

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

DEVOLDER-SANTOS FOR CONGRESS

ADDRESS (number and street)

PO BOX 500884

Check if different than previously reported. (ACC)

ATLANTA

GA

31150

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00721365

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

NY

03

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 BOLES, JASON, D.,

Signature of Treasurer

BOLES, JASON, D.,

Date

M M /

D D /

Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office Use Only

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

DEVOLDER-SANTOS FOR CONGRESS

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2024 To: M M / D D / Y Y Y Y 03 / 31 / 2024

	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))....	274.85	203359.27
(b) Total Contribution Refunds (from Line 20(d))	21048.00	21048.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	- 20773.15	182311.27
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	321.25	182754.29
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	387.91
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	321.25	182366.38
8. Cash on Hand at Close of Reporting Period (from Line 27).....		
	1142.60	
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).....		
	781932.07	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

DEVOLDER-SANTOS 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).....	100.00	174198.25
(ii) Unitemized.....	174.85	13161.02
(iii) TOTAL of contributions from individuals ▶	274.85	187359.27
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	16000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	274.85	203359.27
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.)	0.00	387.91
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)..... ▶	274.85	203747.18

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	321.25	182754.29
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	85000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	85000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	21048.00	21048.00
(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)).....	21048.00	21048.00
21. OTHER DISBURSEMENTS	0.00	387.91
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	21369.25	289190.20

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	22237.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	274.85
25. SUBTOTAL (add Line 23 and Line 24).....	22511.85
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	21369.25
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1142.60

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 24
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 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)
DEVOLDER-SANTOS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ALLEN, JOANN, , ,

Mailing Address 13391 BANNER LAVA CAP ROAD

City NEVADA CITY State CA Zip Code 95959

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 13 / 2024

Transaction ID : RBCGAYU748HTABTMSQ

Amount of Each Receipt this Period
50.00

Memo Item

TOTAL EARMARKED THROUGH CONDUIT WINRED PAC. CONDUIT LIMIT NOT AFFECTED.

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. C C00694323

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
157021.20

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 13 / 2024

Transaction ID : RZEYJMF58HQKQS5HCHZ.

Amount of Each Receipt this Period
50.00

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. CONDUIT LIMIT NOT AFFECTED.

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

Mailing Address PO BOX 4877

City FOSTER CITY State CA Zip Code 94404

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 16 / 2024

Transaction ID : R6EADTBSWUAXZ5GTWI

Amount of Each Receipt this Period
25.00

Memo Item

TOTAL EARMARKED THROUGH CONDUIT WINRED PAC. CONDUIT LIMIT NOT AFFECTED.

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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: PAGE 6 OF 24
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DEVOLDER-SANTOS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WINRED PAC

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
157046.20

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 16 / 2024

Transaction ID : RUMZ8SVGVKNM4SM9/

Amount of Each Receipt this Period
25.00

Memo Item

TOTAL EARMARKED THROUGH CONDUIT.
CONDUIT LIMIT NOT AFFECTED.

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
157221.05

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2024

Transaction ID : RFXE8XFARKPVDRU8HM3I

Amount of Each Receipt this Period
174.85

Memo Item

TOTAL EARMARKED THROUGH CONDUIT.
CONDUIT LIMIT NOT AFFECTED.

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

Mailing Address 5480 BALSAM LN N

City MINNEAPOLIS State MN Zip Code 55442

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 04 / 2024

Transaction ID : RF2225EJGSGSPNV3X54E

Amount of Each Receipt this Period
25.00

Memo Item

TOTAL EARMARKED THROUGH CONDUIT WINRED
PAC. CONDUIT LIMIT NOT AFFECTED.

SUBTOTAL of Receipts This Page (optional)..... ▶ 25.00

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 24	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
DEVOLDER-SANTOS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WINRED PAC

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
156971.20

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 04 / 2024

Transaction ID : R3B94UAZYKCCGSW8XNW

Amount of Each Receipt this Period
25.00

Memo Item

TOTAL EARMARKED THROUGH CONDUIT.
CONDUIT LIMIT NOT AFFECTED.

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 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 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).....▶	100.00

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 24			
	<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)
DEVOLDER-SANTOS FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. CAPITOL HILL CLUB

Mailing Address 300 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement MEALS Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 16 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 31.25

Transaction ID : DZ9B84WWEK6XQPTZF2FJ

Memo Item

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

Mailing Address PO BOX 1

City ROSWELL State GA Zip Code 30077

Purpose of Disbursement CAMPAIGN FINANCE SOFTWARE SUBSCRIPTION Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 22 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 145.00

Transaction ID : DHTV4S2BN3PVC52K6CNX

Memo Item

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

Mailing Address PO BOX 1

City ROSWELL State GA Zip Code 30077

Purpose of Disbursement CAMPAIGN FINANCE SOFTWARE SUBSCRIPTION Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 21 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 145.00

Transaction ID : DYTAMAETMM83MJUEMB6

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 321.25

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 24			
	<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)
DEVOLDER-SANTOS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement RECONCILIATION OF UNREPORTED PROCESSING FEES REPORTED AS PART OF REPORT Candidate Name

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 18 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 111.69

Transaction ID : DU8HUN743DBFJKYE24GB

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement Candidate Name

Office Sought: House Senate President Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement Candidate Name

Office Sought: House Senate President Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 0.00

TOTAL This Period (last page this line number only).....▶ 321.25

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 24	
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
DEVOLDER-SANTOS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GNEDIN, NIKITA, , ,			Date of Disbursement MM / DD / YYYY 01 / 29 / 2024	
Mailing Address 877 FRANCISCO ST			FEC Identification Number C	
City LOS ANGELES	State CA	Zip Code 90017	Amount of Each Disbursement this Period 3300.00	
Purpose of Disbursement REFUND OF CONTRIBUTION DESIGNATED TO G2024 AND ITEMIZED IN PRIOR PERIOD		Category/Type 010	Transaction ID : D8W7767H5HHH5RAZBNYP	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. HAGAN, DAMON, , ,			Date of Disbursement MM / DD / YYYY 01 / 29 / 2024	
Mailing Address 8 HARBOR LANE			FEC Identification Number C	
City EAST QUOGUE	State NY	Zip Code 11942-4402	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement REFUND OF CONTRIBUTION DESIGNATED TO G2024 AND ITEMIZED IN PRIOR PERIOD		Category/Type 010	Transaction ID : D82WRHHRUG2BC4AFMJJD	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. LUO, JIANMIN, , ,			Date of Disbursement MM / DD / YYYY 01 / 29 / 2024	
Mailing Address 875 10TH STREET NORTHWEST APT #100			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20001	Amount of Each Disbursement this Period 333.00	
Purpose of Disbursement REFUND OF CONTRIBUTION DESIGNATED TO G2024 AND ITEMIZED IN PRIOR PERIOD		Category/Type 010	Transaction ID : DFWWH3FVUQPRSY2Z6PA4	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	4133.00
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 11 OF 24	
	<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)
DEVOLDER-SANTOS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SUN, TIANXIAO, , ,			Date of Disbursement MM / DD / YYYY 01 / 29 / 2024	
Mailing Address 36 BARTLETT AVENUE			FEC Identification Number C	
City LEXINGTON	State MA	Zip Code 02420	Amount of Each Disbursement this Period 3300.00	
Purpose of Disbursement REFUND OF CONTRIBUTION DESIGNATED TO G2024 AND ITEMIZED IN PRIOR PERIOD		Category/ Type 010	Transaction ID : D38WV588EM8WJGUDHMM	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Memo Item <input type="checkbox"/>	
Disbursement For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:		

Full Name (Last, First, Middle Initial) B. WANG, DAN, , ,			Date of Disbursement MM / DD / YYYY 01 / 29 / 2024	
Mailing Address 8 ROCHON COURT			FEC Identification Number C	
City MONTVILLE	State NJ	Zip Code 07045	Amount of Each Disbursement this Period 3300.00	
Purpose of Disbursement REFUND OF CONTRIBUTION DESIGNATED TO G2024 AND ITEMIZED IN PRIOR PERIOD		Category/ Type 010	Transaction ID : DBZXANCXNJ2GHXAHBW4	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Memo Item <input type="checkbox"/>	
Disbursement For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:		

Full Name (Last, First, Middle Initial) C. WEI, TONGYING, , ,			Date of Disbursement MM / DD / YYYY 01 / 29 / 2024	
Mailing Address 308 RAFF AVE			FEC Identification Number C	
City CARLE PLACE	State NY	Zip Code 11514	Amount of Each Disbursement this Period 3300.00	
Purpose of Disbursement REFUND OF CONTRIBUTION DESIGNATED TO G2024 AND ITEMIZED IN PRIOR PERIOD		Category/ Type 010	Transaction ID : DKMDDDE4WET3XYTW3PUI	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Memo Item <input type="checkbox"/>	
Disbursement For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	9900.00
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 12 OF 24			
	<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)
DEVOLDER-SANTOS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ZHANG, XUEHONG, , ,			Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2024		
Mailing Address 904 ENGLEWOOD LN			FEC Identification Number C		
City PLANO	State TX	Zip Code 75025	Amount of Each Disbursement this Period 3300.00		
Purpose of Disbursement REFUND OF CONTRIBUTION DESIGNATED TO G2024 AND ITEMIZED IN PRIOR PERIOD		Category/ Type 010	Transaction ID : DTV346HMRJS3GNYSSTH4		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Memo Item <input type="checkbox"/>		
Disbursement For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:			

Full Name (Last, First, Middle Initial) B. ZHOU, YUE, , ,			Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2024		
Mailing Address 6040 KENNEDY BLVD E APT 34C			FEC Identification Number C		
City WEST NEW YORK	State NJ	Zip Code 07093	Amount of Each Disbursement this Period 3300.00		
Purpose of Disbursement REFUND OF CONTRIBUTION DESIGNATED TO G2024 AND ITEMIZED IN PRIOR PERIOD		Category/ Type 010	Transaction ID : DKBSBT6A943FMV8RJAPZ		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Memo Item <input type="checkbox"/>		
Disbursement For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		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	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 Disbursements This Page (optional).....▶	6600.00
TOTAL This Period (last page this line number only).....▶	20633.00

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : LWVPKBQQ4TAXWYDG3USR
DEVOLDER-SANTOS FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item DEVOLDER-SANTOS, GEORGE, ANTHONY, ,		Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 9002 QUEENS BOULEVARD		
City ELMHURST	State NY	ZIP Code 11373
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 300000.00	Cumulative Payment To Date 85000.00	Balance Outstanding at Close of This Period 215000.00
--------------------------------------	--	--

TERMS	Date Incurred M M / D D / Y Y Y Y 09 / 10 / 2022	Date Due M M / D D / Y Y Y 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).....▶	215000.00
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) **DEVOLDER-SANTOS FOR CONGRESS** Transaction ID : **LJY3VYVCWFQZFHGJK8YT**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2022
DEVOLDER-SANTOS, GEORGE, ANTHONY, ,			<input type="checkbox"/> Primary
Mailing Address 9002 QUEENS BOULEVARD			<input checked="" type="checkbox"/> General
			<input type="checkbox"/> Other (specify) ▼
City ELMHURST	State NY	ZIP Code 11373	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 100000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 100000.00
--------------------------------------	------------------------------------	--

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	09 / 20 / 2022	12 / 31 / 2022	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).....▶	100000.00
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) **DEVOLDER-SANTOS FOR CONGRESS** Transaction ID : LPDFP3AQ5VB3AVEWMQT2

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2022
DEVOLDER-SANTOS, GEORGE, ANTHONY, ,			<input checked="" type="checkbox"/> Primary
Mailing Address			<input type="checkbox"/> General
9002 QUEENS BOULEVARD			<input type="checkbox"/> Other (specify) ▼
City	State	ZIP Code	<input checked="" type="checkbox"/> Personal Funds of the Candidate
ELMHURST	NY	11373	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100000.00	0.00	100000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 10 / 10 / 2022	M M / D D / Y Y Y Y 12 / 31 / 2022	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).....▶	100000.00
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) **DEVOLDER-SANTOS FOR CONGRESS** Transaction ID : **L8YW4YU9KCQ3X4X8UDYD**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2022
DEVOLDER-SANTOS, GEORGE, ANTHONY, ,			<input checked="" type="checkbox"/> Primary
Mailing Address			<input type="checkbox"/> General
9002 QUEENS BOULEVARD			<input type="checkbox"/> Other (specify) ▼
City	State	ZIP Code	<input checked="" type="checkbox"/> Personal Funds of the Candidate
ELMHURST	NY	11373	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
90000.00	0.00	90000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 10 / 17 / 2022	M M / D D / Y Y Y Y 12 / 31 / 2022	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).....▶	90000.00
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) **DEVOLDER-SANTOS FOR CONGRESS** Transaction ID : **LCRVDC9W7ZGNRFEEU96**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2022
DEVOLDER-SANTOS, GEORGE, ANTHONY, ,			<input checked="" type="checkbox"/> Primary
Mailing Address			<input type="checkbox"/> General
9002 QUEENS BOULEVARD			<input type="checkbox"/> Other (specify) ▼
City	State	ZIP Code	<input checked="" type="checkbox"/> Personal Funds of the Candidate
ELMHURST	NY	11373	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
125000.00	0.00	125000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 10 / 26 / 2022	M M / D D / Y Y Y Y 12 / 31 / 2022	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).....▶	125000.00
TOTALS This Period (last page in this line only).....▶	630000.00

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

(Use separate schedule(s) for each numbered line)	PAGE 18 OF 24
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

DEVOLDER-SANTOS FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor DICKINSON WRIGHT PLC			Nature of Debt (Purpose): LEGAL
Mailing Address 1825 EYE ST NW SUITE 900			
City WASHINGTON	State DC	Zip Code 20006	

Outstanding Balance Beginning This Period <input type="text" value="68727.79"/>	Transaction ID : BF6WHPA4YVYD6AS8ES2D	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="68727.79"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor SMITH, KEVIN, , ,			Nature of Debt (Purpose): FIELD OPERATIONS AND WIN BONUS
Mailing Address 820 N KINGS AVE			
City LINDENHURST	State NY	Zip Code 11757	

Outstanding Balance Beginning This Period <input type="text" value="27500.00"/>	Transaction ID : B8JPWKDZZBKXFK7NXZSN	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="27500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor IL BACCO			Nature of Debt (Purpose): ELECTION NIGHT CATERING
Mailing Address 25324 NORTHERN BLVD			
City QUEENS	State NY	Zip Code 11362	

Outstanding Balance Beginning This Period <input type="text" value="10000.00"/>	Transaction ID : BQ8BDR39EBFYC3R6B79V	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="10000.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="106227.79"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)

DEVOLDER-SANTOS FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor LIPSKY, GABRIELLE, , ,			Nature of Debt (Purpose): CAMPAIGN MANAGEMENT
Mailing Address 137 OAKFIELD AVENUE			
City DIX HILLS	State NY	Zip Code 11746	

Outstanding Balance Beginning This Period <input type="text" value="4000.00"/>	Transaction ID : BEE9VBFQBBNF4CCKS9BF	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4000.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor HSP DIRECT LLC			Nature of Debt (Purpose): MAIL FUNDRAISING PROGRAM
Mailing Address 20130 LAKEVIEW CENTER PLAZA			
City ASHBURN	State VA	Zip Code 20147	

Outstanding Balance Beginning This Period <input type="text" value="6500.00"/>	Transaction ID : BDXAVSSN33J4XSCH9AK8	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="6500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NOVA LIST			Nature of Debt (Purpose): MAIL FUNDRAISING PROGRAM
Mailing Address 20130 LAKEVIEW CENTER PLAZA			
City AHBURN	State VA	Zip Code 20147	

Outstanding Balance Beginning This Period <input type="text" value="4790.76"/>	Transaction ID : BSP6UMPMQNC6ED2FWX1	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4790.76"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="15290.76"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

DEVOLDER-SANTOS FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor SUNRISE DATA SERVICES			Nature of Debt (Purpose): MAIL FUNDRAISING PROGRAM
Mailing Address 20130 LAKEVIEW CENTER PLAZA			
City ASHBURN	State VA	Zip Code 20147	

Outstanding Balance Beginning This Period 1887.02	Transaction ID : BGGCPUJK5UHNU6RQ3UF	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1887.02

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor LOVETT, CHARLES, , ,			Nature of Debt (Purpose): FIELD OPERATIONS
Mailing Address 5077 BURRELL DRIVE			
City SHEFFIELD VILLAGE	State OH	Zip Code 44054	

Outstanding Balance Beginning This Period 15000.00	Transaction ID : BVKKGAAADT2ZX2FSF4RVU	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 15000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor WINRED TECHNICAL SERVICES			Nature of Debt (Purpose): PAYMENT AMOUNT RECONCILES TO CONTRIBUTIONS NET FEES REPORTED. BALANCE OUTSTANDING IS CHARGEBACKS OWE
Mailing Address 1776 WILSON BLVD SUITE 530			
City ARLINGTON	State VA	Zip Code 22219	

Outstanding Balance Beginning This Period 7674.66	Transaction ID : BKWGDW3NJSBBTG49W3.	
Amount Incurred This Period 0.00	Payment This Period 163.16	Outstanding Balance at Close of This Period 7511.50

1) SUBTOTALS This Period This Page (optional)	▶	24398.52
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

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

DEVOLDER-SANTOS FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

RTA STRATEGY LLC

Nature of Debt (Purpose):

COMPLIANCE CONSULTING TREASURY REPORTING

Mailing Address PO BOX 1483

City
ROSWELL

State
GA

Zip Code
30077

Outstanding Balance Beginning This Period

0.00

Transaction ID : BUA6QBPZF5PZ4JH63FJX

Amount Incurred This Period

6015.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6015.00

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

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of 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

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)

6015.00

2) **TOTALS** This Period (last page this line number only)

151932.07

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

630000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

781932.07

FEC FORM 3Z (File with Form 3)

Report Covering Period from:

M	M
01	

 /

D	D
01	

 /

Y	Y	Y	Y
2024			

Part 1: CONSOLIDATION REPORT

NAME OF PRINCIPAL CAMPAIGN COMMITTEE

to:

M	M
03	

 /

D	D
31	

 /

Y	Y	Y	Y
2024			

NAME OF COMMITTEE AUTHORIZED BY CANDIDATE
(Use Separate Page for Each Committee)

DEVOLDER-SANTOS FOR CONGRESS

LINE DESCRIPTION	LINE DESCRIPTION
6(c) Net Contributions	15 Other Receipts
- 20773.15	0.00
7(c) Net Operating Expenditures	16 Total Receipts
321.25	274.85
9 Debts and Obligations Owed TO the Committee	17 Operating Expenditures
0.00	321.25
10 Debts and Obligations Owed BY the Committee	18 Transfers to Other Authorized Committees
781932.07	0.00
11(a) Contributions from Individuals/Persons Other Than Political Committees	19(a) Repayments of Loans Made or Guaranteed by Candidate
274.85	0.00
11(b) Contributions from Political Party Committees	19(b) Other Loan Repayments
0.00	0.00
11(c) Contributions from Other Political Committees	19(c) Total Loan Repayments
0.00	0.00
11(d) Contributions from the Candidate	20(a) Refunds of Contributions to Individuals/Persons
0.00	21048.00
11(e) Total Contributions	20(b) Refunds of Contributions to Political Party Committees
274.85	0.00
12 Transfers from Other Authorized Committees	20(c) Refunds of Contributions to Other Political Committees
0.00	0.00
13(a) Loans Made or Guaranteed by the Candidate	20(d) Total Contributions Refunds
0.00	21048.00
13(b) All Other Loans	21 Other Disbursements
0.00	0.00
13(c) Total Loans	22 Total Disbursements
0.00	21369.25
14 Offsets to Operating Expenditures	23 Cash on Hand at Beginning of Reporting Period
0.00	22237.00
	27 Cash on Hand at Close of Reporting Period
	1142.60

FEC FORM 3Z (File with Form 3)

Report Covering Period from: 01 / 01 / 2024

Part 1: CONSOLIDATION REPORT

NAME OF PRINCIPAL CAMPAIGN COMMITTEE

to: 03 / 31 / 2024

NAME OF COMMITTEE AUTHORIZED BY CANDIDATE
(Use Separate Page for Each Committee)

DEVOLDER SANTOS FOR CONGRESS RECOUNT COMMITTEE

Table with two columns: LINE DESCRIPTION and numerical values. Rows include Net Contributions, Operating Expenditures, Debts and Obligations, Contributions from various sources, Loans Made or Guaranteed, and Cash on Hand at Beginning and Close of Reporting Period.

FEC FORM 3Z (File with Form 3)

Report Covering Period from: / /

**Part 2: CONSOLIDATED TOTALS
FOR ALL AUTHORIZED COMMITTEES**

to: / /

NAME OF PRINCIPAL CAMPAIGN COMMITTEE

**DEVOLDER-SANTOS FOR
CONGRESS**

For each line, add the amounts for all authorized committees and disclose the total on the appropriate line below.

LINE DESCRIPTION	
6(c) Net Contributions	- 20773.15
7(c) Net Operating Expenditures	321.25
9 Debts and Obligations Owed TO the Committee	0.00
10 Debts and Obligations Owed BY the Committee	781932.07
11(a) Contributions from Individuals/Persons Other Than Political Committees	274.85
11(b) Contributions from Political Party Committees	0.00
11(c) Contributions from Other Political Committees	0.00
11(d) Contributions from the Candidate	0.00
11(e) Total Contributions	274.85
12 Transfers from Other Authorized Committees	0.00
13(a) Loans Made or Guaranteed by the Candidate	0.00
13(b) All Other Loans	0.00
13(c) Total Loans	0.00
14 Offsets to Operating Expenditures	0.00

LINE DESCRIPTION	
15 Other Receipts	0.00
16 Total Receipts	274.85
17 Operating Expenditures	321.25
18 Transfers to Other Authorized Committees	0.00
19(a) Repayments of Loans Made or Guaranteed by Candidate	0.00
19(b) Other Loan Repayments	0.00
19(c) Total Loan Repayments	0.00
20(a) Refunds of Contributions to Individuals/Persons	21048.00
20(b) Refunds of Contributions to Political Party Committees	0.00
20(c) Refunds of Contributions to Other Political Committees	0.00
20(d) Total Contributions Refunds	21048.00
21 Other Disbursements	0.00
22 Total Disbursements	21369.25
23 Cash on Hand at Beginning of Reporting Period	22237.00
27 Cash on Hand at Close of Reporting Period	6290.60