

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

BILL HAMLIN FOR CONGRESS

ADDRESS (number and street)

76 FORT EDDY RD

STE 1 - 1085

Check if different than previously reported. (ACC)

CONCORD

NH

03301

CITY

STATE

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C C00875336

3. IS THIS REPORT NEW OR AMENDED

STATE DISTRICT

NH

02

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)

(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 10 / 01 / 2024

through

M M / D D / Y Y Y Y 12 / 31 / 2024

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 03 / 29 / 2025

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

Table with 10 columns for Office Use Only

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

BILL HAMLLEN FOR CONGRESS

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2024 To: M M / D D / Y Y Y Y 12 / 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))	0.00	7986.56
(b) Total Contribution Refunds (from Line 20(d))	0.00	25702.37
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	- 17715.81
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	6559.00	823593.97
(b) Total Offsets to Operating Expenditures (from Line 14)	294.00	9096.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	6265.00	814497.97
8. Cash on Hand at Close of Reporting Period (from Line 27)	2.12	
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)	700000.00	

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

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

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

Write or Type Committee Name

BILL HAMLLEN FOR CONGRESS

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

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2024"/> (date of general election)	COLUMN C Total for <input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2024"/> (date after general election) through <input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2024"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)	<input type="text" value="0.00"/>	<input type="text" value="6852.54"/>
(ii) Unitemized	<input type="text" value="0.00"/>	<input type="text" value="1134.02"/>
(iii) Total of contributions from individuals	<input type="text" value="0.00"/>	<input type="text" value="7986.56"/>
(b) Political Party Committees	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Other Political Committees	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
0.00	7986.56	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	132215.90	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	700000.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	700000.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
294.00	9096.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
294.00	849298.46	0.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

Write or Type Committee Name

BILL HAMLLEN FOR CONGRESS

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

II. DISBURSEMENTS

	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES	<input type="text" value="6559.00"/>	<input type="text" value="823593.97"/>	<input type="text" value="0.00"/>
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Of All Other Loans	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Political Party Committees	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	25702.37	0.00
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(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00	25702.37	0.00
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21. OTHER DISBURSEMENTS

0.00	0.00	0.00
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22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

6559.00	849296.34	0.00
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III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

0.00	- 17715.81	0.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

6265.00	814497.97	0.00
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	6267.12
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	294.00
25. SUBTOTAL (add Line 23 and Line 24).....	6561.12
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	6559.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	2.12

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 12
(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)
BILL HAMLIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GUSTO

Mailing Address 1201 16TH ST MALL
STE 350

City DENVER State CO Zip Code 80202

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

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
294.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 10 / 2024

Transaction ID : RQSJABMG8H7YP7BXUZR

Amount of Each Receipt this Period
294.00

Memo Item

REFUND ON PREPAID PAYROLL EXPENSES

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

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	294.00
TOTAL This Period (last page this line number only).....▶	294.00

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 12	
	<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)
BILL HAMLEN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GUSTO		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2024
Mailing Address 1201 16TH ST MALL STE 350		FEC Identification Number C
City DENVER	State CO	Zip Code 80202
Purpose of Disbursement PAYROLL SERVICE FEE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 69.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D9VUCYXPEZRBGA8FKWWT
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. GUSTO		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2024
Mailing Address 1201 16TH ST MALL STE 350		FEC Identification Number C
City DENVER	State CO	Zip Code 80202
Purpose of Disbursement PAYROLL SERVICE FEE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 80.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : DBDB8KUAPYTP3V2CDV8B
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. GUSTO		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2024
Mailing Address 1201 16TH ST MALL STE 350		FEC Identification Number C
City DENVER	State CO	Zip Code 80202
Purpose of Disbursement PAYROLL SERVICE FEE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 80.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D7ENNANAEH8QSKVUSZUF
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	229.00
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 9 OF 12	
	<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)
BILL HAMLEN FOR CONGRESS

A. GUSTO

Full Name (Last, First, Middle Initial)

Mailing Address 1201 16TH ST MALL
STE 350

City DENVER State CO Zip Code 80202

Purpose of Disbursement PAYROLL SERVICE FEE Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 12 / 31 / 2024

FEC Identification Number C

Amount of Each Disbursement this Period 80.00

Transaction ID : DFJ68R3JDRE5N8E2X28Q

Memo Item

B. HINDSIGHT TECHNOLOGY SOLUTIONS INC

Full Name (Last, First, Middle Initial)

Mailing Address 300 MAPLE AVENUE

City SOUTH PLAINFIELD State NJ Zip Code 07080

Purpose of Disbursement MASS MESSAGING Category/Type 007

Candidate Name

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

State: District:

Date of Disbursement 10 / 31 / 2024

FEC Identification Number C

Amount of Each Disbursement this Period 5000.00

Transaction ID : D2SFTS7QYKS3FZ8THRVK

Memo Item

C. TABULARIUS GROUP

Full Name (Last, First, Middle Initial)

Mailing Address 126 C STREET NW
THIRD FLOOR

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement COMPLIANCE AND ETHICS CONSULTING Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 10 / 01 / 2024

FEC Identification Number C

Amount of Each Disbursement this Period 1250.00

Transaction ID : DYASQ6QJGCZHQEKWBG

Memo Item

SUBTOTAL of Disbursements This Page (optional).....	▶	6330.00
TOTAL This Period (last page this line number only).....	▶	6559.00

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : LC25TMQEJEKS86DKVK68**
BILL HAMLIN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2024
HAMLIN, WILLIAM, , ,		<input checked="" type="checkbox"/> Primary
Mailing Address 76 FORT EDDY RD		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City CONCORD	State NH	ZIP Code 03301
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 150000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 150000.00
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TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	06 / 28 / 2024	12 / 31 / 2024	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).....▶	150000.00
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) **BILL HAMLLEN FOR CONGRESS** Transaction ID : **LTZVERV5HSK24EJ84GG8**

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item HAMLLEN, WILLIAM, , ,		Election: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 76 FORT EDDY RD		
City CONCORD	State NH	ZIP Code 03301
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
250000.00	0.00	250000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	07 / 23 / 2024	12 / 31 / 2024	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).....▶	250000.00
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) **Transaction ID : LYWA56TUADBFRKNQX5N5**
BILL HAMLIN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2024
HAMLIN, WILLIAM, , ,		<input checked="" type="checkbox"/> Primary
Mailing Address 76 FORT EDDY RD		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City CONCORD	State NH	ZIP Code 03301
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 300000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 300000.00
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TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 08 / 23 / 2024	M M / D D / Y Y Y Y 12 / 31 / 2024	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).....▶	300000.00
TOTALS This Period (last page in this line only).....▶	700000.00

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