

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
DEVOLDER-SANTOS 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))....	5333.26	46163.22
(b) Total Contribution Refunds (from Line 20(d))	8352.78	8352.78
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	- 3019.52	37810.44
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	0.00	107652.44
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	387.91
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	0.00	107264.53
8. Cash on Hand at Close of Reporting Period (from Line 27).....	25096.40	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	715000.00	

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

DEVOLDER-SANTOS FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	279.95	21479.95
(ii) Unitemized	5053.31	8683.27
(iii) TOTAL of contributions from individuals	5333.26	30163.22
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	16000.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	5333.26	46163.22
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	387.91
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	5333.26	46551.13

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	0.00	107652.44
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	8352.78	8352.78
(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)).....	8352.78	8352.78
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	8352.78	116005.22

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	28115.92
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	5333.26
25. SUBTOTAL (add Line 23 and Line 24).....	33449.18
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	8352.78
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	25096.40

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 12
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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

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

A. Full Name (Last, First, Middle Initial)
Basin, Sacha, , ,

Mailing Address 920 Broadway

City New York State NY Zip Code 10010

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

Name of Employer Unknown Occupation Unknown

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
254.95

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 24 / 2023

Transaction ID : SA11AI.7497

Amount of Each Receipt this Period
254.95

Memo Item
CONTRIBUTION EARMARKED THROUGH WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3350.31

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 24 / 2023

Transaction ID : SA11AI.7497.0

Amount of Each Receipt this Period
254.95

Memo Item
TOTAL EARMARKED THROUGH CONDUIT, LIMIT NOT AFFECTED

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: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1546.78

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 14 / 2023

Transaction ID : SA11AI.7611

Amount of Each Receipt this Period
25.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT, LIMIT NOT AFFECTED

SUBTOTAL of Receipts This Page (optional).....▶	279.95
TOTAL This Period (last page this line number only).....▶	279.95

**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 6 OF 12			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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

Full Name (Last, First, Middle Initial) A. Gross, Cindy, , ,			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2023		
Mailing Address 97 Birch Lane			FEC Identification Number C		
City Woodmere	State NY	Zip Code 11598	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement Refund of Contributions		Category/ Type 010	Transaction ID : SB20A.7724		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Mangi, Robert, , ,			Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2023		
Mailing Address 910 Franklin ave.			FEC Identification Number C		
City Garden city	State NY	Zip Code 11530	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement Refund of Contributions		Category/ Type 010	Transaction ID : SB20A.7723		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Ruiz, Mayra, , ,			Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2023		
Mailing Address 11180 snapper Creek Road			FEC Identification Number C		
City Coral gables	State FL	Zip Code 33156	Amount of Each Disbursement this Period 2900.00		
Purpose of Disbursement Refund of Contributions		Category/ Type 010	Transaction ID : SB20A.7722		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	6300.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 12			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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

Full Name (Last, First, Middle Initial) A. Zmich, Thomas, , ,			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2023		
Mailing Address 38-18 222nd			FEC Identification Number C		
City Bayside	State NY	Zip Code 11361	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement Refund of Contributions		Category/ Type 010	Transaction ID : SB20A.7725		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) 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:					

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

SUBTOTAL of Disbursements This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	6800.00

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **DEVOLDER-SANTOS FOR CONGRESS** Transaction ID : **SC/10.7412**

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

Original Amount of Loan 300000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 300000.00
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TERMS	Date Incurred M 09 / D 10 / Y 2022	Date Due M M / D D / Y 12/31/2022	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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:

SUBTOTALS This Period This Page (optional).....▶	300000.00
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **DEVOLDER-SANTOS FOR CONGRESS** Transaction ID : **SC/10.7409**

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

Original Amount of Loan 100000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 100000.00
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TERMS	Date Incurred M 09 / D 20 / Y 2022	Date Due M M / D D / Y 12/31/2022	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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:

SUBTOTALS This Period This Page (optional).....▶	100000.00
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **DEVOLDER-SANTOS FOR CONGRESS** Transaction ID : **SC/10.7411**

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

Original Amount of Loan 100000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 100000.00
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TERMS	Date Incurred M 10 / D 10 / Y 2022	Date Due M M / D D / Y 12/31/2022	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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:

SUBTOTALS This Period This Page (optional).....▶	100000.00
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **DEVOLDER-SANTOS FOR CONGRESS** Transaction ID : **SC/10.7760**

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

Original Amount of Loan 90000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 90000.00
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TERMS	Date Incurred M 10 / D 17 / Y 2022	Date Due M / D / Y 12/31/2022	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:

SUBTOTALS This Period This Page (optional).....▶	90000.00
TOTALS This Period (last page in this line only).....▶	

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **DEVOLDER-SANTOS FOR CONGRESS** Transaction ID : **SC/10.7410**

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

Original Amount of Loan 125000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 125000.00
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TERMS	Date Incurred M 10 / D 26 / Y 2022	Date Due M / D / Y 12/31/2022	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:

SUBTOTALS This Period This Page (optional).....▶	125000.00
TOTALS This Period (last page in this line only).....▶	715000.00

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