount of Each Receipt this Period
8990.09

Memo Item
advance for digital advertising; listed in schedule D

SUBTOTAL of Receipts This Page (optional)..... ▶	0.00
TOTAL This Period (last page this line number only)..... ▶	

**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 18	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 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)
TOM NORTON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Norton, Thomas, John, ,

Mailing Address 4208 Pettis Ave

City Ada	State MI	Zip Code 48301
-------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** H0MI03266

Name of Employer Self	Occupation Candidat
--------------------------	------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10910.33

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		31		2019

Transaction ID : SA11D.4557

Amount of Each Receipt this Period
750.00

Memo Item
advance for event costs; listed in schedule D

B. Full Name (Last, First, Middle Initial)
Norton, Thomas, John, ,

Mailing Address 4208 Pettis Ave

City Ada	State MI	Zip Code 48301
-------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** H0MI03266

Name of Employer Self	Occupation Candidat
--------------------------	------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10910.33

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		31		2019

Transaction ID : SA11D.4558

Amount of Each Receipt this Period
3000.00

Memo Item
advance for campaign staff; listed in schedule D

C. Full Name (Last, First, Middle Initial)
Norton, Thomas, John, ,

Mailing Address 4208 Pettis Ave

City Ada	State MI	Zip Code 48301
-------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** H0MI03266

Name of Employer Self	Occupation Candidat
--------------------------	------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10910.33

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		31		2019

Transaction ID : SA11D.4559

Amount of Each Receipt this Period
335.29

Memo Item
advance for office supplies; listed in schedule D

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**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 7 OF 18	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 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)
TOM NORTON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Norton, Thomas, John, ,

Mailing Address 4208 Pettis Ave

City Ada	State MI	Zip Code 48301
-------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** H0MI03266

Name of Employer Self	Occupation Candidat
--------------------------	------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10910.33

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		31		2019

Transaction ID : SA11D.4560

Amount of Each Receipt this Period
677.89

Memo Item
advance for t-shirts; listed in schedule D

B. Full Name (Last, First, Middle Initial)
Norton, Thomas, John, ,

Mailing Address 4208 Pettis Ave

City Ada	State MI	Zip Code 48301
-------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** H0MI03266

Name of Employer Self	Occupation Candidat
--------------------------	------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10910.33

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		31		2019

Transaction ID : SA11D.4561

Amount of Each Receipt this Period
1021.00

Memo Item
advance for campaign flyers; listed in schedule D

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).....▶	0.00
TOTAL This Period (last page this line number only).....▶	0.00

**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 18	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 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)
TOM NORTON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Stripe		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2019
Mailing Address 910 Townsend St		FEC Identification Number C
City San Francisco	State CA	Zip Code 94103
Purpose of Disbursement Payment Processing Fees		Amount of Each Disbursement this Period 7.95
Candidate Name		Transaction ID : SB17.4609
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2019
Mailing Address 910 Townsend St		FEC Identification Number C
City San Francisco	State CA	Zip Code 94103
Purpose of Disbursement Payment Processing Fees		Amount of Each Disbursement this Period 50.72
Candidate Name		Transaction ID : SB17.4611
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
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: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	58.67
TOTAL This Period (last page this line number only).....▶	58.67

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **TOM NORTON FOR CONGRESS** Transaction ID : **SC/10.4456**

LOAN SOURCE Full Name (Last, First, Middle Initial) Norton, Thomas, John, ,		<input type="checkbox"/> Memo Item	Election: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 4208 Pettis Ave			
City Ada	State MI	ZIP Code 48301	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 3169.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 3169.00
------------------------------------	------------------------------------	--

TERMS	Date Incurred M 04 / D 25 / Y 2019	Date Due M M / D D / Y 12/31/2022	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--------------	---------------------------------------	--------------------------------------	--	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed 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).....▶	[] 3169.00
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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **TOM NORTON FOR CONGRESS** Transaction ID : **SC/10.4176**

LOAN SOURCE Full Name (Last, First, Middle Initial) Norton, Thomas, John, ,		<input type="checkbox"/> Memo Item	Election: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 4208 Pettis Ave			
City Ada	State MI	ZIP Code 48301	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 1300.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1300.00
------------------------------------	------------------------------------	--

TERMS	Date Incurred M 06 / D 21 / Y 2019	Date Due M M / D D / Y 12/31/2022	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--------------	---------------------------------------	--------------------------------------	--	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed 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).....▶	1300.00
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.

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **TOM NORTON FOR CONGRESS** Transaction ID : **SC/10.4539**

LOAN SOURCE Full Name (Last, First, Middle Initial) Norton, Thomas, John, ,		<input type="checkbox"/> Memo Item	Election: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 4208 Pettis Ave			
City Ada	State MI	ZIP Code 48301	<input type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 1500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1500.00
------------------------------------	------------------------------------	--

TERMS	Date Incurred M 07 / D 12 / Y 2019	Date Due M M / D D / on demand	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--------------	---------------------------------------	-----------------------------------	--	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed 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).....▶	1500.00
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.

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **TOM NORTON FOR CONGRESS** Transaction ID : **SC/10.4541**

LOAN SOURCE Full Name (Last, First, Middle Initial) Norton, Thomas, John, ,		<input type="checkbox"/> Memo Item	Election: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 4208 Pettis Ave			
City Ada	State MI	ZIP Code 48301	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 750.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 750.00
-----------------------------------	------------------------------------	---

TERMS	Date Incurred M 08 / D 05 / Y 2019	Date Due M M / D D / Y on demand	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--------------	---------------------------------------	-------------------------------------	--	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed 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).....▶	[] 750.00
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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **TOM NORTON FOR CONGRESS** Transaction ID : **SC/10.4514**

LOAN SOURCE Full Name (Last, First, Middle Initial) Norton, Thomas, John, ,		<input type="checkbox"/> Memo Item	Election: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 4208 Pettis Ave			
City Ada	State MI	ZIP Code 48301	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 691.33	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 691.33
-----------------------------------	------------------------------------	---

TERMS	Date Incurred M 08 / D 09 / Y 2019 Y	Date Due M M / D D / Y on demand Y	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--------------	---	---------------------------------------	--	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed 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).....▶	691.33
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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **TOM NORTON FOR CONGRESS** Transaction ID : **SC/10.4538**

LOAN SOURCE Full Name (Last, First, Middle Initial) Norton, Thomas, John, ,		<input type="checkbox"/> Memo Item	Election: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 4208 Pettis Ave			
City Ada	State MI	ZIP Code 48301	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3000.00	0.00	3000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 08 / D 21 / Y 2019	M M / D D / on demand	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed 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).....▶	3000.00
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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **TOM NORTON FOR CONGRESS** Transaction ID : **SC/10.4521**

LOAN SOURCE Full Name (Last, First, Middle Initial) Norton, Thomas, John, ,		<input type="checkbox"/> Memo Item	Election: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 4208 Pettis Ave			
City Ada	State MI	ZIP Code 48301	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 500.00
-----------------------------------	------------------------------------	---

TERMS	Date Incurred M 09 / D 09 / Y 2019 Y	Date Due M M / D D / on demand Y	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--------------	---	-------------------------------------	--	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed 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).....▶	500.00
TOTALS This Period (last page in this line only).....▶	10910.33

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

NAME OF COMMITTEE (In Full)
TOM NORTON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Norton, Thomas, John, ,			Nature of Debt (Purpose): Legal Services
Mailing Address 4208 Pettis Ave			
City Ada	State MI	Zip Code 48301	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4570	
Amount Incurred This Period 6000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Norton, Thomas, John, ,			Nature of Debt (Purpose): Event Costs
Mailing Address 4208 Pettis Ave			
City Ada	State MI	Zip Code 48301	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4571	
Amount Incurred This Period 4721.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4721.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Norton, Thomas, John, ,			Nature of Debt (Purpose): Digital Advertising
Mailing Address 4208 Pettis Ave			
City Ada	State MI	Zip Code 48301	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4572	
Amount Incurred This Period 8990.09	Payment This Period 0.00	Outstanding Balance at Close of This Period 8990.09

1) SUBTOTALS This Period This Page (optional)	▶	19711.09
2) TOTALS This Period (last page this line number only)	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

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

NAME OF COMMITTEE (In Full)
TOM NORTON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Norton, Thomas, John, ,			Nature of Debt (Purpose): Event Costs
Mailing Address 4208 Pettis Ave			
City Ada	State MI	Zip Code 48301	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4573	
Amount Incurred This Period 750.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 750.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Norton, Thomas, John, ,			Nature of Debt (Purpose): Campaign Staff
Mailing Address 4208 Pettis Ave			
City Ada	State MI	Zip Code 48301	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4574	
Amount Incurred This Period 3000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Norton, Thomas, John, ,			Nature of Debt (Purpose): Office Supplies
Mailing Address 4208 Pettis Ave			
City Ada	State MI	Zip Code 48301	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4575	
Amount Incurred This Period 335.29	Payment This Period 0.00	Outstanding Balance at Close of This Period 335.29

1) SUBTOTALS This Period This Page (optional)	▶	4085.29
2) TOTALS This Period (last page this line number only)	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

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

NAME OF COMMITTEE (In Full)
TOM NORTON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Norton, Thomas, John, ,			Nature of Debt (Purpose): T-Shirts
Mailing Address 4208 Pettis Ave			
City Ada	State MI	Zip Code 48301	

Outstanding Balance Beginning This Period 0.00		Transaction ID : SD10.4576	
Amount Incurred This Period 677.89	Payment This Period 0.00	Outstanding Balance at Close of This Period 677.89	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Norton, Thomas, John, ,			Nature of Debt (Purpose): Campaign Flyers
Mailing Address 4208 Pettis Ave			
City Ada	State MI	Zip Code 48301	

Outstanding Balance Beginning This Period 0.00		Transaction ID : SD10.4577	
Amount Incurred This Period 1021.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1021.00	

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) SUBTOTALS This Period This Page (optional)	▶	1698.89
2) TOTALS This Period (last page this line number only)	▶	25495.27
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	▶	10910.33
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	36405.60