

# 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

BO HINES FOR CONGRESS

ADDRESS (number and street)

320 SANFORD DRIVE

PO BOX 414

Check if different than previously reported. (ACC)

MORGANTON

NC

28655

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00766162

3. IS THIS REPORT

NEW (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

/

/

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 / 2021

through

M M / D D / Y Y Y Y

12 / 31 / 2021

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

CRATE, BRADLEY, T, ,

Type or Print Name of Treasurer

Signature of Treasurer

CRATE, BRADLEY, T, ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y

01 / 31 / 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

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**BO HINES FOR CONGRESS**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	88403.94	339793.75
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	700.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	88403.94	339093.75
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	154491.85	459127.05
(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)).....	154491.85	459127.05
8. Cash on Hand at Close of Reporting Period (from Line 27).....	396992.70	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	525026.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**BO HINES FOR CONGRESS**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	57400.00	271150.00
(ii) Unitemized.....	22103.94	55743.75
(iii) TOTAL of contributions from individuals ▶	79503.94	326893.75
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	8900.00	12900.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	88403.94	339793.75
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	100000.00	525026.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	100000.00	525026.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	188403.94	864819.75

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	154491.85	459127.05
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	700.00
(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	700.00
21. OTHER DISBURSEMENTS .....	8000.00	8000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	162491.85	467827.05

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	371080.61
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	188403.94
25. SUBTOTAL (add Line 23 and Line 24).....	559484.55
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	162491.85
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	396992.70

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 5 OF 104	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**AGGARWAL, NITIN, , ,**

Mailing Address 3 INDIAN RIVER AVENUE #801

City TITUSVILLE	State FL	Zip Code 32796
--------------------	-------------	-------------------

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

Name of Employer HOPKINS PHARMACY	Occupation OWNER
--------------------------------------	---------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 16 / 2021

**Transaction ID : SA11A1.7119**

Amount of Each Receipt this Period  
500.00

Memo Item  
EARMARKED THROUGH WINRED [SA11A1.6797]

**B.** Full Name (Last, First, Middle Initial)  
**ATKINSON, BRANDON, , ,**

Mailing Address 695 SOUTH ARANT STREET

City PAGELAND	State SC	Zip Code 29728
------------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED	Occupation CEO CHARTER JET TRANSPORT
-----------------------------------	---

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  
12 / 17 / 2021

**Transaction ID : SA11A1.7097**

Amount of Each Receipt this Period  
1000.00

Memo Item  
EARMARKED THROUGH WINRED [SA11A1.6798]

**C.** Full Name (Last, First, Middle Initial)  
**BEHRENS, MINETTE, , ,**

Mailing Address 2903 MEHERRIN COURT

City WAXHAW	State NC	Zip Code 28173
----------------	-------------	-------------------

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

Name of Employer CIVITAS	Occupation ENTREPRENEUR
-----------------------------	----------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 16 / 2021

**Transaction ID : SA11A1.7125**

Amount of Each Receipt this Period  
500.00

Memo Item  
EARMARKED THROUGH WINRED [SA11A1.6798]

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	2000.00
<b>TOTAL</b> 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 104  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BOND, THOMAS, MADISON, ,**  
 Mailing Address 29 S POINT DR  
 City ASHEVILLE State NC Zip Code 28804  
 FEC ID number of contributing federal political committee. C  
 Name of Employer RETIRED 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  
 12 / 15 / 2021  
**Transaction ID : SA11A1.7133**  
 Amount of Each Receipt this Period  
 400.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**BORDEAUX, BLAIR, , ,**  
 Mailing Address 2917 ELMFIELD STREET  
 City RALEIGH State NC Zip Code 27614  
 FEC ID number of contributing federal political committee. C  
 Name of Employer BORDEAUX CONSTRUCTION Occupation CONTRACTOR  
 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  
 12 / 19 / 2021  
**Transaction ID : SA11A1.7145**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 EARMARKED THROUGH WINRED [SA11A1.6799]

**C.** Full Name (Last, First, Middle Initial)  
**BROOKS, FRANKLIN, H, ,**  
 Mailing Address 2432 CLOISTER DR  
 City CHARLOTTE State NC Zip Code 28211  
 FEC ID number of contributing federal political committee. C  
 Name of Employer HASSELL Occupation ARCHITECT  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2021  
**Transaction ID : SA11A1.7089**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3150.00  
**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 7 OF 104  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BRYSON, JOSEPH, M, ,**  
 Mailing Address 8046 WESTBAY DRIVE  
 City DENVER State NC Zip Code 28037  
 FEC ID number of contributing federal political committee. C  
 Name of Employer BRYSON MORGAN LLC Occupation RISK STRATEGY MANAGER  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 31 2021  
**Transaction ID : SA11AI.7086**  
 Amount of Each Receipt this Period  
 2800.00  
 Memo Item  
 DESIGNATED TO GENERAL OR RUNOFF, IF ONE OCCURS

**B.** Full Name (Last, First, Middle Initial)  
**BRYSON, MARY, B, ,**  
 Mailing Address 8046 WESTBAY DRIVE  
 City DENVER State NC Zip Code 28037  
 FEC ID number of contributing federal political committee. C  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 31 2021  
**Transaction ID : SA11AI.7087**  
 Amount of Each Receipt this Period  
 2800.00  
 Memo Item  
 DESIGNATED TO GENERAL OR RUNOFF, IF ONE OCCURS

**C.** Full Name (Last, First, Middle Initial)  
**BUZZARD, DAVID, , ,**  
 Mailing Address 7528 FOXWERTH DRIVE  
 City WILMINGTON State NC Zip Code 28411  
 FEC ID number of contributing federal political committee. C  
 Name of Employer SELF-EMPLOYED Occupation SMALL BUSINESS  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 16 2021  
**Transaction ID : SA11AI.7117**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 EARMARKED THROUGH WINRED [SA11A1.6797]

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 6100.00  
**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 8 OF 104  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CANADA, ERIN, , ,**

Mailing Address 126 NORTH PERMUDA WYND DRIVE

City NORTH TOPSAIL BEACH State NC Zip Code 28460

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

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE AGENT

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2900.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 01 / 2021

Transaction ID : SA11A1.7076

Amount of Each Receipt this Period  
2900.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CARTER, CALVIN, , ,**

Mailing Address 200 RIDGEVIEW DR

City HENDERSONVILLE State NC Zip Code 28792

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

Name of Employer CDP Occupation CEO

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 17 / 2021

Transaction ID : SA11A1.7121

Amount of Each Receipt this Period  
500.00

Memo Item  
EARMARKED THROUGH WINRED [SA11A1.6798]

**C.** Full Name (Last, First, Middle Initial)  
**CHUCK, AILEEN, M, ,**

Mailing Address 8144 VILLAGE 8

City CAMARILLO State CA Zip Code 93012

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

Name of Employer RETIRED 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  
12 / 03 / 2021

Transaction ID : SA11A1.7149

Amount of Each Receipt this Period  
250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3650.00

**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 9 OF 104  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CORMIER, CHASE, , ,**

Mailing Address 355 SOUTH END AVE 28D

City NEW YORK State NY Zip Code 10280

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

Name of Employer IES HOLDINGS Occupation CORPORATE DEVELOPMENT

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 24 2021

Transaction ID : SA11A1.7127

Amount of Each Receipt this Period  
500.00

Memo Item  
EARMARKED THROUGH WINRED [SA11A1.6803]

**B.** Full Name (Last, First, Middle Initial)  
**D'ALESSANDRO, SHERRI, , ,**

Mailing Address 3138 BENDING BIRCH PLACE

City CHARLOTTE State NC Zip Code 28206

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

Name of Employer HENDERSON VENTURES Occupation REALTOR

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  
12 17 2021

Transaction ID : SA11A1.7143

Amount of Each Receipt this Period  
250.00

Memo Item  
EARMARKED THROUGH WINRED [SA11A1.6798]

**C.** Full Name (Last, First, Middle Initial)  
**FAULKNER, CHRIS, , ,**

Mailing Address 4142 BIG TUJUNGA CANYON ROAD

City TUJUNGA State CA Zip Code 91042

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

Name of Employer NEXT WAVE COMMUNICATION Occupation CONSULTANT

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2900.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 31 2021

Transaction ID : SA11A1.7083

Amount of Each Receipt this Period  
2900.00

Memo Item  
EARMARKED THROUGH WINRED [SA11A1.6808]

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3650.00

**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 10 OF 104  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**HAWKINS, DEWEY, , ,**

Mailing Address 18 PAMELA LANE

City: CLAYTON    State: NC    Zip Code: 27527

FEC ID number of contributing federal political committee: C

Name of Employer: MAKING HAULS LLC    Occupation: TRUCKING

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2021

Transaction ID : SA11A1.7135

Amount of Each Receipt this Period  
 \_\_\_\_\_ 300.00

Memo Item  
 EARMARKED THROUGH WINRED [SA11A1.6797]

**B.** Full Name (Last, First, Middle Initial)  
**HEARST, SUSAN, R, ,**

Mailing Address 4650 OLD MILLSAP RD

City: MILLSAP    State: TX    Zip Code: 76066

FEC ID number of contributing federal political committee: C

Name of Employer: RETIRED    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  
 12 / 14 / 2021

Transaction ID : SA11A1.7161

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**HENDERSON, NILOUFAR, , ,**

Mailing Address 4715 CARMEL CLUB DR

City: CHARLOTTE    State: NC    Zip Code: 28226

FEC ID number of contributing federal political committee: C

Name of Employer: HENDERSON VENTURES    Occupation: OWNER

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  
 12 / 17 / 2021

Transaction ID : SA11A1.7141

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item  
 EARMARKED THROUGH WINRED [SA11A1.6798]

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

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

\_\_\_\_\_ 800.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 104	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**HOBSON, CLARKE, , ,**

Mailing Address 10428 BREAMORE DR

City CHARLOTTE	State NC	Zip Code 28270
-------------------	-------------	-------------------

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

Name of Employer RETIRED	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  
12 / 17 / 2021

**Transaction ID : SA11A1.7104**

Amount of Each Receipt this Period  
1000.00

Memo Item  
EARMARKED THROUGH WINRED [SA11A1.6798]

**B.** Full Name (Last, First, Middle Initial)  
**JAWOR, JACK, , ,**

Mailing Address 3022 CRONE RD

City BORDEN	State IN	Zip Code 47106
----------------	-------------	-------------------

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

Name of Employer STATE OF KENTUCKY	Occupation LAW ENFORCEMENT OFFICER
---------------------------------------	---------------------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2900.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2021

**Transaction ID : SA11A1.8342**

Amount of Each Receipt this Period  
2900.00

Memo Item  
IN-KIND: STRATEGY CONSULTING

**C.** Full Name (Last, First, Middle Initial)  
**LIVOLSI, THOMAS, , ,**

Mailing Address 515 LEGACY FALLS DRIVE NORTH

City CHAPEL HILL	State NC	Zip Code 27517
---------------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED	Occupation PRESIDENT
-----------------------------------	-------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 02 / 2021

**Transaction ID : SA11A1.7072**

Amount of Each Receipt this Period  
5800.00

Memo Item  
EARMARKED THROUGH WINRED [SA11A1.6791]:  
SEE REDESIGNATION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	9700.00
<b>TOTAL</b> 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 12 OF 104  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LIVOLSI, THOMAS, , ,**

Mailing Address 515 LEGACY FALLS DRIVE NORTH

City CHAPEL HILL State NC Zip Code 27517

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

Name of Employer SELF-EMPLOYED Occupation PRESIDENT

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 02 / 2021

Transaction ID : SA11AI.7079

Amount of Each Receipt this Period  
 - 2900.00

Memo Item  
 REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**LIVOLSI, THOMAS, , ,**

Mailing Address 515 LEGACY FALLS DRIVE NORTH

City CHAPEL HILL State NC Zip Code 27517

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

Name of Employer SELF-EMPLOYED Occupation PRESIDENT

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 5800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 02 / 2021

Transaction ID : SA11AI.8326

Amount of Each Receipt this Period  
 2900.00

Memo Item  
 REDESIGNATION FROM PRIMARY; DESIGNATED TO GENERAL OR RUNOFF, IF ONE OCCURS.

**C.** Full Name (Last, First, Middle Initial)  
**MAPLE, RALPH, E, ,**

Mailing Address 3702 SUNSET BLVD

City HOUSTON State TX Zip Code 77005

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

Name of Employer RETIRED Occupation 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 Y Y  
 10 / 25 / 2021

Transaction ID : SA11AI.7170

Amount of Each Receipt this Period  
 100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	100.00
<b>TOTAL</b> 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 13 OF 104	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MARTIN, ELLEN, W, ,**

Mailing Address 4955 GLENBROOK RD NW

City WASHINGTON	State DC	Zip Code 20016
--------------------	-------------	-------------------

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

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

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  
12 / 10 / 2021

**Transaction ID : SA11A1.7157**

Amount of Each Receipt this Period  
250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MASON, KELLY, , ,**

Mailing Address 6504 OAK CREST DRIVE

City BURLINGTON	State KY	Zip Code 41005
--------------------	-------------	-------------------

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

Name of Employer STATE OF KENTUCKY	Occupation SUPERVISOR
---------------------------------------	--------------------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2900.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 23 / 2021

**Transaction ID : SA11A1.8339**

Amount of Each Receipt this Period  
2900.00

Memo Item  
IN-KIND: FIELD CONSULTING

**C.** Full Name (Last, First, Middle Initial)  
**MAXWELL, TROY, , ,**

Mailing Address 18737 FLOYD COURT

City DAVIDSON	State NC	Zip Code 28036
------------------	-------------	-------------------

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

Name of Employer FREEDOM HOUSE	Occupation PASTOR
-----------------------------------	----------------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 13 / 2021

**Transaction ID : SA11A1.7113**

Amount of Each Receipt this Period  
500.00

Memo Item  
EARMARKED THROUGH WINRED [SA11A1.6794]

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	3650.00
<b>TOTAL</b> 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 14 OF 104  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 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)  
**BO HINES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MENDOZA, ERIKA, , ,**

Mailing Address 3025 REA ROAD

City CHARLOTTE    State NC    Zip Code 28226

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

Name of Employer HENDERSON VENTURES POWERED BY COI    Occupation REAL ESTATE PROFESSIONAL

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  
 12 / 12 / 2021

**Transaction ID : SA11A1.7139**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item  
 EARMARKED THROUGH WINRED [SA11A1.6794]

**B.** Full Name (Last, First, Middle Initial)  
**MOORE, MARY, L, ,**

Mailing Address PO BOX 269

City SALUDA    State VA    Zip Code 23149

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

Name of Employer RETIRED    Occupation 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 Y Y  
 12 / 15 / 2021

**Transaction ID : SA11A1.7129**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MORGAN, CHRIS, , ,**

Mailing Address 6318 NESTING WAY

City OAK RIDGE    State NC    Zip Code 27310

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

Name of Employer GREENSBORO AUTOMOTIVE    Occupation RETAIL

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 17 / 2021

**Transaction ID : SA11A1.7100**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item  
 EARMARKED THROUGH WINRED [SA11A1.6798]

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

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

\_\_\_\_\_ 1750.00

\_\_\_\_\_

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

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

FOR LINE NUMBER: PAGE 15 OF 104  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NOTTURNO, IEVA, , ,**

Mailing Address 71 RANDOLPH PLACE NW

City WASHINGTON State DC Zip Code 20001

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

Name of Employer INTERACTIVITY FOUNDATION Occupation FELLOW

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 13 2021

Transaction ID : SA11AI.8325

Amount of Each Receipt this Period  
- 2900.00

Memo Item  
CHARGEBACK

**B.** Full Name (Last, First, Middle Initial)  
**NOTTURNO, KARL, , ,**

Mailing Address 71 RANDOLPH PLACE NW

City WASHINGTON State DC Zip Code 20001

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

Name of Employer SELF-EMPLOYED Occupation ENTREPRENEUR

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 13 2021

Transaction ID : SA11AI.8325

Amount of Each Receipt this Period  
- 2900.00

Memo Item  
CHARGEBACK

**C.** Full Name (Last, First, Middle Initial)  
**NOTTURNO, MARK, , ,**

Mailing Address 71 RANDOLPH PLACE NW

City WASHINGTON State DC Zip Code 20001

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 13 2021

Transaction ID : SA11AI.8324

Amount of Each Receipt this Period  
- 2900.00

Memo Item  
CHARGEBACK

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

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

- 8700.00

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

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

FOR LINE NUMBER: PAGE 16 OF 104  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**OFFERDAHL, JAY, , ,**

Mailing Address 11620 PINE VALLEY CLUB DRIVE

City CHARLOTTE	State NC	Zip Code 28277
-------------------	-------------	-------------------

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

Name of Employer VIKING MA	Occupation BUSINESS ACQUISITIONS
-------------------------------	-------------------------------------

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  
12 / 17 / 2021

**Transaction ID : SA11A1.7102**

Amount of Each Receipt this Period  
1000.00

Memo Item  
EARMARKED THROUGH WINRED [SA11A1.6798]

**B.** Full Name (Last, First, Middle Initial)  
**OLF, NELSON, M, ,**

Mailing Address 2736 MAGNOLIA WAY

City FOREST GROVE	State OR	Zip Code 97116
----------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 03 / 2021

**Transaction ID : SA11A1.7137**

Amount of Each Receipt this Period  
300.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**PAPPAS, GEORGE, N, ,**

Mailing Address 21108 BLAKELY SHORES DR

City CORNELIUS	State NC	Zip Code 28031
-------------------	-------------	-------------------

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

Name of Employer RETIRED	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  
12 / 10 / 2021

**Transaction ID : SA11A1.7159**

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)..... ▶

1550.00

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

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

FOR LINE NUMBER: PAGE 17 OF 104  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**PATEL, SARAJ, , ,**

Mailing Address 16718 NEW PROVIDENCE LANE

City CHARLOTTE State NC Zip Code 28277

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

Name of Employer TRINI BLAKENEY INC Occupation MANAGER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 16 2021

**Transaction ID : SA11A1.7123**

Amount of Each Receipt this Period  
500.00

Memo Item  
EARMARKED THROUGH WINRED [SA11A1.6798]

**B.** Full Name (Last, First, Middle Initial)  
**PEREZ, NICOLE, , ,**

Mailing Address 4508 HOFFMEISTER DRIVE

City WAXHAW State NC Zip Code 28173

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

Name of Employer LOREAL Occupation SALES

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 12 2021

**Transaction ID : SA11A1.7115**

Amount of Each Receipt this Period  
500.00

Memo Item  
EARMARKED THROUGH WINRED [SA11A1.6794]

**C.** Full Name (Last, First, Middle Initial)  
**REED, BRYDEN, , ,**

Mailing Address 7028 SETON HOUSE LANE

City CHARLOTTE State NC Zip Code 28277

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

Name of Employer AUTOBELL Occupation AUTO DETAILER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2650.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 18 2021

**Transaction ID : SA11A1.8350**

Amount of Each Receipt this Period  
1200.00

Memo Item  
IN-KIND: STRATEGY CONSULTING

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2200.00

**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 18 OF 104  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**REED, MCKENZIE, , ,**  
 Mailing Address 7028 SETON HOUSE LANE  
 City CHARLOTTE State NC Zip Code 28277  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RENAISSANCE PATISSERIE Occupation BARISTA  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2021  
**Transaction ID : SA11AI.8345**  
 Amount of Each Receipt this Period  
 2900.00  
 Memo Item  
 IN-KIND: FIELD CONSULTING

**B.** Full Name (Last, First, Middle Initial)  
**REINHARD, DONALD, G, ,**  
 Mailing Address 75 HARVARD AVE  
 City PALMERTON State PA Zip Code 18071  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED 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  
 12 / 06 / 2021  
**Transaction ID : SA11AI.7153**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**RISIUS, BARBARA, F, ,**  
 Mailing Address 2202 ACACIA PARK DR APT 2518  
 City CLEVELAND State OH Zip Code 44124  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation MEDICAL DOCTOR  
 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  
 12 / 03 / 2021  
**Transaction ID : SA11AI.7147**  
 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)..... ▶

3400.00

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

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

FOR LINE NUMBER: PAGE 19 OF 104  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RIVET, JESSICA, , ,**

Mailing Address 6202 SETON HOUSE LANE

City CHARLOTTE State NC Zip Code 28277

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

Name of Employer RENAISSANCE PATISSERIE Occupation SALES LEAD

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2650.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 22 2021

Transaction ID : SA11A1.8348

Amount of Each Receipt this Period  
2650.00

Memo Item  
IN-KIND: FIELD CONSULTING

**B.** Full Name (Last, First, Middle Initial)  
**RODGERS, RYAN, , ,**

Mailing Address 1909 RIVERBANK ROAD

City WAXHAW State NC Zip Code 28173

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

Name of Employer BUSINESS OWNER Occupation GIFTING SERVICE

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 10 2021

Transaction ID : SA11A1.7074

Amount of Each Receipt this Period  
5800.00

Memo Item  
EARMARKED THROUGH WINRED [SA11A1.6794]:  
SEE REDESIGNATION

**C.** Full Name (Last, First, Middle Initial)  
**RODGERS, RYAN, , ,**

Mailing Address 1909 RIVERBANK ROAD

City WAXHAW State NC Zip Code 28173

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

Name of Employer BUSINESS OWNER Occupation GIFTING SERVICE

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2900.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 10 2021

Transaction ID : SA11A1.7080

Amount of Each Receipt this Period  
- 2900.00

Memo Item  
REDESIGNATION TO GENERAL

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	8450.00
<b>TOTAL</b> 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 20 OF 104  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RODGERS, RYAN, , ,**

Mailing Address 1909 RIVERBANK ROAD

City WAXHAW	State NC	Zip Code 28173
----------------	-------------	-------------------

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

Name of Employer BUSINESS OWNER	Occupation GIFTING SERVICE
------------------------------------	-------------------------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 5800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 10 / 2021

**Transaction ID : SA11A1.8327**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2900.00

Memo Item  
 REDESIGNATION FROM PRIMARY; DESIGNATED TO GENERAL OR RUNOFF, IF ONE OCCURS.

**B.** Full Name (Last, First, Middle Initial)  
**RUSSELL, SUSAN, , ,**

Mailing Address PO BOX 6300

City KAMUELA	State HI	Zip Code 96743
-----------------	-------------	-------------------

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

Name of Employer RETIRED	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  
 12 / 09 / 2021

**Transaction ID : SA11A1.7095**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item  
 EARMARKED THROUGH WINRED [SA11A1.6793]

**C.** Full Name (Last, First, Middle Initial)  
**SHARP, JASON, , ,**

Mailing Address 3790 KEPLEY RD

City GEORGETOWN	State IN	Zip Code 47122
--------------------	-------------	-------------------

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

Name of Employer CITY OF JEFFERSONVILLE	Occupation FIREFIGHTER
--	---------------------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2021

**Transaction ID : SA11A1.8336**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2900.00

Memo Item  
 IN-KIND: STRATEGY CONSULTING

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	_____ 3900.00
<b>TOTAL</b> 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 21 OF 104  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**SIMUT, SIMONA, , ,**

Mailing Address 7945 BAYPOINTE DR

City DENVER State NC Zip Code 28037

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

Name of Employer RETIRED 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  
 12 / 17 / 2021

Transaction ID : SA11A1.7099

Amount of Each Receipt this Period  
1000.00

Memo Item  
EARMARKED THROUGH WINRED [SA11A1.6798]

**B.** Full Name (Last, First, Middle Initial)  
**SMITH, DAVID, , ,**

Mailing Address 5020 CARMEL PARK DR

City CHARLOTTE State NC Zip Code 28226

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

Name of Employer SONIC AUTOMOTIVE Occupation EXECUTIVE

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  
 12 / 17 / 2021

Transaction ID : SA11A1.7107

Amount of Each Receipt this Period  
1000.00

Memo Item  
EARMARKED THROUGH WINRED [SA11A1.6799]

**C.** Full Name (Last, First, Middle Initial)  
**TOOTHMAN, SHIRLEY, S, ,**

Mailing Address 216 BARBADOS DR

City JUPITER State FL Zip Code 33458

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

Name of Employer RETIRED 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  
 12 / 06 / 2021

Transaction ID : SA11A1.7155

Amount of Each Receipt this Period  
250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2250.00

**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 22 OF 104  
(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)  
**BO HINES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**TUREK, FRANK, S, , III**

Mailing Address PO BOX 78956

City CHARLOTTE State NC Zip Code 28271

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

Name of Employer CROSEXAMINED.ORG Occupation PRESIDENT

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  
12 / 31 / 2021

Transaction ID : SA11A1.7111

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**UTLEY, DEREK, , ,**

Mailing Address 499 EVERNIA STREET  
APT 603

City WEST PALM BEACH State FL Zip Code 33401

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

Name of Employer X STRATEGIES LLC Occupation CHAIRMAN

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2900.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 17 / 2021

Transaction ID : SA11A1.7078

Amount of Each Receipt this Period  
2900.00

Memo Item  
EARMARKED THROUGH WINRED [SA11A1.6788]

**C.** Full Name (Last, First, Middle Initial)  
**UTLEY, DEREK, , ,**

Mailing Address 499 EVERNIA STREET  
APT 603

City WEST PALM BEACH State FL Zip Code 33401

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

Name of Employer X STRATEGIES LLC Occupation CHAIRMAN

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 17 / 2021

Transaction ID : SA11A1.7081

Amount of Each Receipt this Period  
2900.00

Memo Item  
EARMARKED THROUGH WINRED [SA11A1.6799]

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 6800.00

**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 23 OF 104  
(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)  
**BO HINES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**UTLEY, DEREK, , ,**

Mailing Address 499 EVERNIA STREET  
APT 603

City WEST PALM BEACH State FL Zip Code 33401

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

Name of Employer X STRATEGIES LLC Occupation CHAIRMAN

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2900.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021

Transaction ID : SA11A1.8328

Amount of Each Receipt this Period  
- 2900.00

Memo Item  
EARMARKED THROUGH WINRED [SA11A1.6799]-  
CHARGEBACK

**B.** Full Name (Last, First, Middle Initial)  
**UZCATEGIU, JONATHAN, , ,**

Mailing Address 5425 WHALER WAY

City WILMINGTON State NC Zip Code 28409

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

Name of Employer ENTREPRENEUR Occupation ENTREPRENEUR

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  
12 / 31 / 2021

Transaction ID : SA11A1.7163

Amount of Each Receipt this Period  
250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**WAGONER, JOHN, , ,**

Mailing Address 19132 LAKEHOUSE POINTE DR

City CORNELIUS State NC Zip Code 28031

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

Name of Employer ENTREPRENEUR Occupation ENTREPRENEUR

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 18 / 2021

Transaction ID : SA11A1.7105

Amount of Each Receipt this Period  
1000.00

Memo Item  
EARMARKED THROUGH WINRED [SA11A1.6799]

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

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

- 1650.00

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

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

FOR LINE NUMBER: PAGE 24 OF 104  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WILHOITE, JEFF, , ,**

Mailing Address 15508 DOCKVIEW LANE

City CHARLOTTE State NC Zip Code 28278

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

Name of Employer SOURCE DIGITAL Occupation CRO

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  
12 / 17 / 2021

Transaction ID : SA11A1.7109

Amount of Each Receipt this Period  
1000.00

Memo Item  
EARMARKED THROUGH WINRED [SA11A1.6799]

**B.** Full Name (Last, First, Middle Initial)  
**WILLIAMS, DENISE, JENNINGS, ,**

Mailing Address 1871 QUEENS MEADOW CT

City ASHEBORO State NC Zip Code 27205

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

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

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  
12 / 03 / 2021

Transaction ID : SA11A1.7151

Amount of Each Receipt this Period  
250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**WILLIAMS, MATT, , ,**

Mailing Address 813 E COURT AVE

City JEFFERSONVILLE State IN Zip Code 47130

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

Name of Employer SELF-EMPLOYED Occupation REALTOR

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2900.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 22 / 2021

Transaction ID : SA11A1.8352

Amount of Each Receipt this Period  
2900.00

Memo Item  
IN-KIND: STRATEGY CONSULTING

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

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

4150.00

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

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

FOR LINE NUMBER: PAGE 25 OF 104  
(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)  
**BO HINES FOR CONGRESS**

**A.** 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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4552.80

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 06 / 2021

**Transaction ID : SA11AI.5522**

Amount of Each Receipt this Period  
200.00

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4572.80

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 07 / 2021

**Transaction ID : SA11AI.5523**

Amount of Each Receipt this Period  
20.00

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**C.** 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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4577.80

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 08 / 2021

**Transaction ID : SA11AI.5524**

Amount of Each Receipt this Period  
5.00

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 OF 104  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** 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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4603.80

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 13 / 2021

Transaction ID : SA11AI.6779

Amount of Each Receipt this Period  
26.00

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4623.80

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 14 / 2021

Transaction ID : SA11AI.6780

Amount of Each Receipt this Period  
20.00

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**C.** 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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4668.80

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 21 / 2021

Transaction ID : SA11AI.6781

Amount of Each Receipt this Period  
45.00

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 OF 104  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** 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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4736.86

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 04 / 2021

Transaction ID : SA11AI.6782

Amount of Each Receipt this Period  
68.06

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4780.22

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 08 / 2021

Transaction ID : SA11AI.6783

Amount of Each Receipt this Period  
43.36

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**C.** 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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4784.73

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 10 / 2021

Transaction ID : SA11AI.6784

Amount of Each Receipt this Period  
4.51

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER: PAGE 28 OF 104  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** 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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4788.74

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 12 / 2021

**Transaction ID : SA11AI.6785**

Amount of Each Receipt this Period  
4.01

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4800.62

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 17 / 2021

**Transaction ID : SA11AI.6786**

Amount of Each Receipt this Period  
11.88

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**C.** 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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4894.94

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 18 / 2021

**Transaction ID : SA11AI.6787**

Amount of Each Receipt this Period  
94.32

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 104	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** 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** C00694323

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7394.44

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 22 / 2021

**Transaction ID : SA11AI.6788**

Amount of Each Receipt this Period  
2499.50

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**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** C00694323

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7424.31

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 01 / 2021

**Transaction ID : SA11AI.6789**

Amount of Each Receipt this Period  
29.87

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**C.** 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** C00694323

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7424.87

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 02 / 2021

**Transaction ID : SA11AI.6790**

Amount of Each Receipt this Period  
0.56

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	0.00
<b>TOTAL</b> 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 30 OF 104  
(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)  
**BO HINES FOR CONGRESS**

**A.** 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** C00694323  
 Name of Employer Occupation  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 12424.17

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 07 / 2021  
**Transaction ID : SA11AI.6791**  
 Amount of Each Receipt this Period  
 4999.30  
 Memo Item  
 TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**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** C00694323  
 Name of Employer Occupation  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 12452.43

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2021  
**Transaction ID : SA11AI.6792**  
 Amount of Each Receipt this Period  
 28.26  
 Memo Item  
 TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**C.** 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** C00694323  
 Name of Employer Occupation  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 13671.94

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2021  
**Transaction ID : SA11AI.6793**  
 Amount of Each Receipt this Period  
 1219.51  
 Memo Item  
 TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

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

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

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

FOR LINE NUMBER: PAGE 31 OF 104  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** 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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
20466.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2021

**Transaction ID : SA11AI.6794**

Amount of Each Receipt this Period  
6794.73

Memo Item  
 TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
20788.57

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 17 / 2021

**Transaction ID : SA11AI.6795**

Amount of Each Receipt this Period  
321.90

Memo Item  
 TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**C.** 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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
21006.44

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2021

**Transaction ID : SA11AI.6796**

Amount of Each Receipt this Period  
217.87

Memo Item  
 TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER: PAGE 32 OF 104  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** 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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
22265.46

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 21 / 2021

**Transaction ID : SA11AI.6797**

Amount of Each Receipt this Period  
1259.02

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
28996.46

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 22 / 2021

**Transaction ID : SA11AI.6798**

Amount of Each Receipt this Period  
6731.00

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**C.** 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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
32639.97

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 23 / 2021

**Transaction ID : SA11AI.6799**

Amount of Each Receipt this Period  
3643.51

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER: PAGE 33 OF 104  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** 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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
32745.19

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 24 / 2021

**Transaction ID : SA11AI.6800**

Amount of Each Receipt this Period  
105.22

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
32849.51

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 27 / 2021

**Transaction ID : SA11AI.6801**

Amount of Each Receipt this Period  
104.32

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**C.** 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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
32911.14

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 28 / 2021

**Transaction ID : SA11AI.6802**

Amount of Each Receipt this Period  
61.63

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 OF 104  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** 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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
33381.84

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 29 / 2021

**Transaction ID : SA11AI.6803**

Amount of Each Receipt this Period  
470.70

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
33429.04

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 30 / 2021

**Transaction ID : SA11AI.6804**

Amount of Each Receipt this Period  
47.20

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**C.** 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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
33439.04

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 31 / 2021

**Transaction ID : SA11AI.6805**

Amount of Each Receipt this Period  
10.00

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 OF 104  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** 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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
33602.32

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 31 2021

**Transaction ID : SA11AI.6806**

Amount of Each Receipt this Period  
163.28

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
33829.17

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 31 2021

**Transaction ID : SA11AI.6807**

Amount of Each Receipt this Period  
226.85

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**C.** 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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
36687.72

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 31 2021

**Transaction ID : SA11AI.6808**

Amount of Each Receipt this Period  
2858.55

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER: PAGE 36 OF 104  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** 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** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
36749.51

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 31 2021

Transaction ID : SA11AI.6809

Amount of Each Receipt this Period  
61.79

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

**B.** Full Name (Last, First, Middle Initial)  
**Z Aidman, Bruce, J, ,**

Mailing Address 3304 THAXTON PL

City CHARLOTTE State NC Zip Code 28226

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

Name of Employer Occupation  
AMERICAN WOOD REFACE OWNER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 31 2021

Transaction ID : SA11AI.7131

Amount of Each Receipt this Period  
500.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	57400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 104	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ANNA PAULINA LUNA FOR CONGRESS**

Mailing Address 1201 GANDY BLVD N  
P.O. BOX 23064

City SAINT PETERSBURG	State FL	Zip Code 33742
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00718239

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 Y Y  
12 / 31 / 2021

**Transaction ID : SA11C.7092**

Amount of Each Receipt this Period  
2000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**KEEP ELECTING NEW TALENT PAC**

Mailing Address PO BOX 183

City HUDSON	State WI	Zip Code 54016
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00793570

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 Y Y  
12 / 31 / 2021

**Transaction ID : SA11C.7091**

Amount of Each Receipt this Period  
2000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**PATRICK WITT FOR CONGRESS**

Mailing Address PO BOX 89

City WATKINSVILLE	State GA	Zip Code 30677
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00785493

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2021

**Transaction ID : SA11C.7093**

Amount of Each Receipt this Period  
2000.00

Memo Item  
DESIGNATED TO GENERAL OR RUNOFF, IF ONE OCCURS

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	6000.00
<b>TOTAL</b> 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 38 OF 104  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**SAVE AMERICA STOP SOCIALISM PAC**

Mailing Address 413 SHORTER AVENUE  
SUITE 103

City ROME State GA Zip Code 30165

FEC ID number of contributing federal political committee. **C** C00755199

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2900.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 31 2021

Transaction ID : SA11C.7085

Amount of Each Receipt this Period  
2900.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	8900.00

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

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

FOR LINE NUMBER: PAGE 39 OF 104  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**HINES, ROBERT, NICHOLAS, ,**

Mailing Address 320 SANFORD DRIVE  
PO BOX 414

City MORGANTON State NC Zip Code 26855

FEC ID number of contributing federal political committee. **C** H2NC05157

Name of Employer SELF-EMPLOYED Occupation CANDIDATE

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
525026.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2021

Transaction ID : SA13A.6820

Amount of Each Receipt this Period  
100000.00

Memo Item  
CANDIDATE LOAN

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	100000.00

**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 40 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ABNO GROUP INC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021	
Mailing Address 9820 NORTHCROSS CENTER COURT			FEC Identification Number C	
City HUNTERSVILLE	State NC	Zip Code 28078	Amount of Each Disbursement this Period 3000.00	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type	Transaction ID : SB17.7016	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. ABNO GROUP INC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2021	
Mailing Address 9820 NORTHCROSS CENTER COURT			FEC Identification Number C	
City HUNTERSVILLE	State NC	Zip Code 28078	Amount of Each Disbursement this Period 6000.00	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type	Transaction ID : SB17.7017	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2021	
Mailing Address 4333 AMON CARTER BLVD			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 1711.40	
Purpose of Disbursement BURGESS REIMBURSEMENT: TRAVEL: AIR		Category/ Type	Transaction ID : SB17.7066	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2021	
Mailing Address 4333 AMON CARTER BLVD			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 1331.70	
Purpose of Disbursement BURGESS REIMBURSEMENT: TRAVEL: AIR			Transaction ID : SB17.7056	
Candidate Name			Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. ANEDOT INC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2021	
Mailing Address 1340 POYDRAS BLVD SUITE 1770			FEC Identification Number C	
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 151.60	
Purpose of Disbursement MERCHANT FEES			Transaction ID : SB17.7015	
Candidate Name			Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2021	
Mailing Address PO BOX 6463			FEC Identification Number C	
City CAROL STREAM	State IL	Zip Code 60197	Amount of Each Disbursement this Period 266.36	
Purpose of Disbursement MOBILE PHONE EXPENSE			Transaction ID : SB17.7010	
Candidate Name			Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	417.96
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 104			
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2021
Mailing Address PO BOX 6463		FEC Identification Number C
City CAROL STREAM	State IL	Zip Code 60197
Purpose of Disbursement MOBILE PHONE EXPENSE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 266.36	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.7011
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2021
Mailing Address PO BOX 6463		FEC Identification Number C
City CAROL STREAM	State IL	Zip Code 60197
Purpose of Disbursement MOBILE PHONE EXPENSE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 266.36	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.7012
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. BP AMOCO</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2021
Mailing Address 1427 W 1ST ST		FEC Identification Number C
City WINSTON SALEM	State NC	Zip Code 27101
Purpose of Disbursement TRAVEL: FUEL	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 68.45	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.7007
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	601.17
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. BUDGET RENT A CAR</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2021	
Mailing Address 6 SYLVAN WAY			FEC Identification Number C	
City PARSIPPANY	State NJ	Zip Code 07054	Amount of Each Disbursement this Period 555.05	
Purpose of Disbursement BURGESS REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION			Transaction ID : SB17.7065	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. BURGESS, ROBERT, K, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021	
Mailing Address 6350 S. RILEY STREET #227			FEC Identification Number C	
City LAS VEGAS	State NV	Zip Code 89148	Amount of Each Disbursement this Period 8465.27	
Purpose of Disbursement STRATEGY CONSULTING & EXPENSES: SEE ITEMIZATION IF REQUIRED			Transaction ID : SB17.7036	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. BURGESS, ROBERT, K, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2021	
Mailing Address 6350 S. RILEY STREET #227			FEC Identification Number C	
City LAS VEGAS	State NV	Zip Code 89148	Amount of Each Disbursement this Period 10335.84	
Purpose of Disbursement STRATEGY CONSULTING & EXPENSES: SEE ITEMIZATION IF REQUIRED			Transaction ID : SB17.7042	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	18801.11
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. BURGESS, ROBERT, K, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2021	
Mailing Address 6350 S. RILEY STREET #227			FEC Identification Number C	
City LAS VEGAS	State NV	Zip Code 89148	Amount of Each Disbursement this Period 8578.39	
Purpose of Disbursement STRATEGY CONSULTING & EXPENSES: SEE ITEMIZATION IF REQUIRED			Transaction ID : SB17.7033	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. CAPITOL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021	
Mailing Address 300 FIRST STREET			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 136.82	
Purpose of Disbursement BURGESS REIMBURSEMENT: TRAVEL: MEETING EXPENSE: MEALS			Transaction ID : SB17.7061	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. CHAIN BRIDGE BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021	
Mailing Address 1445-A LAUGHLIN AVE			FEC Identification Number C	
City MCLEAN	State VA	Zip Code 22101	Amount of Each Disbursement this Period 25.00	
Purpose of Disbursement BANK FEES			Transaction ID : SB17.6998	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8603.39
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CHAIN BRIDGE BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021	
Mailing Address 1445-A LAUGHLIN AVE			FEC Identification Number C	
City MCLEAN	State VA	Zip Code 22101	Amount of Each Disbursement this Period 25.00	
Purpose of Disbursement BANK FEES		Category/ Type	Transaction ID : SB17.6999	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. CHAIN BRIDGE BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2021	
Mailing Address 1445-A LAUGHLIN AVE			FEC Identification Number C	
City MCLEAN	State VA	Zip Code 22101	Amount of Each Disbursement this Period 25.00	
Purpose of Disbursement BANK FEES		Category/ Type	Transaction ID : SB17.7000	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. CHAIN BRIDGE BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2021	
Mailing Address 1445-A LAUGHLIN AVE			FEC Identification Number C	
City MCLEAN	State VA	Zip Code 22101	Amount of Each Disbursement this Period 25.00	
Purpose of Disbursement BANK FEES		Category/ Type	Transaction ID : SB17.7001	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	75.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 104			
	<input checked="" type="checkbox"/> 17 <input 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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CHAIN BRIDGE BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2021		
Mailing Address 1445-A LAUGHLIN AVE			FEC Identification Number <b>C</b>		
City MCLEAN	State VA	Zip Code 22101			
Purpose of Disbursement BANK FEES		Candidate Name		Category/Type	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID : <b>SB17.7002</b>	
State:	District:			<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CHAIN BRIDGE BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2021		
Mailing Address 1445-A LAUGHLIN AVE			FEC Identification Number <b>C</b>		
City MCLEAN	State VA	Zip Code 22101			
Purpose of Disbursement BANK FEES		Candidate Name		Category/Type	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID : <b>SB17.7003</b>	
State:	District:			<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CHAIN BRIDGE BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2021		
Mailing Address 1445-A LAUGHLIN AVE			FEC Identification Number <b>C</b>		
City MCLEAN	State VA	Zip Code 22101			
Purpose of Disbursement BANK FEES		Candidate Name		Category/Type	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID : <b>SB17.7004</b>	
State:	District:			<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	75.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 104			
	<input checked="" type="checkbox"/> 17 <input 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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CHAIN BRIDGE BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2021		
Mailing Address 1445-A LAUGHLIN AVE					
City MCLEAN	State VA	Zip Code 22101	FEC Identification Number C		
Purpose of Disbursement BANK FEES		Category/ Type	Amount of Each Disbursement this Period 25.00		
Candidate Name		Transaction ID : SB17.7005			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. CHAIN BRIDGE BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2021		
Mailing Address 1445-A LAUGHLIN AVE					
City MCLEAN	State VA	Zip Code 22101	FEC Identification Number C		
Purpose of Disbursement BANK FEES		Category/ Type	Amount of Each Disbursement this Period 25.00		
Candidate Name		Transaction ID : SB17.7006			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. CLARK, NATHAN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2021		
Mailing Address 9009 LADY'S SECRET DRIVE					
City INDIAN TRAIL	State NC	Zip Code 28079	FEC Identification Number C		
Purpose of Disbursement PAYROLL		Category/ Type	Amount of Each Disbursement this Period 844.54		
Candidate Name		Transaction ID : SB17.7039			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	894.54
<b>TOTAL</b> This Period (last page this line number only).....	894.54

**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 48 OF 104			
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CLARK, NATHAN, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2021
Mailing Address 9009 LADY'S SECRET DRIVE		FEC Identification Number C
City INDIAN TRAIL	State NC	Zip Code 28079
Purpose of Disbursement PAYROLL	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 844.54	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.7041
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CLARK, NATHAN, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2021
Mailing Address 9009 LADY'S SECRET DRIVE		FEC Identification Number C
City INDIAN TRAIL	State NC	Zip Code 28079
Purpose of Disbursement TRAVEL: MILEAGE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 699.52	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.7027
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CLARK, NATHAN, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2021
Mailing Address 9009 LADY'S SECRET DRIVE		FEC Identification Number C
City INDIAN TRAIL	State NC	Zip Code 28079
Purpose of Disbursement PAYROLL	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 844.54	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.7028
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2388.60
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 104			
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CLARK, NATHAN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2021		
Mailing Address 9009 LADY'S SECRET DRIVE			FEC Identification Number C		
City INDIAN TRAIL	State NC	Zip Code 28079	Amount of Each Disbursement this Period 844.54		
Purpose of Disbursement PAYROLL		Category/ Type	Transaction ID : SB17.7029		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. CLARK, NATHAN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2021		
Mailing Address 9009 LADY'S SECRET DRIVE			FEC Identification Number C		
City INDIAN TRAIL	State NC	Zip Code 28079	Amount of Each Disbursement this Period 844.54		
Purpose of Disbursement PAYROLL		Category/ Type	Transaction ID : SB17.7030		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. CLARK, NATHAN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2021		
Mailing Address 9009 LADY'S SECRET DRIVE			FEC Identification Number C		
City INDIAN TRAIL	State NC	Zip Code 28079	Amount of Each Disbursement this Period 93.36		
Purpose of Disbursement EXPENSE REIMBURSEMENT: SEE ITEMIZATIONS IF REQUIRED		Category/ Type	Transaction ID : SB17.7031		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1782.44
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CLARK, NATHAN, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2021
Mailing Address 9009 LADY'S SECRET DRIVE		FEC Identification Number C
City INDIAN TRAIL	State NC	Zip Code 28079
Purpose of Disbursement PAYROLL	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 844.54	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.7032
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. DIRECT MAIL PROCESSORS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2021
Mailing Address 1150 CONRAD COURT		FEC Identification Number C
City HAGERSTOWN	State MD	Zip Code 21740
Purpose of Disbursement DATA MANAGEMENT	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 400.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.6989
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. DIRECT MAIL PROCESSORS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2021
Mailing Address 1150 CONRAD COURT		FEC Identification Number C
City HAGERSTOWN	State MD	Zip Code 21740
Purpose of Disbursement DATA MANAGEMENT	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 550.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.6990
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1794.54
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. DIRECT MAIL PROCESSORS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2021
Mailing Address 1150 CONRAD COURT		FEC Identification Number C
City HAGERSTOWN	State MD	Zip Code 21740
Purpose of Disbursement DATA MANAGEMENT		Amount of Each Disbursement this Period 472.11
Candidate Name		Transaction ID : SB17.6991
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DONOR BUREAU</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2021
Mailing Address 1900 N CULPEPPER ST		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22207
Purpose of Disbursement STATISTICAL MODELING		Amount of Each Disbursement this Period 164.92
Candidate Name		Transaction ID : SB17.6987
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ELITE CARD PROCESSING LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2021
Mailing Address 13701 MAUGANSVILLE RD SUITE 5		FEC Identification Number C
City HAGERSTOWN	State MD	Zip Code 21740
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 56.52
Candidate Name		Transaction ID : SB17.6982
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	693.55
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ELITE CARD PROCESSING LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2021	
Mailing Address 13701 MAUGANSVILLE RD SUITE 5			FEC Identification Number C	
City HAGERSTOWN	State MD	Zip Code 21740	Amount of Each Disbursement this Period 54.17	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.6983	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. ELITE CARD PROCESSING LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2021	
Mailing Address 13701 MAUGANSVILLE RD SUITE 5			FEC Identification Number C	
City HAGERSTOWN	State MD	Zip Code 21740	Amount of Each Disbursement this Period 56.44	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.6984	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. ENTERPRISE CAR RENTAL</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021	
Mailing Address 600 CORPORATE PARK DRIVE			FEC Identification Number C	
City ST LOUIS	State MO	Zip Code 63105	Amount of Each Disbursement this Period 382.23	
Purpose of Disbursement BURGESS REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION		Category/ Type	Transaction ID : SB17.7057	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	110.61
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 104			
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ENTERPRISE CAR RENTAL</b>		Date of Disbursement
Mailing Address 600 CORPORATE PARK DRIVE		M M / D D / Y Y Y Y 10 / 29 / 2021
City ST LOUIS	State MO	Zip Code 63105
Purpose of Disbursement BURGESS REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 500.04
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.7063 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ENTERPRISE CAR RENTAL</b>		Date of Disbursement
Mailing Address 600 CORPORATE PARK DRIVE		M M / D D / Y Y Y Y 11 / 19 / 2021
City ST LOUIS	State MO	Zip Code 63105
Purpose of Disbursement BURGESS REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 746.69
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.7055 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. EPAY BUSINESS SOLUTIONS INC</b>		Date of Disbursement
Mailing Address 19 MIDSTATE DRIVE SUITE 110		M M / D D / Y Y Y Y 10 / 14 / 2021
City AUBURN	State MA	Zip Code 01501
Purpose of Disbursement PAYROLL FEES		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 65.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.6970 <input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	65.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. EPAY BUSINESS SOLUTIONS INC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2021		
Mailing Address 19 MIDSTATE DRIVE SUITE 110			FEC Identification Number <b>C</b>		
City AUBURN	State MA	Zip Code 01501			Amount of Each Disbursement this Period 495.92
Purpose of Disbursement PAYROLL TAXES			Transaction ID : <b>SB17.6971</b>		
Candidate Name					Memo Item <input type="checkbox"/>
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. EPAY BUSINESS SOLUTIONS INC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2021		
Mailing Address 19 MIDSTATE DRIVE SUITE 110			FEC Identification Number <b>C</b>		
City AUBURN	State MA	Zip Code 01501			Amount of Each Disbursement this Period 65.00
Purpose of Disbursement PAYROLL FEES			Transaction ID : <b>SB17.6972</b>		
Candidate Name					Memo Item <input type="checkbox"/>
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. EPAY BUSINESS SOLUTIONS INC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2021		
Mailing Address 19 MIDSTATE DRIVE SUITE 110			FEC Identification Number <b>C</b>		
City AUBURN	State MA	Zip Code 01501			Amount of Each Disbursement this Period 495.92
Purpose of Disbursement PAYROLL TAXES			Transaction ID : <b>SB17.6973</b>		
Candidate Name					Memo Item <input type="checkbox"/>
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1056.84
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. EPAY BUSINESS SOLUTIONS INC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2021		
Mailing Address 19 MIDSTATE DRIVE SUITE 110			FEC Identification Number C		
City AUBURN	State MA	Zip Code 01501			Amount of Each Disbursement this Period 65.00
Purpose of Disbursement PAYROLL FEES			Transaction ID : SB17.6974		
Candidate Name					Memo Item <input type="checkbox"/>
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. EPAY BUSINESS SOLUTIONS INC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2021		
Mailing Address 19 MIDSTATE DRIVE SUITE 110			FEC Identification Number C		
City AUBURN	State MA	Zip Code 01501			Amount of Each Disbursement this Period 495.92
Purpose of Disbursement PAYROLL TAXES			Transaction ID : SB17.6975		
Candidate Name					Memo Item <input type="checkbox"/>
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. EPAY BUSINESS SOLUTIONS INC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2021		
Mailing Address 19 MIDSTATE DRIVE SUITE 110			FEC Identification Number C		
City AUBURN	State MA	Zip Code 01501			Amount of Each Disbursement this Period 65.00
Purpose of Disbursement PAYROLL FEES			Transaction ID : SB17.6976		
Candidate Name					Memo Item <input type="checkbox"/>
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	625.92
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 104			
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. EPAY BUSINESS SOLUTIONS INC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2021		
Mailing Address 19 MIDSTATE DRIVE SUITE 110			FEC Identification Number C		
City AUBURN	State MA	Zip Code 01501	Amount of Each Disbursement this Period 495.92		
Purpose of Disbursement PAYROLL TAXES		Category/ Type	Transaction ID : SB17.6977		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. EPAY BUSINESS SOLUTIONS INC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2021		
Mailing Address 19 MIDSTATE DRIVE SUITE 110			FEC Identification Number C		
City AUBURN	State MA	Zip Code 01501	Amount of Each Disbursement this Period 65.00		
Purpose of Disbursement PAYROLL FEES		Category/ Type	Transaction ID : SB17.6978		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. EPAY BUSINESS SOLUTIONS INC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2021		
Mailing Address 19 MIDSTATE DRIVE SUITE 110			FEC Identification Number C		
City AUBURN	State MA	Zip Code 01501	Amount of Each Disbursement this Period 483.92		
Purpose of Disbursement PAYROLL TAXES		Category/ Type	Transaction ID : SB17.6979		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1044.84
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. EPAY BUSINESS SOLUTIONS INC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2021	
Mailing Address 19 MIDSTATE DRIVE SUITE 110			FEC Identification Number C	
City AUBURN	State MA	Zip Code 01501	Amount of Each Disbursement this Period 65.00	
Purpose of Disbursement PAYROLL FEES		Category/ Type	Transaction ID : SB17.6980	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. EPAY BUSINESS SOLUTIONS INC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2021	
Mailing Address 19 MIDSTATE DRIVE SUITE 110			FEC Identification Number C	
City AUBURN	State MA	Zip Code 01501	Amount of Each Disbursement this Period 483.92	
Purpose of Disbursement PAYROLL TAXES		Category/ Type	Transaction ID : SB17.6981	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. FOURNIER, RYAN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2021	
Mailing Address 105 DOE CIRCLE			FEC Identification Number C	
City SELMA	State NC	Zip Code 27576	Amount of Each Disbursement this Period 4800.00	
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type	Transaction ID : SB17.7037	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5348.92
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 104			
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. FULFILLMENT SOLUTIONS, INC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2021		
Mailing Address 44970 FALCON PLACE SUITE 400			FEC Identification Number C		
City STERLING	State VA	Zip Code 20166	Amount of Each Disbursement this Period 596.96		
Purpose of Disbursement PRINTING EXPENSE & POSTAGE		Category/ Type	Transaction ID : SB17.6960		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. FULFILLMENT SOLUTIONS, INC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2021		
Mailing Address 44970 FALCON PLACE SUITE 400			FEC Identification Number C		
City STERLING	State VA	Zip Code 20166	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement PRINTING EXPENSE & POSTAGE		Category/ Type	Transaction ID : SB17.6961		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. FULFILLMENT SOLUTIONS, INC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2021		
Mailing Address 44970 FALCON PLACE SUITE 400			FEC Identification Number C		
City STERLING	State VA	Zip Code 20166	Amount of Each Disbursement this Period 2396.26		
Purpose of Disbursement PRINTING EXPENSE & POSTAGE		Category/ Type	Transaction ID : SB17.6962		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3493.22
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 104			
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. FULFILLMENT SOLUTIONS, INC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2021		
Mailing Address 44970 FALCON PLACE SUITE 400			FEC Identification Number C		
City STERLING	State VA	Zip Code 20166	Amount of Each Disbursement this Period 2188.54		
Purpose of Disbursement PRINTING EXPENSE & POSTAGE		Category/ Type	Transaction ID : SB17.6963		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. GOOGLE</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2021		
Mailing Address 1600 AMPHITHEATRE PARKWAY			FEC Identification Number C		
City MOUNTAIN VIEW	State CA	Zip Code 94043	Amount of Each Disbursement this Period 574.13		
Purpose of Disbursement SOFTWARE		Category/ Type	Transaction ID : SB17.6958		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. GOOGLE</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2021		
Mailing Address 1600 AMPHITHEATRE PARKWAY			FEC Identification Number C		
City MOUNTAIN VIEW	State CA	Zip Code 94043	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement SOFTWARE		Category/ Type	Transaction ID : SB17.6959		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3262.67
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 104			
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. HILTON WORLDWIDE</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021		
Mailing Address 7930 JONES BRANCH DR					
City MCLEAN	State VA	Zip Code 22102	FEC Identification Number C		
Purpose of Disbursement BURGESS REIMBURSEMENT: TRAVEL: LODGING			Amount of Each Disbursement this Period 1446.22		
Candidate Name		Category/ Type	Transaction ID : SB17.7059		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input checked="" type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. HILTON WORLDWIDE</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2021		
Mailing Address 7930 JONES BRANCH DR					
City MCLEAN	State VA	Zip Code 22102	FEC Identification Number C		
Purpose of Disbursement BURGESS REIMBURSEMENT: TRAVEL: LODGING			Amount of Each Disbursement this Period 510.56		
Candidate Name		Category/ Type	Transaction ID : SB17.7062		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input checked="" type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. HOP'S BAR B Q</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2021		
Mailing Address 240 SUNSET AVE					
City ASHEBORO	State NC	Zip Code 27203	FEC Identification Number C		
Purpose of Disbursement BURGESS REIMBURSEMENT: TRAVEL: MEETING EXPENSE: MEALS			Amount of Each Disbursement this Period 558.79		
Candidate Name		Category/ Type	Transaction ID : SB17.7067		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input checked="" type="checkbox"/> Memo Item		
State:	District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. HOP'S BAR B Q</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2021	
Mailing Address 240 SUNSET AVE			FEC Identification Number C	
City ASHEBORO	State NC	Zip Code 27203	Amount of Each Disbursement this Period 14.95	
Purpose of Disbursement REED REIMBURSEMENT: TRAVEL: FOOD		Category/ Type	Transaction ID : SB17.7048	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. JAWOR, JACK, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2021	
Mailing Address 3022 CRONE RD			FEC Identification Number C	
City BORDEN	State IN	Zip Code 47106	Amount of Each Disbursement this Period 2900.00	
Purpose of Disbursement IN-KIND: STRATEGY CONSULTING		Category/ Type	Transaction ID : SB17.8344	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. LEO'S WHISKEY BAR</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2021	
Mailing Address 111 NORTH ST			FEC Identification Number C	
City ASHEBORO	State NC	Zip Code 27203	Amount of Each Disbursement this Period 14.50	
Purpose of Disbursement REED REIMBURSEMENT: TRAVEL: FOOD		Category/ Type	Transaction ID : SB17.7044	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MAJORITY STRATEGIES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021	
Mailing Address PO BOX 679219			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75267	Amount of Each Disbursement this Period 8.00	
Purpose of Disbursement FUNDRAISING FEES		Category/Type	Transaction ID : SB17.6939	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. MAJORITY STRATEGIES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2021	
Mailing Address PO BOX 679219			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75267	Amount of Each Disbursement this Period 0.50	
Purpose of Disbursement FUNDRAISING FEES		Category/Type	Transaction ID : SB17.6940	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. MAJORITY STRATEGIES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2021	
Mailing Address PO BOX 679219			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75267	Amount of Each Disbursement this Period 2.50	
Purpose of Disbursement FUNDRAISING FEES		Category/Type	Transaction ID : SB17.6941	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 104			
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MAJORITY STRATEGIES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2021		
Mailing Address PO BOX 679219			FEC Identification Number C		
City DALLAS	State TX	Zip Code 75267	Amount of Each Disbursement this Period 12.50		
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.6942		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. MAJORITY STRATEGIES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2021		
Mailing Address PO BOX 679219			FEC Identification Number C		
City DALLAS	State TX	Zip Code 75267	Amount of Each Disbursement this Period 2.60		
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.6943		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. MAJORITY STRATEGIES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2021		
Mailing Address PO BOX 679219			FEC Identification Number C		
City DALLAS	State TX	Zip Code 75267	Amount of Each Disbursement this Period 2.00		
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.6944		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	17.10
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 104			
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MAJORITY STRATEGIES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2021		
Mailing Address PO BOX 679219			FEC Identification Number C		
City DALLAS	State TX	Zip Code 75267	Amount of Each Disbursement this Period 4.50		
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.6945		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. MAJORITY STRATEGIES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2021		
Mailing Address PO BOX 679219			FEC Identification Number C		
City DALLAS	State TX	Zip Code 75267	Amount of Each Disbursement this Period 1250.00		
Purpose of Disbursement DIGITAL CONSULTING		Category/ Type	Transaction ID : SB17.6946		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. MAJORITY STRATEGIES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2021		
Mailing Address PO BOX 679219			FEC Identification Number C		
City DALLAS	State TX	Zip Code 75267	Amount of Each Disbursement this Period 8.00		
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.6947		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1262.50
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 65 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MAJORITY STRATEGIES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2021	
Mailing Address PO BOX 679219			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75267	Amount of Each Disbursement this Period 5.10	
Purpose of Disbursement FUNDRAISING FEES		Category/Type	Transaction ID : SB17.6948	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. MAJORITY STRATEGIES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2021	
Mailing Address PO BOX 679219			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75267	Amount of Each Disbursement this Period 0.50	
Purpose of Disbursement FUNDRAISING FEES		Category/Type	Transaction ID : SB17.6949	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. MAJORITY STRATEGIES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2021	
Mailing Address PO BOX 679219			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75267	Amount of Each Disbursement this Period 10.00	
Purpose of Disbursement FUNDRAISING FEES		Category/Type	Transaction ID : SB17.6950	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	15.60
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 66 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MAJORITY STRATEGIES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2021	
Mailing Address PO BOX 679219			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75267	Amount of Each Disbursement this Period 290.00	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.6951	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. MAJORITY STRATEGIES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2021	
Mailing Address PO BOX 679219			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75267	Amount of Each Disbursement this Period 3.50	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.6952	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. MAJORITY STRATEGIES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2021	
Mailing Address PO BOX 679219			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75267	Amount of Each Disbursement this Period 0.10	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.6953	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	293.60
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MAJORITY STRATEGIES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2021	
Mailing Address PO BOX 679219			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75267	Amount of Each Disbursement this Period 580.00	
Purpose of Disbursement FUNDRAISING FEES		Category/Type	Transaction ID : SB17.6954	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. MASON, KELLY, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2021	
Mailing Address 6504 OAK CREST DRIVE			FEC Identification Number C	
City BURLINGTON	State KY	Zip Code 41005	Amount of Each Disbursement this Period 2900.00	
Purpose of Disbursement IN-KIND: FIELD CONSULTING		Category/Type	Transaction ID : SB17.8341	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. MIDDLETOWN VALLEY BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2021	
Mailing Address 1101 PROFESSIONAL COURT			FEC Identification Number C	
City HAGERSTOWN	State MD	Zip Code 21740	Amount of Each Disbursement this Period 42.37	
Purpose of Disbursement BANK FEES		Category/Type	Transaction ID : SB17.6935	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3522.37
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MILLS, CAMDEN, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2021
Mailing Address 240 DONNA ROAD		FEC Identification Number C
City ASHEBORO	State NC	Zip Code 27205
Purpose of Disbursement FIELD CONSULTING		Amount of Each Disbursement this Period 500.00
Candidate Name		Transaction ID : SB17.7023
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MILLS, CAMDEN, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2021
Mailing Address 240 DONNA ROAD		FEC Identification Number C
City ASHEBORO	State NC	Zip Code 27205
Purpose of Disbursement FIELD CONSULTING		Amount of Each Disbursement this Period 500.00
Candidate Name		Transaction ID : SB17.7024
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. NORTH CAROLINA REPUBLICAN PARTY</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2021
Mailing Address 1506 HILLSBOROUGH ST		FEC Identification Number C
City RALEIGH	State NC	Zip Code 27605
Purpose of Disbursement EVENT REGISTRATION FEE		Amount of Each Disbursement this Period 350.00
Candidate Name		Transaction ID : SB17.6932
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. NOTTURNO, KARL, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2021
Mailing Address 71 RANDOLPH PLACE NW		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20001
Purpose of Disbursement STRATEGIC CONSULTANT		Amount of Each Disbursement this Period 1000.00
Candidate Name		Transaction ID : SB17.7025
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NOTTURNO, KARL, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2021
Mailing Address 71 RANDOLPH PLACE NW		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20001
Purpose of Disbursement STRATEGIC CONSULTANT		Amount of Each Disbursement this Period 1000.00
Candidate Name		Transaction ID : SB17.7026
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. NOVA LIST</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2021
Mailing Address 20130 LAKEVIEW CENTER PLAZA SUITE 300		FEC Identification Number C
City ASHBURN	State VA	Zip Code 20147
Purpose of Disbursement LIST RENTAL		Amount of Each Disbursement this Period 1007.27
Candidate Name		Transaction ID : SB17.6931
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3007.27
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 104			
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PARA BELLUM PUBLIC AFFAIRS LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021		
Mailing Address 13121 OLYMPIA WAY			FEC Identification Number C		
City SANTA ANA	State CA	Zip Code 92705	Amount of Each Disbursement this Period 351.00		
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.6923		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. PARA BELLUM PUBLIC AFFAIRS LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2021		
Mailing Address 13121 OLYMPIA WAY			FEC Identification Number C		
City SANTA ANA	State CA	Zip Code 92705	Amount of Each Disbursement this Period 26.25		
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.6924		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. PARA BELLUM PUBLIC AFFAIRS LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2021		
Mailing Address 13121 OLYMPIA WAY			FEC Identification Number C		
City SANTA ANA	State CA	Zip Code 92705	Amount of Each Disbursement this Period 3.00		
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.6925		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	380.25
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PARA BELLUM PUBLIC AFFAIRS LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2021	
Mailing Address 13121 OLYMPIA WAY			FEC Identification Number C	
City SANTA ANA	State CA	Zip Code 92705	Amount of Each Disbursement this Period 2250.00	
Purpose of Disbursement MEDIA PLACEMENT FEES		Category/Type	Transaction ID : SB17.6926	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. PARA BELLUM PUBLIC AFFAIRS LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2021	
Mailing Address 13121 OLYMPIA WAY			FEC Identification Number C	
City SANTA ANA	State CA	Zip Code 92705	Amount of Each Disbursement this Period 2.25	
Purpose of Disbursement FUNDRAISING FEES		Category/Type	Transaction ID : SB17.6927	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. PARA BELLUM PUBLIC AFFAIRS LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2021	
Mailing Address 13121 OLYMPIA WAY			FEC Identification Number C	
City SANTA ANA	State CA	Zip Code 92705	Amount of Each Disbursement this Period 0.30	
Purpose of Disbursement FUNDRAISING FEES		Category/Type	Transaction ID : SB17.6928	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2252.55
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. POSTAGE FOR DIRECT MAIL FUNDRAISER, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2021
Mailing Address 20130 LAKEVIEW CENTER PLAZA SUITE 300		FEC Identification Number C
City ASHBURN	State VA	Zip Code 20147
Purpose of Disbursement POSTAGE		Amount of Each Disbursement this Period 800.00
Candidate Name		Transaction ID : SB17.6917
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. POSTAGE FOR DIRECT MAIL FUNDRAISER, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2021
Mailing Address 20130 LAKEVIEW CENTER PLAZA SUITE 300		FEC Identification Number C
City ASHBURN	State VA	Zip Code 20147
Purpose of Disbursement POSTAGE		Amount of Each Disbursement this Period 350.00
Candidate Name		Transaction ID : SB17.6918
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. POSTAGE FOR DIRECT MAIL FUNDRAISER, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2021
Mailing Address 20130 LAKEVIEW CENTER PLAZA SUITE 300		FEC Identification Number C
City ASHBURN	State VA	Zip Code 20147
Purpose of Disbursement POSTAGE		Amount of Each Disbursement this Period 2668.96
Candidate Name		Transaction ID : SB17.6919
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3818.96
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 104			
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. POSTAGE FOR DIRECT MAIL FUNDRAISER, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2021
Mailing Address 20130 LAKEVIEW CENTER PLAZA SUITE 300		FEC Identification Number C
City ASHBURN	State VA	Zip Code 20147
Purpose of Disbursement POSTAGE		Amount of Each Disbursement this Period 8380.70
Candidate Name		Transaction ID : SB17.6920
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. POSTAGE FOR DIRECT MAIL FUNDRAISER, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2021
Mailing Address 20130 LAKEVIEW CENTER PLAZA SUITE 300		FEC Identification Number C
City ASHBURN	State VA	Zip Code 20147
Purpose of Disbursement POSTAGE		Amount of Each Disbursement this Period 927.50
Candidate Name		Transaction ID : SB17.6921
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. QUIKTRIP</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2021
Mailing Address 2790 LANE STREET		FEC Identification Number C
City KANNAPOLIS	State NC	Zip Code 28083
Purpose of Disbursement TRAVEL: FUEL		Amount of Each Disbursement this Period 62.88
Candidate Name		Transaction ID : SB17.6916
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9371.08
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 104			
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. RAEZLER, ADAM, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021		
Mailing Address 5990 RICHMOND HWY APT 214			FEC Identification Number C		
City ALEXANDRIA	State VA	Zip Code 22303	Amount of Each Disbursement this Period 4750.00		
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type	Transaction ID : SB17.7035		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. RED CURVE SOLUTIONS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021		
Mailing Address 138 CONANT ST 2ND FLOOR			FEC Identification Number C		
City BEVERLY	State MA	Zip Code 01915	Amount of Each Disbursement this Period 3295.47		
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type	Transaction ID : SB17.6908		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. RED CURVE SOLUTIONS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021		
Mailing Address 138 CONANT ST 2ND FLOOR			FEC Identification Number C		
City BEVERLY	State MA	Zip Code 01915	Amount of Each Disbursement this Period 1500.00		
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type	Transaction ID : SB17.6909		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9545.47
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. RED CURVE SOLUTIONS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2021	
Mailing Address 138 CONANT ST 2ND FLOOR			FEC Identification Number C	
City BEVERLY	State MA	Zip Code 01915	Amount of Each Disbursement this Period 91.13	
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type	Transaction ID : SB17.6910	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. RED CURVE SOLUTIONS</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2021	
Mailing Address 138 CONANT ST 2ND FLOOR			FEC Identification Number C	
City BEVERLY	State MA	Zip Code 01915	Amount of Each Disbursement this Period 1598.92	
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type	Transaction ID : SB17.6911	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. REED, BRYDEN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2021	
Mailing Address 8418 BIG CREEK CT			FEC Identification Number C	
City MATTHEWS	State NC	Zip Code 28105	Amount of Each Disbursement this Period 844.54	
Purpose of Disbursement PAYROLL		Category/ Type	Transaction ID : SB17.7038	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2534.59
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. REED, BRYDEN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2021	
Mailing Address 8418 BIG CREEK CT			FEC Identification Number C	
City MATTHEWS	State NC	Zip Code 28105	Amount of Each Disbursement this Period 844.54	
Purpose of Disbursement PAYROLL		Category/ Type	Transaction ID : SB17.7040	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. REED, BRYDEN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2021	
Mailing Address 8418 BIG CREEK CT			FEC Identification Number C	
City MATTHEWS	State NC	Zip Code 28105	Amount of Each Disbursement this Period 700.02	
Purpose of Disbursement TRAVEL: MILEAGE & EXPENSE REIMBURSEMENTS: SEE ITEMIZATIONS IF REQUIRED		Category/ Type	Transaction ID : SB17.7018	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. REED, BRYDEN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2021	
Mailing Address 8418 BIG CREEK CT			FEC Identification Number C	
City MATTHEWS	State NC	Zip Code 28105	Amount of Each Disbursement this Period 844.54	
Purpose of Disbursement PAYROLL		Category/ Type	Transaction ID : SB17.7019	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2389.10
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 104			
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. REED, BRYDEN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2021		
Mailing Address 8418 BIG CREEK CT			FEC Identification Number C		
City MATTHEWS	State NC	Zip Code 28105	Amount of Each Disbursement this Period 844.54		
Purpose of Disbursement PAYROLL		Category/ Type	Transaction ID : SB17.7020		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. REED, BRYDEN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2021		
Mailing Address 8418 BIG CREEK CT			FEC Identification Number C		
City MATTHEWS	State NC	Zip Code 28105	Amount of Each Disbursement this Period 844.54		
Purpose of Disbursement PAYROLL		Category/ Type	Transaction ID : SB17.7021		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. REED, BRYDEN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2021		
Mailing Address 7028 SETON HOUSE LANE			FEC Identification Number C		
City CHARLOTTE	State NC	Zip Code 28277	Amount of Each Disbursement this Period 1200.00		
Purpose of Disbursement IN-KIND: STRATEGY CONSULTING		Category/ Type	Transaction ID : SB17.8351		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2889.08
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 78 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. REED, BRYDEN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2021	
Mailing Address 8418 BIG CREEK CT			FEC Identification Number C	
City MATTHEWS	State NC	Zip Code 28105	Amount of Each Disbursement this Period 844.54	
Purpose of Disbursement PAYROLL		Category/ Type	Transaction ID : SB17.7022	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. REED, MCKENZIE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2021	
Mailing Address 7028 SETON HOUSE LANE			FEC Identification Number C	
City CHARLOTTE	State NC	Zip Code 28277	Amount of Each Disbursement this Period 2900.00	
Purpose of Disbursement IN-KIND: FIELD CONSULTING		Category/ Type	Transaction ID : SB17.8347	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. RIVET, JESSICA, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2021	
Mailing Address 6202 SETON HOUSE LANE			FEC Identification Number C	
City CHARLOTTE	State NC	Zip Code 28277	Amount of Each Disbursement this Period 2650.00	
Purpose of Disbursement IN-KIND: FIELD CONSULTING		Category/ Type	Transaction ID : SB17.8349	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6394.54
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 79 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SHARP, JASON, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2021	
Mailing Address 3790 KEPLEY RD			FEC Identification Number C	
City GEORGETOWN	State IN	Zip Code 47122	Amount of Each Disbursement this Period 2900.00	
Purpose of Disbursement IN-KIND: STRATEGY CONSULTING		Category/Type	Transaction ID : SB17.8338	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. SMOKE &amp; OAK</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2021	
Mailing Address 127 W CENTER ST			FEC Identification Number C	
City LEXINGTON	State NC	Zip Code 27292	Amount of Each Disbursement this Period 49.66	
Purpose of Disbursement REED REIMBURSEMENT: TRAVEL: FOOD		Category/Type	Transaction ID : SB17.7050	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. SQUARESPACE, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2021	
Mailing Address 8 CLARKSON STREET 12TH FLOOR			FEC Identification Number C	
City NEW YORK	State NY	Zip Code 10014	Amount of Each Disbursement this Period 57.38	
Purpose of Disbursement WEB HOSTING		Category/Type	Transaction ID : SB17.6889	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2957.38
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 104			
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SQUARESPACE, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2021		
Mailing Address 8 CLARKSON STREET 12TH FLOOR			FEC Identification Number C		
City NEW YORK	State NY	Zip Code 10014	Amount of Each Disbursement this Period 20.00		
Purpose of Disbursement WEB HOSTING		Category/ Type	Transaction ID : SB17.6890		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. SQUARESPACE, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2021		
Mailing Address 8 CLARKSON STREET 12TH FLOOR			FEC Identification Number C		
City NEW YORK	State NY	Zip Code 10014	Amount of Each Disbursement this Period 20.00		
Purpose of Disbursement WEB HOSTING		Category/ Type	Transaction ID : SB17.6891		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. SQUARESPACE, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2021		
Mailing Address 8 CLARKSON STREET 12TH FLOOR			FEC Identification Number C		
City NEW YORK	State NY	Zip Code 10014	Amount of Each Disbursement this Period 60.00		
Purpose of Disbursement WEB HOSTING		Category/ Type	Transaction ID : SB17.6892		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 81 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. STAPLES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2021
Mailing Address 210 HARMON CREEK ROAD		FEC Identification Number C
City KERNERSVILLE	State NC	Zip Code 27284
Purpose of Disbursement OFFICE SUPPLIES		Amount of Each Disbursement this Period 190.87
Candidate Name		Transaction ID : SB17.6876
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. STAPLES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2021
Mailing Address 210 HARMON CREEK ROAD		FEC Identification Number C
City KERNERSVILLE	State NC	Zip Code 27284
Purpose of Disbursement OFFICE SUPPLIES		Amount of Each Disbursement this Period 195.06
Candidate Name		Transaction ID : SB17.6877
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. STAPLES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2021
Mailing Address 10850 PROVIDENCE RD		FEC Identification Number C
City CHARLOTTE	State NC	Zip Code 28277
Purpose of Disbursement CLARK REIMBURSEMENT: OFFICE SUPPLIES		Amount of Each Disbursement this Period 65.22
Candidate Name		Transaction ID : SB17.7054
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	385.93
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 104			
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. STRATEGIC MEDIA PLACEMENT INC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021		
Mailing Address 7669 STAGERS LOOP			FEC Identification Number C		
City DELAWARE	State OH	Zip Code 43015	Amount of Each Disbursement this Period 8658.00		
Purpose of Disbursement PLACED MEDIA		Category/Type	Transaction ID : SB17.6873		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. SUNRISE DATA SERVICES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2021		
Mailing Address 20130 LAKEVIEW CENTER PLAZA SUITE 300			FEC Identification Number C		
City ASHBURN	State VA	Zip Code 20147	Amount of Each Disbursement this Period 417.50		
Purpose of Disbursement DATA MANAGEMENT		Category/Type	Transaction ID : SB17.6871		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. TATANGO INC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2021		
Mailing Address 600 STEWART ST SUITE 400			FEC Identification Number C		
City SEATTLE	State WA	Zip Code 98101	Amount of Each Disbursement this Period 199.00		
Purpose of Disbursement SUBSCRIPTION		Category/Type	Transaction ID : SB17.6868		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9274.50
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 83 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. TATANGO INC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2021	
Mailing Address 600 STEWART ST SUITE 400			FEC Identification Number C	
City SEATTLE	State WA	Zip Code 98101	Amount of Each Disbursement this Period 199.00	
Purpose of Disbursement SUBSCRIPTION		Category/ Type	Transaction ID : SB17.6869	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. TATANGO INC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2021	
Mailing Address 600 STEWART ST SUITE 400			FEC Identification Number C	
City SEATTLE	State WA	Zip Code 98101	Amount of Each Disbursement this Period 199.00	
Purpose of Disbursement SUBSCRIPTION		Category/ Type	Transaction ID : SB17.6870	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. THE STRATEGY GROUP FOR MEDIA INC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2021	
Mailing Address 7669 STAGERS LOOP			FEC Identification Number C	
City DELAWARE	State OH	Zip Code 43015	Amount of Each Disbursement this Period 19751.08	
Purpose of Disbursement PLACED MEDIA		Category/ Type	Transaction ID : SB17.6865	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	20149.08
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 104			
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. UBER EATS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021		
Mailing Address 1455 MARKET STREET #400			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94103	Amount of Each Disbursement this Period 36.55		
Purpose of Disbursement TRAVEL: FOOD		Category/Type	Transaction ID : SB17.6860		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. UBER EATS</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2021		
Mailing Address 1455 MARKET STREET #400			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94103	Amount of Each Disbursement this Period 2.00		
Purpose of Disbursement TRAVEL: FOOD		Category/Type	Transaction ID : SB17.6861		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. UBER EATS</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2021		
Mailing Address 1455 MARKET STREET #400			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94103	Amount of Each Disbursement this Period 16.46		
Purpose of Disbursement TRAVEL: FOOD		Category/Type	Transaction ID : SB17.6862		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	55.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 85 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WILLIAMS, MATT, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2021	
Mailing Address 813 E COURT AVE			FEC Identification Number C	
City JEFFERSONVILLE	State IN	Zip Code 47130	Amount of Each Disbursement this Period 2900.00	
Purpose of Disbursement IN-KIND: STRATEGY CONSULTING		Category/Type	Transaction ID : SB17.8354	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 2.20	
Purpose of Disbursement MERCHANT FEES		Category/Type	Transaction ID : SB17.6822	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 6.41	
Purpose of Disbursement MERCHANT FEES		Category/Type	Transaction ID : SB17.6823	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2908.61
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 104			
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2021		
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C		
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 4.51		
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.6824		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2021		
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C		
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 16.09		
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.6825		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2021		
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C		
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 1.36		
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.6826		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	21.96
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 104			
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2021		
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C		
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 0.49		
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.6827		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2021		
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C		
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 1.29		
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.6828		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2021		
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C		
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 1.06		
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.6829		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2.84
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 88 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 2.20	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.6830	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 3.94	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.6831	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 2.54	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.6832	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8.68
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 89 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 0.49	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.6833	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 0.49	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.6834	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 0.87	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.6835	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1.85
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 90 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 5.38	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.6836	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 110.50	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.6837	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 1.63	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.6838	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	117.51
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 104			
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2021		
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C		
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 0.34		
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.6839		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2021		
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C		
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 220.70		
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.6840		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2021		
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C		
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 1.74		
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.6841		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	222.78
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 104			
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>				Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530				FEC Identification Number <b>C</b>	
City ARLINGTON	State VA	Zip Code 22209			
Purpose of Disbursement MERCHANT FEES			Category/ Type		Amount of Each Disbursement this Period 53.77
Candidate Name			Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID : <b>SB17.6842</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:				
Memo Item <input type="checkbox"/>					

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>				Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530				FEC Identification Number <b>C</b>	
City ARLINGTON	State VA	Zip Code 22209			
Purpose of Disbursement MERCHANT FEES			Category/ Type		Amount of Each Disbursement this Period 270.27
Candidate Name			Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID : <b>SB17.6843</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:				
Memo Item <input type="checkbox"/>					

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>				Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530				FEC Identification Number <b>C</b>	
City ARLINGTON	State VA	Zip Code 22209			
Purpose of Disbursement MERCHANT FEES			Category/ Type		Amount of Each Disbursement this Period 17.38
Candidate Name			Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID : <b>SB17.6844</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:				
Memo Item <input type="checkbox"/>					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	341.42
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 93 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 12.65	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.6845	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 50.98	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.6846	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 269.00	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.6847	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	332.63
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 104			
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>				Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530				FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 269.05		
Purpose of Disbursement MERCHANT FEES			Candidate Name		Transaction ID : SB17.6848
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			Category/Type		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>				Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530				FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 4.78		
Purpose of Disbursement MERCHANT FEES			Candidate Name		Transaction ID : SB17.6849
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			Category/Type		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>				Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530				FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 5.68		
Purpose of Disbursement MERCHANT FEES			Candidate Name		Transaction ID : SB17.6850
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			Category/Type		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	279.51
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 95 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 3.37	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.6851	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 19.30	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.6852	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 2.80	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.6853	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	25.47
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 96 OF 104	
	<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)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2021	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 0.68	
Purpose of Disbursement MERCHANT FEES		Category/Type	Transaction ID : SB17.6854	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. X STRATEGIES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2021	
Mailing Address 499 EVERNIA ST UNIT 603			FEC Identification Number C	
City WEST PALM BEACH	State FL	Zip Code 33401	Amount of Each Disbursement this Period 3500.00	
Purpose of Disbursement PLACED MEDIA		Category/Type	Transaction ID : SB17.6821	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/Type	Memo Item	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3500.68
<b>TOTAL</b> This Period (last page this line number only).....▶	152773.22

**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 97 OF 104			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ANNA PAULINA LUNA FOR CONGRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2021
Mailing Address 1201 GANDY BLVD N P.O. BOX 23064			FEC Identification Number C C00718239
City SAINT PETERSBURG	State FL	Zip Code 33742	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement FEDERAL CONTRIBUTION		Category/ Type	Transaction ID : SB21.7014
Candidate Name PAULINA LUNA, ANNA, , ,		Disbursement For: 2022	<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: FL District: 13			

Full Name (Last, First, Middle Initial) <b>B. JOE KENT FOR CONGRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2021
Mailing Address PO BOX 2133			FEC Identification Number C C00771394
City BATTLE GROUND	State WA	Zip Code 98604	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement FEDERAL CONTRIBUTION		Category/ Type	Transaction ID : SB21.6957
Candidate Name KENT, JOSEPH, , ,		Disbursement For: 2022	<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: WA District: 03			

Full Name (Last, First, Middle Initial) <b>C. KAROLINE FOR CONGRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2021
Mailing Address PO BOX 307			FEC Identification Number C C00784884
City PLAISTOW	State NH	Zip Code 03865	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement FEDERAL CONTRIBUTION		Category/ Type	Transaction ID : SB21.6955
Candidate Name LEAVITT, KAROLINE, , ,		Disbursement For: 2022	<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NH District: 01			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 104			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**BO HINES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PATRICK WITT FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2021
Mailing Address PO BOX 89		FEC Identification Number C C00785493
City WATKINSVILLE	State GA	Zip Code 30677
Purpose of Disbursement FEDERAL CONTRIBUTION		Amount of Each Disbursement this Period 2000.00
Candidate Name WITT, PATRICK J, , ,		Transaction ID : SB21.6922
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: GA	District: 10	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	8000.00

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **BO HINES FOR CONGRESS** Transaction ID : **SC/10.4119**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) HINES, ROBERT, NICHOLAS, ,		<input type="checkbox"/> Memo Item	Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 320 SANFORD DRIVE PO BOX 414			
City MORGANTON	State NC	ZIP Code 26855	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 1.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1.00
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<b>TERMS</b>	Date Incurred M 01 / D 19 / Y 2021	Date Due M M / D D / Y DUE ON DEMAND	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	1.00
<b>TOTALS</b> 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) **BO HINES FOR CONGRESS** Transaction ID : **SC/10.4120**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) HINES, ROBERT, NICHOLAS, ,		<input type="checkbox"/> Memo Item	Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 320 SANFORD DRIVE PO BOX 414			
City MORGANTON	State NC	ZIP Code 26855	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 25.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 25.00
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<b>TERMS</b>	Date Incurred M 01 / D 20 / Y 2021	Date Due M M / D D / Y DUE ON DEMAND	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	[ ] 25.00
<b>TOTALS</b> 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) **BO HINES FOR CONGRESS** Transaction ID : **SC/10.4121**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>HINES, ROBERT, NICHOLAS, ,</b>		<input type="checkbox"/> Memo Item	Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 320 SANFORD DRIVE PO BOX 414			
City MORGANTON	State NC	ZIP Code 26855	<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
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<b>TERMS</b>	Date Incurred M 03 / D 31 / Y 2021	Date Due M M / D D / Y DUE ON DEMAND	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	100000.00
<b>TOTALS</b> 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) **BO HINES FOR CONGRESS** Transaction ID : **SC/10.5463**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>HINES, ROBERT, NICHOLAS, ,</b>		<input type="checkbox"/> Memo Item	Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 320 SANFORD DRIVE PO BOX 414			
City MORGANTON	State NC	ZIP Code 26855	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 175000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 175000.00
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<b>TERMS</b>	Date Incurred M 06 / D 30 / Y 2021	Date Due M M / D D / Y DUE ON DEMAND	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	175000.00
<b>TOTALS</b> 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) **BO HINES FOR CONGRESS** Transaction ID : **SC/10.5758**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>HINES, ROBERT, NICHOLAS, ,</b>		<input type="checkbox"/> Memo Item	Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 320 SANFORD DRIVE PO BOX 414			
City <b>MORGANTON</b>	State <b>NC</b>	ZIP Code <b>26855</b>	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan <b>150000.00</b>	Cumulative Payment To Date <b>0.00</b>	Balance Outstanding at Close of This Period <b>150000.00</b>
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<b>TERMS</b>	Date Incurred M 09 / D 30 / Y 2021	Date Due M M / D D / Y DUE ON DEMAND	Interest Rate (If none, enter 0) <b>0.00</b> % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....▶	<input type="text" value="150000.00"/>
<b>TOTALS</b> This Period (last page in this line only).....▶	<input type="text"/>

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) **BO HINES FOR CONGRESS** Transaction ID : **SC/10.6820**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) HINES, ROBERT, NICHOLAS, ,		<input type="checkbox"/> Memo Item	Election: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 320 SANFORD DRIVE PO BOX 414			
City MORGANTON	State NC	ZIP Code 26855	<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
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<b>TERMS</b>	Date Incurred M 12 / D 31 / Y 2021	Date Due DUE ON DEMAND	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	100000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	525026.00

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