

**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

COMMITTEE TO ELECT CHRISTIAN CASTELLI

ADDRESS (number and street)

PO BOX 1285

Check if different
than previously
reported. (ACC)

ASHEBORO

NC

27204

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00794495

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

NC

07

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
05 / 17 / 2022in the
State of

NC

(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
04 / 01 / 2022

through

M M / D D / Y Y Y Y
04 / 27 / 2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Kilgore, Paul, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Kilgore, Paul, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y
05 / 04 / 2022

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

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 17

Write or Type Committee Name

COMMITTEE TO ELECT CHRISTIAN CASTELLI

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	2	2

	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))....	17040.00	81537.00
(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))	17040.00	81537.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	100548.09	160423.79
(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))	100548.09	160423.79
8. Cash on Hand at Close of Reporting Period (from Line 27).....	61113.21	
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)	140000.00	

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

PAGE 3 / 17

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

COMMITTEE TO ELECT CHRISTIAN CASTELLI

Report Covering the Period:

From:

M M / D D / Y Y Y Y
04 / 01 / 2022

To:

M M / D D / Y Y Y Y
04 / 27 / 2022

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).....**

6700.00

66740.00

(ii) Unitemized.....

2340.00

6797.00

(iii) TOTAL of contributions from individuals ▶

9040.00

73537.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

8000.00

8000.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

17040.00

81537.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

140000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

140000.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

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)..... ▶

17040.00

221537.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 17

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	100548.09	160423.79
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) ►	100548.09	160423.79

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	144621.30
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	17040.00
25. SUBTOTAL (add Line 23 and Line 24).....	161661.30
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	100548.09
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	61113.21

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 5 OF 17

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COMMITTEE TO ELECT CHRISTIAN CASTELLI

Full Name (Last, First, Middle Initial)

A.**Daffron, Terry, , ,**

Mailing Address 426 Robalo Road

City

Greensboro

State

NC

Zip Code

27406

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	2	2

Transaction ID : SA11AI.4482

Amount of Each Receipt this Period

250.00

☐ Memo Item
 Earmarked Through Winred
B.

Full Name (Last, First, Middle Initial)

Winred

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

25802.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	2

Transaction ID : SA11AI.4482.0

Amount of Each Receipt this Period

250.00

☒ Memo Item
 Conduit Memo
C.

Full Name (Last, First, Middle Initial)

DeMatteo, Theresa, M., ,

Mailing Address 946 Cambridge Ct.

City

The Villages

State

FL

Zip Code

32162

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Insurance Agent

Receipt For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	2	2

Transaction ID : SA11AI.4548

Amount of Each Receipt this Period

100.00

☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶

350.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COMMITTEE TO ELECT CHRISTIAN CASTELLI

Full Name (Last, First, Middle Initial)

A.**James, Christian, , ,**

Mailing Address 1529 Wyatt Court SE

City

Stayton

State

OR

Zip Code

97383

FEC ID number of contributing
federal political committee.

C

Name of Employer
Oregon OSHAOccupation
Health Consultant

Receipt For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		19		2022

Transaction ID : SA11AI.4464

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.**Mahaney, Josephine, , ,**

Mailing Address 2860 S Ocean Blvd

City

Palm Beach

State

FL

Zip Code

33480

FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
Retired

Receipt For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		27		2022

Transaction ID : SA11AI.4542

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.**Moskal, Eric, E, ,**

Mailing Address 74 Lords Highway East

City

Westam

State

CT

Zip Code

06883

FEC ID number of contributing
federal political committee.

C

Name of Employer
UBSOccupation
Investment Banking

Receipt For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2900.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		19		2022

Transaction ID : SA11AI.4473

Amount of Each Receipt this Period

2900.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

4400.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
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NAME OF COMMITTEE (In Full)

COMMITTEE TO ELECT CHRISTIAN CASTELLI

Full Name (Last, First, Middle Initial)

A. Scully, William, P, ,

Mailing Address 771 Manatee Cove

City

Vero Beach

State

FL

Zip Code

32963

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		27		2022

Transaction ID : SA11AI.4553

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Swenie, Kevin, J, ,

Mailing Address 1006 E Yacht Drive

City

Oak Island

State

NC

Zip Code

28465

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		27		2022

Transaction ID : SA11AI.4540

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Trivette, William, S, ,

Mailing Address 806 E Birch Bark Lane

City

Greensboro

State

NC

Zip Code

27455-9210

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		25		2022

Transaction ID : SA11AI.4495

Amount of Each Receipt this Period

200.00

☐ Memo Item

Earmarked Through Winred

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

1450.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
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NAME OF COMMITTEE (In Full)

COMMITTEE TO ELECT CHRISTIAN CASTELLI

Full Name (Last, First, Middle Initial)

Winred**A.**

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

26032.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	2	2

Transaction ID : SA11AI.4495.0

Amount of Each Receipt this Period

200.00

☒ Memo Item
 Conduit Memo

Full Name (Last, First, Middle Initial)

Tyron, Joseph, D., ,**B.**

Mailing Address 619 Hamlet Ave.

City

Carolina Beach

State

NC

Zip Code

28428

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	2	2

Transaction ID : SA11AI.4539

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Valitutto, Rebeka, J., ,**C.**

Mailing Address 3 Hamden Ct

City

Greensboro

State

NC

Zip Code

27405

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Information Requested

Information Requested

Receipt For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	2	2

Transaction ID : SA11AI.4533

Amount of Each Receipt this Period

250.00

☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

500.00

6700.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 11a	☐ 11b	☒ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

COMMITTEE TO ELECT CHRISTIAN CASTELLI

Full Name (Last, First, Middle Initial)

HUDSON FOR CONGRESS**A.**

Mailing Address PO BOX 5053

City

CONCORD

State

NC

Zip Code

28027

FEC ID number of contributing
federal political committee.**C** C00504522

Name of Employer

Occupation

Receipt For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	2	2

Transaction ID : SA11C.4468

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.**SEAL PAC SUPPORTING ELECTING AMERICAN LEADERS PAC**

Mailing Address 824 S MILLEDGE AVE, STE 101

City

ATHENS

State

GA

Zip Code

30605

FEC ID number of contributing
federal political committee.**C** C00570226

Name of Employer

Occupation

Receipt For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	2	2

Transaction ID : SA11C.4470

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.**WARRIOR DIPLOMAT PAC**

Mailing Address 824 S MILLEDGE AVE STE 101

City

ATHENS

State

GA

Zip Code

30605

FEC ID number of contributing
federal political committee.**C** C00693671

Name of Employer

Occupation

Receipt For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	2	2

Transaction ID : SA11C.4489

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

8000.00

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

8000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

COMMITTEE TO ELECT CHRISTIAN CASTELLI

Full Name (Last, First, Middle Initial)

A. Locked on Strategies

Mailing Address 217 Cammer Avenue

City
GreenvilleState
SCZip Code
29605Purpose of Disbursement
Strategy Consulting

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

8800.00

Transaction ID : SB17.4460

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sandhill Signs

Mailing Address 336 Fields Dr

City
AberdeenState
NCZip Code
28315Purpose of Disbursement
Signs

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		26		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

123.05

Transaction ID : SB17.4514

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stonetree Signs & Graphics

Mailing Address 2011 S Fayetteville St

City
AsheboroState
NCZip Code
27205Purpose of Disbursement
Signs

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

885.64

Transaction ID : SB17.4458

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

9808.69

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 PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

COMMITTEE TO ELECT CHRISTIAN CASTELLI

Full Name (Last, First, Middle Initial)

A. Stonetree Signs & Graphics

Mailing Address 2011 S Fayetteville St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2022

City
AsheboroState
NCZip Code
27205Purpose of Disbursement
Signs

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

460.51

Transaction ID : SB17.4510

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Target Enterprises

Mailing Address 15260 Ventura Blvd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		04		2022

City
Sherman OaksState
CAZip Code
91403Purpose of Disbursement
Digital Advertising

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

35000.00

Transaction ID : SB17.4420

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Stoneridge Group LLC

Mailing Address 960 North Point Pkwy

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		12		2022

City
AlpharettaState
GAZip Code
30005Purpose of Disbursement
Printing

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

13561.00

Transaction ID : SB17.4444

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

49021.51

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 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)

COMMITTEE TO ELECT CHRISTIAN CASTELLI

Full Name (Last, First, Middle Initial)

A. The Stoneridge Group LLC

Mailing Address 960 North Point Pkwy

City
AlpharettaState
GAZip Code
30005Purpose of Disbursement
Printing and Postage

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

13561.00

Transaction ID : SB17.4461

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. The Stoneridge Group LLC

Mailing Address 960 North Point Pkwy

City
AlpharettaState
GAZip Code
30005Purpose of Disbursement
Digital Advertising and Postage

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

27852.86

Transaction ID : SB17.4491

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Winred

Mailing Address PO Box 9891

City
ArlingtonState
VAZip Code
22219Purpose of Disbursement
CC Transaction Fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	0		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

12.41

Transaction ID : SB17.4456

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

41426.27

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 17

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

COMMITTEE TO ELECT CHRISTIAN CASTELLI

Full Name (Last, First, Middle Initial)

A. Winred

Mailing Address PO Box 9891

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		17		2022

City
ArlingtonState
VAZip Code
22219Purpose of Disbursement
CC Transaction Fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

15.96

Transaction ID : SB17.4488

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Winred

Mailing Address PO Box 9891

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		25		2022

City
ArlingtonState
VAZip Code
22219Purpose of Disbursement
CC Transaction Fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

0.20

Transaction ID : SB17.4500

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Winred

Mailing Address PO Box 9891

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		27		2022

City
ArlingtonState
VAZip Code
22219Purpose of Disbursement
CC Transaction Fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

13.79

Transaction ID : SB17.4501

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

29.95

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

100286.42

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 14 OF 17

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4118

COMMITTEE TO ELECT CHRISTIAN CASTELLI

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

CASTELLI, ROBERT CHRISTIAN, Christian, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 1285

City

State

ZIP Code

ASHEBORO

NC

27204

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

10000.00

0.00

10000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 12^M/ D 13^D

/ Y 2021 Y

M M

/ D D

/ On Demand^Y

0.00

% (apr)

☐ Yes☒ 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).....▶

10000.00

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

PAGE 15 OF 17

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4169

COMMITTEE TO ELECT CHRISTIAN CASTELLI

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

CASTELLI, ROBERT CHRISTIAN, Christian, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 1285

City

ASHEBORO

State

NC

ZIP Code

27204

☒ 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:

M 12^M/ D 28^D

/ Y 2021 Y

M M

/ D D

/ On Demand^Y

0.00

% (apr)

☐ Yes☒ 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)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 16 OF 17

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4183

COMMITTEE TO ELECT CHRISTIAN CASTELLI

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

CASTELLI, ROBERT CHRISTIAN, Christian, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 1285

City

State

ZIP Code

ASHEBORO

NC

27204

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

11000.00

0.00

11000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 12^M/ D 29^D

/ Y 2021 Y

M M

/ D D

/ Y On Deman Y

0.00

% (apr)

☐ Yes☒ 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).....▶

11000.00

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

PAGE 17 OF 17

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4437

COMMITTEE TO ELECT CHRISTIAN CASTELLI

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

CASTELLI, ROBERT CHRISTIAN, Christian, ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 1285

City

ASHEBORO

State

NC

ZIP Code

27204

☒ Personal Funds of the Candidate

Original Amount of Loan

19000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

19000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 03 M

D 31 D

Y

2022

Y

M M

D D

ON DEMAND

0.00

% (apr)

☐ Yes☒ 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).....▶

19000.00

TOTALS This Period (last page in this line only).....▶

140000.00

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