GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

Th	e GPAC Instruction	Guide explains how to complete this form.	1	Filer ID (Ethics Commission Filers) 00084139	2 Total pages filed: 109			
3	COMMITTEE NAME				OFFICE USE ONLY			
	OneMain Holdings	Inc. PAC		ŀ	Date Received			
	-							
Ļ					07/14/2023			
4	COMMITTEE ADDRESS		ITY;	STATE; ZIP CODE				
		601 NW 2nd St.		F	Date Hand-delivered or Date Postmarked			
	Change of Address							
		Evansville, IN 47708			Receipt # Amount			
				ſ	Date Processed			
					Date Imaged			
5	CAMPAIGN TREASURER	MS / MRS / MR FIRST		Ν	И			
	NAME	Mr. Ryan						
		NICKNAME LAST		S	SUFFIX			
		Black						
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);	;	APT / SUITE #; CITY;	STATE; ZIP CODE			
	TREASURER	601 NW 2nd St.		,,	,			
	STREET ADDRESS							
	(Residence or Business)							
		Evansville, IN 47708						
7	CAMPAIGN TREASURER	STREET OR PO BOX;		APT / SUITE #; CITY;	STATE; ZIP CODE			
	MAILING	601 NW 2nd St.						
	ADDRESS							
	Change of Address	Evansville, IN 47708						
			EV	TENSION				
ð	CAMPAIGN TREASURER		ΕX	TENSION				
	PHONE	(812) 492-2186						
-	DEDODT							
9	REPORT TYPE	January 15 3	30th	day before election	Dissolution (Attach PAC-DR)			
		8 🗖 8	3th d	lay before election	10th day after campaign treasurer			
		X July 15			termination			
			Runc	וונ				
10	PERIOD	Month Day Year		Month Day	Year			
	COVERED	01/01/2023 T	THR	OUGH 06/30/2023				
11	ELECTION	ELECTION DATE		ELECTION TYPE				
		Month Day Year	Prin	nary Runoff	Other			
			Gen	neral Special				
			201					
		GO	тс	PAGE 2				
For	ms provided by Te	xas Ethics Commission www.e	ethi	cs.state.tx.us	Version V3.5.1.a18ea2ca			

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME 13 Filer I			13 Filer ID	(Ethics Commission Filers)			
OneMain Holdings Inc.	PAC		0008413	9			
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported					
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed					
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported					
		B. Opposed					
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	2,236.04			
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	31,889.81			
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00			
	4. TOTAL POLITICA	L EXPENDITURES	\$	689.33			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	35,061.71			
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF 1 REPORTING PERIOD	THE \$	0.00			
16 AFFIDAVIT	•		I				
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.					
		Mr. Rya Signature of Cau	an Black				
		Signature of Cal	npaign meds				
AFFIX NOTARY	AFFIX NOTARY STAMP / SEAL ABOVE						
		, tł	nis the	day			
of	_, 20, to certify v	which, witness my hand and seal of office.					
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of of	ficer administering oath			
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V3.5.1.a18ea2ca			

FORM GPAC
COVER SHEET PG 3
3 of 109

				3 01 109
17 COMMITTE	(Ethics Com	mission Filers)		
OneMain I	г			
19 SCHEDULE NAME OF S	SUBTO	OTAL AMOUNT		
1. X	\$	31,389.81		
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	DR	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7. X	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	2	\$	500.00
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$	
9.	SCHEDULE E: LOANS		\$	
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	689.33
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

SUBTOTALS - GPAC

The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/92 Rpt: 4/109	
2 FILER NAME			3	Filer ID (Ethics Commission	Filers)
	oldings Inc. PAC			00084139	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
01/13/2023	Bailer, Scott				\$38.46
	6 Contributor address; City; State; Zip Code		1		
	Wilmington, DE 19805				
	upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
VP/SMD Loa	an Servicing	OneMain Holdings Inc.			
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
01/27/2023	Bailer, Scott				\$38.46
	Contributor address; City; State; Zip Code		1		
	Wilmington, DE 19805				
-	upation / Job title (See Instructions)	Employer (See Instructions	5)		
VP/SMD Loa	an Servicing	OneMain Holdings Inc.			
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
02/10/2023	Bailer, Scott				\$38.46
	Contributor address; City; State; Zip Code		1		
	Wilmington, DE 19805				
-	upation / Job title (See Instructions)	Employer (See Instructions	5)		
VP/SMD Loa	an Servicing	OneMain Holdings Inc.			
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
02/24/2023	Bailer, Scott				\$38.46
	Contributor address; City; State; Zip Code		1		
	Wilmington, DE 19805	1			
-	upation / Job title (See Instructions)	Employer (See Instructions	5)		
VP/SMD Loa	an Servicing	OneMain Holdings Inc.			
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
03/10/2023	Bailer, Scott				\$38.46
	Contributor address; City; State; Zip Code		1		
	Wilmington, DE 19805				
-	upation / Job title (See Instructions)	Employer (See Instructions	5)		
VP/SMD Loa	an Servicing	OneMain Holdings Inc.			

The Instruction Guide explains how to complete this form. 1 Total pages SubcleA 1: Sch: 292 Rpt: 5/109 2 FLER NAME OneMain Holdings Inc. PAC 3 File III. Commission Filers) 00004139 4 Date 03/24/2020 5 Full name of contributor cate-disase PAC (IDS Willington, DE 19805 7 Amount of Contribution (\$) Bailer, Scott \$38.46 7 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 7 Amount of Contribution (\$) 04007/2023 Full name of contributor cate-disase PAC (IDS Willington, DE 19805 Commisure address; City, State; Zip Code Amount of Contribution (\$) \$38.46 04007/2023 Full name of contributor cate-disase PAC (IDS Willington, DE 19805 OneMain Holdings Inc. Amount of Contribution (\$) S38.46 04/212/2024 Full name of contributor cate-disase PAC (IDS Willington, DE 19805 OneMain Holdings Inc. S38.46 04/212/2025 Full name of contributor cate-disase PAC (IDS Willington, DE 19805 Amount of Contribution (\$) S38.46 Principal occupation / Job title (See Instructions) VP/SMD Loan Servicing OneMain Holdings Inc. S38.46 Principal occupation / Job title (See Instruc	The Instruction Guide explains how to complete this form. Sch: 2 2 FILER NAME OneMain Holdings Inc. PAC 3 4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 03/24/2023 6 Contributor address; City; State; Zip Code 7 Amour 6 Contributor address; City; State; Zip Code 9 Employer (See Instructions) 7 VP/SMD Loan Servicing Out-of-state PAC (ID#:) Amour Amour 04/07/2023 Full name of contributor out-of-state PAC (ID#:) Amour 04/07/2023 Full name of contributor out-of-state PAC (ID#:) Amour VP/SMD Loan Servicing Out-of-state PAC (ID#:) Amour 04/07/2023 Bailer, Scott Contributor address; City; State; Zip Code Amour VP/SMD Loan Servicing Out-of-state PAC (ID#:) Amour VP/SMD Loan Servicing Contributor address; City; State; Zip Code Amour VIImington, DE 19805 Employer (See Instructions) OneMain Holdings Inc. VP/SMD Loan Servicing Out-of-state PAC (ID#:) Amour Date Full name of contributor out-of-state PAC (ID#:)	2/92 Rpt: 5/109 D (Ethics Commission Filers) 1139 ht of Contribution (\$) \$38.46 ht of Contribution (\$) \$38.46
OneMain Holdings Inc. PAC 00084139 Olde 9 Full name of contributor out of state PAC (D#	OneMain Holdings Inc. PAC 00084 4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amour 03/24/2023 6 Contributor address; City; State; Zip Code 7 Amour 7 6 Contributor address; City; State; Zip Code 9 Employer (See Instructions) 7 Amour 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 7 Amour 04/07/2023 Full name of contributor out-of-state PAC (ID#:) Amour Amour 04/07/2023 Full name of contributor out-of-state PAC (ID#:) Amour VP/SMD Loan Servicing Contributor address; City; State; Zip Code Amour Wilmington, DE 19805 Employer (See Instructions) VP/SMD Loan Servicing Principal occupation / Job title (See Instructions) Employer (See Instructions) Amour VP/SMD Loan Servicing OneMain Holdings Inc. Amour 04/21/2023 Full name of contributor out-of-state PAC (ID#:) Amour 04/21/2023 Full name of contributor out-of-state PAC (ID#:) Amour	4139 ht of Contribution (\$) \$38.46 ht of Contribution (\$) \$38.46
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03/24/2023 Bailer, Scott \$\$38.46 6 Contributor address; City; State; Zip Code State; Zip Code 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) VP/SMD Loan Servicing Pull name of contributor ou: of-state PAC (Dor;	03/24/2023 Bailer, Scott 6 Contributor address; City; State; Zip Code Wilmington, DE 19805 9 8 Principal occupation / Job title (See Instructions) VP/SMD Loan Servicing 9 Date Full name of contributor out-of-state PAC (ID#:) 04/07/2023 Bailer, Scott Amour 04/07/2023 Contributor address; City; State; Zip Code Employer (See Instructions) OneMain Holdings Inc. Principal occupation / Job title (See Instructions) VP/SMD Loan Servicing Out-of-state PAC (ID#:) Amour 04/07/2023 Bailer, Scott OneMain Holdings Inc. Mour Date Full name of contributor out-of-state PAC (ID#:) Amour Date Full name of contributor Out-of-state PAC (ID#:) Amour Date Full name of contributor Out-of-state PAC (ID#:) Amour 04/21/2023 Bailer, Scott Out-of-state PAC (ID#:) Amour	\$38.46
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vilinington, DE 19805 vilinington, DE 19805 Principal occupation / Job title (See instructions) VP/SMD Loan Servicing out-of-state PAC (De	Wilmington, DE 19805 9 Employer (See Instructions) OneMain Holdings Inc. Pate Full name of contributor out-of-state PAC (ID#:) O4/07/2023 Bailer, Scott Amour Wilmington, DE 19805 VP/SMD Loan Servicing Amour Date Full name of contributor out-of-state PAC (ID#:) Amour 04/07/2023 Bailer, Scott Contributor address; City; State; Zip Code Full name of contributor OneMain Holdings Inc. Principal occupation / Job title (See Instructions) VP/SMD Loan Servicing Employer (See Instructions) OneMain Holdings Inc. Date Full name of contributor out-of-state PAC (ID#:) Amour Date Full name of contributor out-of-state PAC (ID#:) Amour 04/21/2023 Bailer, Scott Amour	\$38.46
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Wilmington, DE 19805 Employer (See Instructions) OneMain Holdings Inc. Date Full name of contributor of contributor of contributors; City; State; Zip Code Amount of Contribution (\$) S38.46 VP/SMD Loan Servicing Milmington, DE 19805 Amount of Contribution (\$) Bailer, Scott S38.46 VP/SMD Loan Servicing Employer (See Instructions) OneMain Holdings Inc. Amount of Contribution (\$) S38.46 Principal occupation / Job title (See Instructions) VP/SMD Loan Servicing Employer (See Instructions) OneMain Holdings Inc. Amount of Contribution (\$) S38.46 Date Full name of contributor of out-of-state PAC (Der) Amount of Contribution (\$) S38.46 S38.46 O5/05/2023 Full name of contributor of out-of-state PAC (Der) Amount of Contribution (\$) S38.46 S38.46 Principal occupation / Job title (See Instructions) VP/SMD Loan Servicing Employer (See Instructions) OneMain Holdings Inc. Amount of Contribution (\$) S38.46 Principal occupation / Job title (See Instructions) Employer (See Instructions) OneMain Holdings Inc. Amount of Contribution (\$) S38.46 O5/19/2023 Full name of contributor of out-of-state PAC (Der) Amount of Contribution (\$) S38.46 S38.46 O5/19/2023 Full name of contributor on out-of-state PAC (Der) Amount of Contribution (\$) S38.46 S38.46	Wilmington, DE 19805 Principal occupation / Job title (See Instructions) VP/SMD Loan Servicing Date Full name of contributor 04/21/2023 Bailer, Scott	1t of Contribution (\$)
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	The Instruc	ction Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 3/92 Rpt: 6/109	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	OneMain Ho	ldings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC (I	(ID#:)	7	Amount of Contribution (\$)	
	06/02/2023	Bailer, Scott				\$38.46
		6 Contributor address; City; State; Zip Code		1		
		Wilmington, DE 19805				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	VP/SMD Loa	In Servicing	OneMain Holdings Inc.			
	Date		(ID#:)	Τ	Amount of Contribution (\$)	
	06/16/2023	Bailer, Scott				\$38.46
		Contributor address; City; State; Zip Code]		
		Wilmington DE 10905				
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	Date 06/30/2023		(ID#:)		Amount of Contribution (\$)	\$38.46
	00/30/2023			-		4 30.40
		Contributor address; City; State; Zip Code				
		Wilmington, DE 19805				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	VP/SMD Loa	an Servicing	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (I	(ID#:)	Γ	Amount of Contribution (\$)	
	01/13/2023	Barrett, Dan				\$19.23
		Contributor address; City; State; Zip Code		1		
		Charlottesville, VA 22901				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
		ection Strategy	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (I	(ID#:)		Amount of Contribution (\$)	
	01/27/2023	Barrett, Dan				\$19.23
		Contributor address; City; State; Zip Code				
		Charlottesville, VA 22901				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
		ection Strategy	OneMain Holdings Inc.	5,		
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2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	OneMain Ho	ldings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	:)	7	Amount of Contribution (\$)	
	02/10/2023	Barrett, Dan				\$19.23
		6 Contributor address; City; State; Zip Code				
Ļ	Dringingloggy	Charlottesville, VA 22901				
8		pation / Job title (See Instructions) ection Strategy	9 Employer (See Instructions OneMain Holdings Inc.	5)		
	Date	—	:)		Amount of Contribution (\$)	#10.00
	02/24/2023					\$19.23
		Contributor address; City; State; Zip Code				
		Charlottesville, VA 22901				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
		ection Strategy	OneMain Holdings Inc.	,		
╞	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Γ	Amount of Contribution (\$)	
	03/10/2023	Barrett, Dan	·			\$19.23
		Contributor address; City; State; Zip Code				
		Charlottesville, VA 22901				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/MD Colle	ection Strategy	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	03/24/2023	Barrett, Dan				\$19.23
		Contributor address; City; State; Zip Code				
		Charlottesville, VA 22901				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> :)		
		ection Strategy	OneMain Holdings Inc.	<i>''</i>		
╞	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	04/07/2023	Barrett, Dan	·/		Allount of Contribution (4)	\$19.23
		Contributor address; City; State; Zip Code				•
		Charlottesville, VA 22901				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/MD Colle	ection Strategy	OneMain Holdings Inc.			

	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/92 Rpt: 8/109	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	OneMain Ho	ldings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	04/21/2023	Barrett, Dan				\$19.23
		6 Contributor address; City; State; Zip Code				
		Charlottesville, VA 22901				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	VP/MD Colle	ection Strategy	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	05/05/2023	Barrett, Dan				\$19.23
		Contributor address; City; State; Zip Code				
		Charlottesville, VA 22901				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/MD Colle	ection Strategy	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	05/19/2023	Barrett, Dan				\$19.23
		Contributor address; City; State; Zip Code				
		Charlottesville, VA 22901		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
		ection Strategy	OneMain Holdings Inc.	-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	÷10.00
	06/02/2023	Barrett, Dan				\$19.23
		Contributor address; City; State; Zip Code				
		Charlottesville, VA 22901				
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		ection Strategy	OneMain Holdings Inc.	<i>י</i> י		
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	Date 06/16/2023	Full name of contributor out-of-state PAC (ID#: Barrett_Dan)		Amount of Contribution (\$)	\$19.23
	00/10/2023	Barrett, Dan				ΦΙ9.20
		Contributor address; City; State; Zip Code				
		Charlottesville, VA 22901				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	[;)		
		ection Strategy	OneMain Holdings Inc.	,		
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2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	OneMain Ho	oldings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	06/30/2023	Barrett, Dan				\$19.23
		6 Contributor address; City; State; Zip Code				
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	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	400 40
	01/13/2023	Benson, Scott				\$38.46
		Contributor address; City; State; Zip Code				
		Baltimore, MD 21202				
-	Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
		liance Officer	OneMain Holdings Inc.			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	01/27/2023	Benson, Scott				\$38.46
		Contributor address; City; State; Zip Code				
		Baltimore, MD 21202	1			
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Chief Compl	liance Officer	OneMain Holdings Inc.	_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/10/2023	Benson, Scott				\$38.46
		Contributor address; City; State; Zip Code				
		Baltimore, MD 21202				
-	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
		liance Officer	OneMain Holdings Inc.	,		
╞	Date	Full name of contributor out-of-state PAC (ID#:	_	<u> </u>	Amount of Contribution (\$)	
	02/24/2023	Benson, Scott	/		Allount of Contribution (4)	\$38.46
	•	Contributor address; City; State; Zip Code				+ - -
		Baltimore, MD 21202				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Chief Compl	liance Officer	OneMain Holdings Inc.			
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2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	OneMain Ho	Idings Inc. PAC			00084139	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	03/10/2023	Benson, Scott				\$38.46
		6 Contributor address; City; State; Zip Code				
		Baltimore, MD 21202				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> יו		
ľ		iance Officer	OneMain Holdings Inc.	<i>י</i> י		
╞	Date				Amount of Contribution (\$)	
	Dale 03/24/2023	Full name of contributor out-of-state PAC (ID#: Benson, Scott)		Amount of Contribution (\$)	\$38.46
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		Contributor address; City; State; Zip Code				
		Baltimore, MD 21202				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	. ;)		
	Chief Compl	iance Officer	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	04/07/2023	Benson, Scott				\$38.46
		Contributor address; City; State; Zip Code				
		Baltimore, MD 21202	1			
	•	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Chief Compl	iance Officer	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	04/21/2023	Benson, Scott				\$38.46
		Contributor address; City; State; Zip Code				
		Baltimore, MD 21202				
-	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	•	iance Officer	OneMain Holdings Inc.	,		
╞	Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
	05/05/2023	Benson, Scott			Allount of Contribution (4)	\$38.46
	•••••	Contributor address; City; State; Zip Code				+ - -
		Baltimore, MD 21202				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Chief Compl	iance Officer	OneMain Holdings Inc.			
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2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		ldings Inc. PAC			00084139	,
4	Date	5 Full name of contributor out-of-state PAC (ID)	t:)	7	Amount of Contribution (\$)	
	05/19/2023	Benson, Scott				\$38.46
		6 Contributor address; City; State; Zip Code		1		
		Baltimore, MD 21202				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Chief Compl	iance Officer	OneMain Holdings Inc.			
	Date	Full name of contributor 🔲 out-of-state PAC (ID;	t:)		Amount of Contribution (\$)	
	06/02/2023	Benson, Scott				\$38.46
		Contributor address; City; State; Zip Code		1		
		Baltimore, MD 21202				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Chief Compl	iance Officer	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID;	t:)		Amount of Contribution (\$)	
	06/16/2023	Benson, Scott				\$38.46
		Contributor address; City; State; Zip Code		1		
		Baltimore, MD 21202				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Chief Compl	iance Officer	OneMain Holdings Inc.			
	Date	Full name of contributor 🛛 out-of-state PAC (ID;	t:)	Γ	Amount of Contribution (\$)	
	06/30/2023	Benson, Scott				\$38.46
		Contributor address; City; State; Zip Code		1		
		Baltimore, MD 21202				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Chief Compl	iance Officer	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID;	±)	Γ	Amount of Contribution (\$)	
	03/07/2023	Black, Ryan				\$1,000.00
		Contributor address; City; State; Zip Code		1		
		Mills River, NC 28759		1		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
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	The Instru	ction Guide explains how to complete thi	s form.	1	Total pages Schedule A1: Sch: 9/92 Rpt: 12/109	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	OneMain Ho	oldings Inc. PAC			00084139	-
4	Date	5 Full name of contributor out-of-state PAC (II	D#:)	7	Amount of Contribution (\$)	
	06/30/2023	Borchers, Brad				\$5,000.00
		6 Contributor address; City; State; Zip Code		1		
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		Cook County, IL 60525				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	EVP Branch	Operations	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (II	D#:)	Γ	Amount of Contribution (\$)	
	01/13/2023	Boys, Maggie				\$38.46
	1	Contributor address; City; State; Zip Code		1		
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		Baltimore, MD 21202				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Assoc Dir Co	ommunications	OneMain Holdings Inc.			
Γ	Date	Full name of contributor out-of-state PAC (II	D#:)	Γ	Amount of Contribution (\$)	
	01/27/2023	Boys, Maggie				\$38.46
	1	Contributor address; City; State; Zip Code		1		
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		Baltimore, MD 21202				
	-	ipation / Job title (See Instructions)	Employer (See Instructions	3)		
	Assoc Dir Co	ommunications	OneMain Holdings Inc.			
Γ	Date	Full name of contributor 🔲 out-of-state PAC (II	D#:)	Γ	Amount of Contribution (\$)	
	02/10/2023	Boys, Maggie				\$38.46
	ļ	Contributor address; City; State; Zip Code	1	1		
	ļ					
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		Baltimore, MD 21202		Ĺ		
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
		ommunications	OneMain Holdings Inc.	_		
	Date	Full name of contributor out-of-state PAC (II)#:)		Amount of Contribution (\$)	
	02/24/2023	Boys, Maggie				\$38.46
	ļ	Contributor address; City; State; Zip Code]		
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		Baltimore, MD 21202	- 1			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Assoc Dir Co	ommunications	OneMain Holdings Inc.			

	The Instru	ction Guide explains how to complete this	1	Total pages Schedule A1: Sch: 10/92 Rpt: 13/109		
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	OneMain Ho	Idings Inc. PAC			00084139	,
4	Date	5 Full name of contributor out-of-state PAC (ID)	#:)	7	Amount of Contribution (\$)	
	03/10/2023	Boys, Maggie				\$38.46
		6 Contributor address; City; State; Zip Code		1		
L		Baltimore, MD 21202				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Assoc Dir Co	ommunications	OneMain Holdings Inc.			
	Date Full name of contributor out-of-state PAC (ID#:)			Γ	Amount of Contribution (\$)	
	03/24/2023 Boys, Maggie					\$38.46
		Contributor address; City; State; Zip Code		1		
		Baltimore, MD 21202		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
			OneMain Holdings Inc.			
	Date	—	#:)		Amount of Contribution (\$)	
	04/07/2023	Boys, Maggie				\$38.46
		Contributor address; City; State; Zip Code				
		Baltimore, MD 21202				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> -)		
		ommunications	OneMain Holdings Inc.	<i>)</i>		
╞				Г	Amount of Contribution (\$)	
	Date 04/21/2023	Full name of contributor out-of-state PAC (ID; Boys, Maggie	#:)		Amount of Contribution (\$)	\$38.46
	04/21/2025					Φ 30.40
		Contributor address; City; State; Zip Code				
		Baltimore, MD 21202				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
		ommunications	OneMain Holdings Inc.	,		
╞	Date	Full name of contributor out-of-state PAC (ID;		Г	Amount of Contribution (\$)	
	05/05/2023	Boys, Maggie	m		,	\$38.46
	-	Contributor address; City; State; Zip Code				-
		Baltimore, MD 21202				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Assoc Dir Co	ommunications	OneMain Holdings Inc.			

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	The Instru	ction Guide explains how to complete this t	1	Total pages Schedule A1: Sch: 11/92 Rpt: 14/109		
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		Idings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	05/19/2023	Boys, Maggie				\$38.46
		6 Contributor address; City; State; Zip Code				
		Baltimore, MD 21202				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Assoc Dir Co	ommunications	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/02/2023	Boys, Maggie				\$38.46
		Contributor address; City; State; Zip Code				
		Baltimore, MD 21202				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Assoc Dir Co	ommunications	OneMain Holdings Inc.			
Γ	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	06/16/2023	Boys, Maggie				\$38.46
		Contributor address; City; State; Zip Code				
		Baltimore, MD 21202				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Assoc Dir Co	ommunications	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	06/30/2023	Boys, Maggie				\$38.46
		Contributor address; City; State; Zip Code				
		Baltimore, MD 21202				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Assoc Dir Co	ommunications	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	01/13/2023	Brennan, Michael				\$38.46
		Contributor address; City; State; Zip Code				
		Baltimore, MD 21202				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	 5)		
	VP/SMD Fin	Systems Data & Info Deliver	OneMain Holdings Inc.			
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	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 12/92 Rpt: 15/109		
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
		oldings Inc. PAC			00084139	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	01/27/2023	Brennan, Michael	!			\$38.46
	ļ	6 Contributor address; City; State; Zip Code	,			
	ļ	1	!			
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Ļ		Baltimore, MD 21202		Ĺ		
8		upation / Job title (See Instructions)	9 Employer (See Instructions)	;)		
L		n Systems Data & Info Deliver	OneMain Holdings Inc.	—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/10/2023	Brennan, Michael				\$38.46
	ļ	Contributor address; City; State; Zip Code	!			
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	ļ	Deliverant MD 21202	1			
⊢	Drinsipal agai	Baltimore, MD 21202				
		upation / Job title (See Instructions)	Employer (See Instructions OneMain Holdings Inc.	5)		
L		n Systems Data & Info Deliver		—	(A)	
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	÷20.40
	02/24/2023	Brennan, Michael	!			\$38.46
	ļ	Contributor address; City; State; Zip Code	1			
	ļ	1	!			
	ļ	Baltimore, MD 21202	1			
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
		n Systems Data & Info Deliver	OneMain Holdings Inc.	9		
╞		-	<u> </u>	—	Amount of Contribution (\$)	
	Date 03/10/2023	Full name of contributor out-of-state PAC (ID#: Brennan, Michael			Amount of Contribution (\$)	\$38.46
	0311012020					Ψυυ.⊣υ
	ļ	Contributor address; City; State; Zip Code	!			
	1	1	1			
	1	Baltimore, MD 21202	1			
⊢	Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	上 5)		
		Systems Data & Info Deliver	OneMain Holdings Inc.			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	_	Amount of Contribution (\$)	
	03/24/2023	Brennan, Michael	, İ		,	\$38.46
		Contributor address; City; State; Zip Code				• -
	1		1			
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	1	Baltimore, MD 21202	1			
┢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> چ)		
		Systems Data & Info Deliver	OneMain Holdings Inc.			
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	The Instruc	ction Guide explains how to complete thi	is form.	1	Total pages Schedule A1: Sch: 13/92 Rpt: 16/109	
2	FILER NAME			3	Filer ID (Ethics Commission	ו Filers)
	OneMain Ho	oldings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC (I	ID#:)	7	Amount of Contribution (\$)	
	04/07/2023	Brennan, Michael				\$38.46
		6 Contributor address; City; State; Zip Code		1		
		Baltimore, MD 21202				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	VP/SMD Fin	Systems Data & Info Deliver	OneMain Holdings Inc.			
	Date	Full name of contributor 🛛 out-of-state PAC (I	ıD#:)	Γ	Amount of Contribution (\$)	
	04/21/2023	Brennan, Michael]		\$38.46
		Contributor address; City; State; Zip Code]		
		Baltimore, MD 21202				
	Dringing occu	pation / Job title (See Instructions)	Employer (See Instructions	$\sum_{i=1}^{n}$		
		Systems Data & Info Deliver	OneMain Holdings Inc.	5)		
╞		·		Τ	Amount of Contribution (¢)	
	Date 05/05/2023	Full name of contributor Dout-of-state PAC (I Brennan, Michael	D#:)		Amount of Contribution (\$)	\$38.46
	03/03/2023			-		Ф ЗО.40
		Contributor address; City; State; Zip Code				
		Baltimore, MD 21202				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/SMD Fin	Systems Data & Info Deliver	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (I	ID#:)	Γ	Amount of Contribution (\$)	
	05/19/2023	Brennan, Michael				\$38.46
		Contributor address; City; State; Zip Code		1		
	D :	Baltimore, MD 21202		Ĺ		
		pation / Job title (See Instructions) Systems Data & Info Deliver	Employer (See Instructions OneMain Holdings Inc.	5)		
		- -		—		
	Date	Full name of contributor out-of-state PAC (I	D#:)		Amount of Contribution (\$)	00 16
	06/02/2023	Brennan, Michael				\$38.46
		Contributor address; City; State; Zip Code				
		Baltimore, MD 21202				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	⊥		
		Systems Data & Info Deliver	OneMain Holdings Inc.	-,		
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	The Instruc	ction Guide explains how to complete this fo	1	Total pages Schedule A1: Sch: 14/92 Rpt: 17/109		
$\frac{1}{2}$	FILER NAME			3	Filer ID (Ethics Commission	Filers)
[ldings Inc. PAC		ľ	00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	06/16/2023	Brennan, Michael				\$38.46
		6 Contributor address; City; State; Zip Code				
Ļ		Baltimore, MD 21202		Ĺ		
8			9 Employer (See Instructions	5)		
L		Systems Data & Info Deliver	OneMain Holdings Inc.	_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/30/2023	Brennan, Michael				\$38.46
		Contributor address; City; State; Zip Code				
		Baltimore, MD 21202				
┝	Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> וו		
		Systems Data & Info Deliver	OneMain Holdings Inc.	<i>''</i>		
╞	Date	Full name of contributor Out-of-state PAC (ID#:		<u> </u>	Amount of Contribution (\$)	
	01/13/2023	Burton, Zach	/			\$38.46
	01,10,2020	Contributor address; City; State; Zip Code				400 .10
		Contributor address, Gity, State, Zip Code				
		Evansville, IN 47708				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Operations N	Лgr	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	01/27/2023	Burton, Zach				\$38.46
		Contributor address; City; State; Zip Code				
		Evansville, IN 47708		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Operations N		OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	* 20.40
	02/10/2023	Burton, Zach				\$38.46
		Contributor address; City; State; Zip Code				
		Evansville, IN 47708				
┡	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> :)		
	Operations N		OneMain Holdings Inc.	,		
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	The Instru	ction Guide explains how to complete this fo	1	Total pages Schedule A1: Sch: 15/92 Rpt: 18/109		
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	OneMain Hc	oldings Inc. PAC	!		00084139	ļ
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	02/24/2023	Burton, Zach				\$38.46
	I	6 Contributor address; City; State; Zip Code		1		
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	I		1			
		Evansville, IN 47708				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Operations N	Иgr	OneMain Holdings Inc.			ļ
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	03/10/2023	Burton, Zach				\$38.46
	I	Contributor address; City; State; Zip Code				
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	I	Evansville, IN 47708	1			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Operations N	Иgr	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	04/07/2023	Burton, Zach	,			\$38.46
	I	Contributor address; City; State; Zip Code	,ļ	ł		
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	I	Evansville, IN 47708	1			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Operations N	٧gr	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	04/21/2023	Burton, Zach				\$38.46
	I	Contributor address; City; State; Zip Code		1		
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	I		!			
	I	Evansville, IN 47708	1			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>.</u> 5)		
	Operations N	Иgr	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	05/05/2023	Burton, Zach				\$38.46
	I	Contributor address; City; State; Zip Code		1		
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	I	Evansville, IN 47708	!			
┢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Operations N	Mgr	OneMain Holdings Inc.			
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	The Instru	ction Guide explains how to complete this	; form.	1	Total pages Schedule A1: Sch: 16/92 Rpt: 19/109	
2	FILER NAME			3	Filer ID (Ethics Commission	ו Filers)
		oldings Inc. PAC			00084139	·
4	Date	5 Full name of contributor out-of-state PAC (ID:	#:)	7	Amount of Contribution (\$)	
	05/19/2023	Burton, Zach	ļ			\$38.46
	I	6 Contributor address; City; State; Zip Code		1		
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		Evansville, IN 47708				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	3)		
	Operations N	Лgr	OneMain Holdings Inc.			
	Date	Full name of contributor Dut-of-state PAC (ID))#:)		Amount of Contribution (\$)	
	06/02/2023	Burton, Zach				\$38.46
	I	Contributor address; City; State; Zip Code		1		I
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		Evansville, IN 47708				
		upation / Job title (See Instructions)	Employer (See Instructions	3)		
	Operations N	Лgr	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID;	#:)	Γ	Amount of Contribution (\$)	
	06/16/2023	Burton, Zach				\$38.46
	I	Contributor address; City; State; Zip Code	,	1		
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			1			
		Evansville, IN 47708				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Operations N	Лgr	OneMain Holdings Inc.	_		
	Date	Full name of contributor out-of-state PAC (ID;	#:)	Γ	Amount of Contribution (\$)	
	06/30/2023	Burton, Zach				\$38.46
	I	Contributor address; City; State; Zip Code		1		
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			1			
		Evansville, IN 47708		Ĺ		
	•	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Operations N		OneMain Holdings Inc.	—		
	Date	Full name of contributor out-of-state PAC (ID;	#:)		Amount of Contribution (\$)	_
	01/13/2023	Buttermore, Bob]		\$38.46
		Contributor address; City; State; Zip Code]		
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			1			
		Fort Mill, SC 29715		Ļ		
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/MD Prod	uct Suppt	OneMain Holdings Inc.			

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	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 17/92 Rpt: 20/109	
2	FILER NAME			3	Filer ID (Ethics Commission	ו Filers)
	OneMain Ho	oldings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	01/27/2023	Buttermore, Bob				\$38.46
	I	6 Contributor address; City; State; Zip Code		1		
	I	1				
	I	1				
		Fort Mill, SC 29715				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	3)		
	VP/MD Prod	uct Suppt	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	02/10/2023	Buttermore, Bob				\$38.46
	1	Contributor address; City; State; Zip Code		1		
	I	1				
	l	1				
		Fort Mill, SC 29715				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/MD Prod	uct Suppt	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	02/24/2023	Buttermore, Bob				\$38.46
	I	Contributor address; City; State; Zip Code		1		
	I	1				
	I	1				
		Fort Mill, SC 29715				
	-	upation / Job title (See Instructions)	Employer (See Instructions	3)		
	VP/MD Prod	uct Suppt	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	03/10/2023	Buttermore, Bob				\$38.46
	1	Contributor address; City; State; Zip Code		1		
	I	1				
	I	1				
L		Fort Mill, SC 29715				
	-	upation / Job title (See Instructions)	Employer (See Instructions	3)		
	VP/MD Prod	uct Suppt	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	03/24/2023	Buttermore, Bob				\$38.46
	I	Contributor address; City; State; Zip Code		1		
	I	1				
	l	1				
		Fort Mill, SC 29715				
Γ		upation / Job title (See Instructions)	Employer (See Instructions	3)		<u> </u>
	VP/MD Prod	uct Suppt	OneMain Holdings Inc.			
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	The Instru	ction Guide explains how to complete	this fo	orm.	1	Total pages Schedule A1: Sch: 18/92 Rpt: 21/109	
2	FILER NAME				3	Filer ID (Ethics Commission	ı Filers)
		oldings Inc. PAC				00084139	
4	Date	5 Full name of contributor Out-of-state PA	4C (ID#:)	7	Amount of Contribution (\$)	
	04/07/2023	04/07/2023 Buttermore, Bob					\$38.46
		6 Contributor address; City; State; Zip Code					
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0	Dringingl occu	Fort Mill, SC 29715	,	Employer (Soo Instructions	$\sum_{i=1}^{n}$		
8	VP/MD Prod	ipation / Job title (See Instructions) luct Suppt	ļ	 9 Employer (See Instructions) OneMain Holdings Inc. 	9 D		
⊨					—		
	Date		4C (ID#:)		Amount of Contribution (\$)	* 20.40
	04/21/2023						\$38.46
		Contributor address; City; State; Zip Code					
		1					
	Fort Mill, SC 29715						
	Principal occu	pation / Job title (See Instructions)	—	Employer (See Instructions	<u>ال</u>		
	VP/MD Prod		ļ	OneMain Holdings Inc.	9		
-					—	Amount of Contribution (\$)	
	Date 05/05/2023		AC (ID#:)		Amount of Contribution (\$)	\$38.46
	05/05/2025						Ф ЗО.40
		Contributor address; City; State; Zip Code					
		1					
		Fort Mill, SC 29715					
	Principal occu	I pation / Job title (See Instructions)		Employer (See Instructions	上 5)		
	VP/MD Prod		ļ	OneMain Holdings Inc.			
⊨	Date	Full name of contributor Out-of-state PA)		Amount of Contribution (\$)	
	05/19/2023	Buttermore, Bob				,	\$38.46
	•	· · · · · · · · · · · · · · · · · · ·					
		1					
		Fort Mill, SC 29715					
	Principal occu	ipation / Job title (See Instructions)		Employer (See Instructions	;)		
	VP/MD Prod	uct Suppt		OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PA	AC (ID#:_)	Γ	Amount of Contribution (\$)	
	06/02/2023	Buttermore, Bob					\$38.46
		Contributor address; City; State; Zip Code					
		1					
		1					
		Fort Mill, SC 29715					
		ipation / Job title (See Instructions)		Employer (See Instructions	;)		
	VP/MD Prod	uct Suppt		OneMain Holdings Inc.			
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The Instru	ction Guide explains how to complete thi	is form.	1 Total pages Schedule A1: Sch: 19/92 Rpt: 22/109	
2 FILER NAME			3 Filer ID (Ethics Commission	n Filers)
OneMain Ho	Idings Inc. PAC		00084139	,
4 Date	5 Full name of contributor out-of-state PAC (II	7 Amount of Contribution (\$)		
06/16/2023	Buttermore, Bob		\$38.46	
	6 Contributor address; City; State; Zip Code			
	Fort Mill, SC 29715			
	pation / Job title (See Instructions)	9 Employer (See Instructions	3)	
VP/MD Prod	uct Suppt	OneMain Holdings Inc.		
Date	Full name of contributor out-of-state PAC (II	D#:)	Amount of Contribution (\$)	
06/30/2023				\$38.46
	Contributor address; City; State; Zip Code		•	
	Fort Mill, SC 29715			
	pation / Job title (See Instructions)	Employer (See Instructions	6)	
VP/MD Prod	uct Suppt	OneMain Holdings Inc.		
Date	Full name of contributor out-of-state PAC (I	D#:)	Amount of Contribution (\$)	
01/13/2023	Chadha, Rajive			\$192.31
	Contributor address; City; State; Zip Code			
	New York, NY 10017			
	pation / Job title (See Instructions)	Employer (See Instructions	3)	
EVP Chief C	operating Officer	OneMain Holdings Inc.		
Date	Full name of contributor out-of-state PAC (II	D#:)	Amount of Contribution (\$)	
01/27/2023	Chadha, Rajive			\$192.31
	Contributor address; City; State; Zip Code			
	New York, NY 10017			
	pation / Job title (See Instructions)	Employer (See Instructions	5)	
EVP Chief C	operating Officer	OneMain Holdings Inc.		
Date	Full name of contributor out-of-state PAC (II	D#:)	Amount of Contribution (\$)	
02/10/2023	Chadha, Rajive			\$192.31
	Contributor address; City; State; Zip Code			
	New York, NY 10017			
	pation / Job title (See Instructions)	Employer (See Instructions	6)	
EVP Chief C	perating Officer	OneMain Holdings Inc.		

	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 20/92 Rpt: 23/109	
2	FILER NAME			3	Filer ID (Ethics Commissio	n Filers)
	OneMain Ho	ldings Inc. PAC			00084139	,
4	Date	5 Full name of contributor 🔲 out-of-state PAC (IE	D#:)	7	Amount of Contribution (\$)	
	02/24/2023	Chadha, Rajive				\$192.31
		6 Contributor address; City; State; Zip Code				
		New York, NY 10017				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u>ا</u> چ)		
		perating Officer	OneMain Holdings Inc.	-,		
⊨	Date	Full name of contributor out-of-state PAC (IE			Amount of Contribution (\$)	
	03/10/2023	Chadha, Rajive)#)			\$192.31
	00,10,2020	Contributor address; City; State; Zip Code				<i></i>
		New York, NY 10017				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	EVP Chief O	perating Officer	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (IE	D#:)		Amount of Contribution (\$)	
	03/24/2023	Chadha, Rajive				\$192.31
		Contributor address; City; State; Zip Code				
	Deinsinglasse	New York, NY 10017	Frankriger (Or a la structioner			
		pation / Job title (See Instructions) perating Officer	Employer (See Instructions OneMain Holdings Inc.	5)		
	Date 04/07/2023	Full name of contributor out-of-state PAC (IE	D#:)		Amount of Contribution (\$)	¢100.01
	04/07/2023	Chadha, Rajive				\$192.31
		Contributor address; City; State; Zip Code				
		New York, NY 10017				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> چ)		
	EVP Chief O	perating Officer	OneMain Holdings Inc.			
╞	Date	Full name of contributor out-of-state PAC (IE	D#:)	Γ	Amount of Contribution (\$)	
	04/21/2023	Chadha, Rajive				\$192.31
		Contributor address; City; State; Zip Code				
		New York, NY 10017				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
L	EVP Chief O	perating Officer	OneMain Holdings Inc.			

	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 21/92 Rpt: 24/109	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		Idings Inc. PAC			00084139	/
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	05/05/2023	Chadha, Rajive				\$192.31
		6 Contributor address; City; State; Zip Code		1		
		New York, NY 10017				
8	Principal occu	I Ipation / Job title (See Instructions)	9 Employer (See Instructions	<u>ا</u> چ)		
		Derating Officer	OneMain Holdings Inc.	<i>,</i>		
⊨	Date	Full name of contributor out-of-state PAC (ID#:	· · · · ·	Γ	Amount of Contribution (\$)	
	05/19/2023	Chadha, Rajive	·)			\$192.31
	00/20/2020	Contributor address; City; State; Zip Code				+=0=.0=
		New York, NY 10017				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	. 5)		
	EVP Chief C	Operating Officer	OneMain Holdings Inc.			
╞	Date	Full name of contributor out-of-state PAC (ID#:	:)		Amount of Contribution (\$)	
	06/02/2023	Chadha, Rajive				\$192.31
		Contributor address; City; State; Zip Code				
		New York, NY 10017				
Γ		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	EVP Chief O	Operating Officer	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/16/2023	Chadha, Rajive				\$192.31
		Contributor address; City; State; Zip Code				
		New York, NY 10017		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
		Operating Officer	OneMain Holdings Inc.	_		
	Date	Full name of contributor out-of-state PAC (ID#:	:)		Amount of Contribution (\$)	
	06/30/2023	Chadha, Rajive				\$192.31
		Contributor address; City; State; Zip Code				
		New York, NY 10017				
_	Dringingloggy		Employer (See Instructions	<u> </u>		
		pation / Job title (See Instructions) Operating Officer	Employer (See Instructions OneMain Holdings Inc.	5)		

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	The Instruc	ction Guide explains how to complete t	this form.	1	Total pages Schedule A1: Sch: 22/92 Rpt: 25/109	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	OneMain Ho	oldings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC	C (ID#:)	7	Amount of Contribution (\$)	
	01/13/2023	Clancy, Austin				\$38.46
		6 Contributor address; City; State; Zip Code		"		
		5.4.5 D				
Ļ	Driv sized oppu	Baton Rouge, LA 70806				
8	Principal occu VP/D Govt R	pation / Job title (See Instructions)	9 Employer (See Instructions OneMain Holdings Inc.	S)		
						
	Date		C (ID#:)		Amount of Contribution (\$)	#20.4C
	01/27/2023					\$38.46
		Contributor address; City; State; Zip Code				
		Baton Rouge, LA 70806				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	VP/D Govt R	,	OneMain Holdings Inc.			
╞	Date	Full name of contributor Out-of-state PAC	l	Τ	Amount of Contribution (\$)	
	02/10/2023	Clancy, Austin	, (10),,		,	\$38.46
				·		
		Baton Rouge, LA 70806				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	VP/D Govt R	:elations	OneMain Holdings Inc.			
	Date	Full name of contributor 🔲 out-of-state PAC	C (ID#:)	Γ	Amount of Contribution (\$)	
	02/24/2023	Clancy, Austin				\$38.46
		Contributor address; City; State; Zip Code				
		Baton Rouge, LA 70806				
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>د)</u>		
	VP/D Govt R		OneMain Holdings Inc.	5)		
╞				Т	Amount of Contribution (\$)	
	Date 03/10/2023	Full name of contributor out-of-state PAC Clancy, Austin	; (ID#:)		Amount of Continuation (a)	\$38.46
	0011012020	Contributor address: City; State; Zip Code				ΨΟΟτο
		Continuation address, City, State, Zip Could				
		Baton Rouge, LA 70806				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	VP/D Govt R	telations	OneMain Holdings Inc.			
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 23/92 Rpt: 26/109	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
		oldings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	03/24/2023	3/24/2023 Clancy, Austin				\$38.46
		6 Contributor address; City; State; Zip Code		1		
		Datas Davisa LA 70906				
	Dringing occu	Baton Rouge, LA 70806 Ipation / Job title (See Instructions)	9 Employer (See Instructions	Γ		
ð	VP/D Govt R		OneMain Holdings Inc.	5)		
				—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	#20 .40
	04/07/2023	Clancy, Austin				\$38.46
		Contributor address; City; State; Zip Code				
		Baton Rouge, LA 70806				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ال</u>		
	VP/D Govt R		OneMain Holdings Inc.	<i>י</i> י		
╞				—	Amount of Contribution (\$)	
	Date 04/21/2023)		Amount of Contribution (\$)	\$38.46
	04/21/2025	Clancy, Austin				400.40
		Contributor address; City; State; Zip Code				
		Baton Rouge, LA 70806				
⊢	Principal occu	Ipation / Job title (See Instructions)	Employer (See Instructions	上 3)		
	VP/D Govt R		OneMain Holdings Inc.			
	Date	Full name of contributor Out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	05/05/2023	Clancy, Austin			· · · · · · · · · · · · · · · · · · ·	\$38.46
		Contributor address; City; State; Zip Code		ł		·
		Baton Rouge, LA 70806				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/D Govt R	{elations	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	05/19/2023	Clancy, Austin				\$38.46
		Contributor address; City; State; Zip Code				
		Baton Rouge, LA 70806				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/D Govt R	lelations	OneMain Holdings Inc.			
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 24/92 Rpt: 27/109	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	OneMain Ho	oldings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	06/02/2023	06/02/2023 Clancy, Austin				\$38.46
		6 Contributor address; City; State; Zip Code				
		Baton Rouge, LA 70806				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	VP/D Govt R	lelations	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/16/2023	Clancy, Austin				\$38.46
		Contributor address; City; State; Zip Code				
		Baton Rouge, LA 70806				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	VP/D Govt R	{elations	OneMain Holdings Inc.			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/30/2023	Clancy, Austin				\$38.46
		Contributor address; City; State; Zip Code				
		Baton Rouge, LA 70806				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	VP/D Govt R	Relations	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	01/13/2023	Coate, Tom				\$38.46
		Contributor address; City; State; Zip Code				
		· · · · · · · · · · · · · · · · · · ·				
		Purcellville, VA 20132				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Assoc Dir Ne	etwork Services	OneMain Holdings Inc.			
╞	Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>		Amount of Contribution (\$)	
	01/27/2023	Coate, Tom			• •	\$38.46
		Contributor address; City; State; Zip Code				
		Purcellville, VA 20132				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	 ;)		
		etwork Services	OneMain Holdings Inc.			
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 25/92 Rpt: 28/109	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	OneMain Ho	Idings Inc. PAC			00084139	
4	Date 5 Full name of contributor Image: out-of-state PAC (ID#:)			7	Amount of Contribution (\$)	
	02/10/2023	V/2023 Coate, Tom				\$38.46
		6 Contributor address; City; State; Zip Code				
		Purcellville, VA 20132				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Assoc Dir Ne	etwork Services	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	02/24/2023	Coate, Tom				\$38.46
		Contributor address; City; State; Zip Code				
		Purcellville, VA 20132				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Assoc Dir Ne	etwork Services	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	·)		Amount of Contribution (\$)	
	03/10/2023	Coate, Tom				\$38.46
		Contributor address; City; State; Zip Code				
		Purcellville, VA 20132				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Assoc Dir Ne	etwork Services	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	·)		Amount of Contribution (\$)	
	03/24/2023	Coate, Tom				\$38.46
		Contributor address; City; State; Zip Code				
		Purcellville, VA 20132				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Assoc Dir Ne	etwork Services	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	04/07/2023	Coate, Tom				\$38.46
		Contributor address; City; State; Zip Code				
		Purcellville, VA 20132				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Assoc Dir Ne	etwork Services	OneMain Holdings Inc.			
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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 26/92 Rpt: 29/109	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	OneMain Ho	Idings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID#	t:)	7	Amount of Contribution (\$)	
	04/21/2023	3 Coate, Tom				\$38.46
		6 Contributor address; City; State; Zip Code				
	Dringing ogg	Purcellville, VA 20132 pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
l°		etwork Services	OneMain Holdings Inc.	5)		
╞				1		
	Date	Full name of contributor out-of-state PAC (ID#	t:)		Amount of Contribution (\$)	¢20.40
	05/05/2023	Coate, Tom				\$38.46
		Contributor address; City; State; Zip Code				
		Purcellville, VA 20132				
⊢	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
		etwork Services	OneMain Holdings Inc.			
╞	Date	Full name of contributor out-of-state PAC (ID#		Γ	Amount of Contribution (\$)	
	05/19/2023	Coate, Tom	,			\$38.46
		Contributor address; City; State; Zip Code				
		Purcellville, VA 20132				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Assoc Dir Ne	etwork Services	OneMain Holdings Inc.	_		
	Date	Full name of contributor 🛛 out-of-state PAC (ID#	t:)		Amount of Contribution (\$)	
	06/02/2023	Coate, Tom				\$38.46
		Contributor address; City; State; Zip Code				
		Purcellville, VA 20132				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	•	etwork Services	OneMain Holdings Inc.	-)		
⊨	Date	Full name of contributor out-of-state PAC (ID#		Г	Amount of Contribution (\$)	
	06/16/2023	Coate, Tom	·)			\$38.46
	00/10/2020	Contributor address; City; State; Zip Code				<i>Q</i> OO . 10
		Contributor address, City, State, Zip Code				
		Purcellville, VA 20132				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Assoc Dir Ne	etwork Services	OneMain Holdings Inc.			
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	The Instru	ction Guide explains how to complete this f	iorm.	1	Total pages Schedule A1: Sch: 27/92 Rpt: 30/109	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	OneMain Ho	oldings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	06/30/2023	Coate, Tom				\$38.46
		6 Contributor address; City; State; Zip Code				
		Purcellville, VA 20132				
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Assoc Dir Ne	etwork Services	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	01/13/2023	Dewan, Rohit]		\$38.46
		Contributor address; City; State; Zip Code				
		Miami Beach, FL 33140				
_	Dringing occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
		an Product Innovation	OneMain Holdings Inc.	5)		
╞				1		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$38.46
	01/27/2023	Dewan, Rohit				Ф 30.40
		Contributor address; City; State; Zip Code				
		Miami Beach, FL 33140				
	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/SMD Loa	an Product Innovation	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	02/10/2023	Dewan, Rohit				\$38.46
		Contributor address; City; State; Zip Code		1		
		Miami Beach, FL 33140				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/SMD Loa	an Product Innovation	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
	02/24/2023	Dewan, Rohit				\$38.46
		Contributor address; City; State; Zip Code]		
		Miami Baach EL 22140				
	Dringingloppy	Miami Beach, FL 33140		<u> </u>		
		ipation / Job title (See Instructions) an Product Innovation	Employer (See Instructions OneMain Holdings Inc.	5)		
	VP/SIVID LOC					

The Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 28/92 Rpt: 31/109	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
OneMain Holdings Inc. PAC		00084139	
4 Date 5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
03/10/2023 Dewan, Rohit	Dewan, Rohit		
6 Contributor address; City; State; Zip Code			
Miami Beach, FL 33140			
8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions))	
VP/SMD Loan Product Innovation	OneMain Holdings Inc.		
Date Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
03/24/2023 Dewan, Rohit		\$38.4	
Contributor address; City; State; Zip Code			
Miami Beach, FL 33140			
Principal occupation / Job title (See Instructions)	Employer (See Instructions))	
VP/SMD Loan Product Innovation	OneMain Holdings Inc.		
Date Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
04/07/2023 Dewan, Rohit		\$38.4	
Contributor address; City; State; Zip Code			
Miami Beach, FL 33140			
Principal occupation / Job title (See Instructions)	Employer (See Instructions))	
VP/SMD Loan Product Innovation	OneMain Holdings Inc.		
Date Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
04/21/2023 Dewan, Rohit		\$38.4	
Contributor address; City; State; Zip Code			
Miami Beach, FL 33140			
Principal occupation / Job title (See Instructions)	Employer (See Instructions))	
VP/SMD Loan Product Innovation	OneMain Holdings Inc.		
Date Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
05/05/2023 Dewan, Rohit		\$38.4	
Contributor address; City; State; Zip Code			
Miami Daash El 20140			
Miami Beach, FL 33140	Freedow (2) to the the	<u>.</u>	
Principal occupation / Job title (See Instructions)	Employer (See Instructions))	
VP/SMD Loan Product Innovation	OneMain Holdings Inc.		

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 29/92 Rpt: 32/109	
2	FILER NAME			3	Filer ID (Ethics Commission	ו Filers)
		oldings Inc. PAC			00084139	
4	Date 5 Full name of contributor Image: out-of-state PAC (ID#:)			7	Amount of Contribution (\$)	
	05/19/2023	Dewan, Rohit				\$38.46
		6 Contributor address; City; State; Zip Code				
Ļ		Miami Beach, FL 33140	1	Ļ		
8		upation / Job title (See Instructions)	9 Employer (See Instructions	;)		
		an Product Innovation	OneMain Holdings Inc.	—		
	Date Full name of contributor out-of-state PAC (ID#:)				Amount of Contribution (\$)	
	06/02/2023	Dewan, Rohit				\$38.46
		Contributor address; City; State; Zip Code				
	<u> </u>	Miami Beach, FL 33140		Ļ		
		upation / Job title (See Instructions)	Employer (See Instructions	;)		
		an Product Innovation	OneMain Holdings Inc.	—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/16/2023	Dewan, Rohit				\$38.46
		Contributor address; City; State; Zip Code				
\vdash	Dringing oppu	Miami Beach, FL 33140		Ĺ		
		upation / Job title (See Instructions) an Product Innovation	Employer (See Instructions OneMain Holdings Inc.	i)		
				—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/30/2023	Dewan, Rohit				\$38.46
		Contributor address; City; State; Zip Code				
		Mismi Dooch EL 22140				
	Dringing oog	Miami Beach, FL 33140		Ļ		
		upation / Job title (See Instructions) an Product Innovation	Employer (See Instructions OneMain Holdings Inc.	<i>i</i>)		
				—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	÷05 00
	01/13/2023 Drennan, Bob				\$25.89	
	Contributor address; City; State; Zip Code					
	Dringing oog	Evansville, IN 47708		Ļ		
		upation / Job title (See Instructions)	Employer (See Instructions	<i>i</i>)		
	Supv Netwo	ik Ops	OneMain Holdings Inc.			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 30/92 Rpt: 33/109	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	OneMain Ho	oldings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	01/27/2023	27/2023 Drennan, Bob				\$25.89
	ļ	6 Contributor address; City; State; Zip Code				
	ļ					
	ļ					
		Evansville, IN 47708				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Supv Networ	k Ops	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/10/2023 Drennan, Bob					\$25.89
	ļ	Contributor address; City; State; Zip Code				
	ļ					
	ļ					
	D 1 divid eeeu	Evansville, IN 47708		Ĺ		
	Principal occu Supv Networ	pation / Job title (See Instructions)	Employer (See Instructions OneMain Holdings Inc.	5)		
╘	-			-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	* 25 00
	02/24/2023	Drennan, Bob				\$25.89
	ļ	Contributor address; City; State; Zip Code				
	ļ					
	ļ	Evansville, IN 47708				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Supv Networ		OneMain Holdings Inc.			
╞	Date	Full name of contributor Out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	03/10/2023	Drennan, Bob			,	\$25.89
		Contributor address; City; State; Zip Code				
	ļ					
	ļ					
	ļ	Evansville, IN 47708				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Supv Networ	:k Ops	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	03/24/2023	Drennan, Bob				\$25.89
		Contributor address; City; State; Zip Code				
	ļ					
	ļ					
		Evansville, IN 47708				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Supv Networ	k Ops	OneMain Holdings Inc.			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 31/92 Rpt: 34/109	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
		ldings Inc. PAC			00084139	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	04/07/2023	Drennan, Bob				\$25.89
		6 Contributor address; City; State; Zip Code		1		
		Evansville, IN 47708				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Supv Networ	·k Ops	OneMain Holdings Inc.			
Γ	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	04/21/2023	Drennan, Bob				\$25.89
		Contributor address; City; State; Zip Code		1		
		Evansville, IN 47708				
		pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Supv Networ	:k Ops	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	05/05/2023	Drennan, Bob				\$25.89
		Contributor address; City; State; Zip Code		1		
		Evansville, IN 47708				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Supv Networ	·k Ops	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	05/19/2023	Drennan, Bob				\$25.89
		Contributor address; City; State; Zip Code		1		
		Evansville, IN 47708				
		pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Supv Networ	k Ops	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/02/2023	Drennan, Bob				\$25.89
		Contributor address; City; State; Zip Code				
		Evansville, IN 47708				
		pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Supv Networ	ik Ops	OneMain Holdings Inc.			

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	The Instrue	ction Guide explains how to com	plete this for	rm.	1	Total pages Schedule A1: Sch: 32/92 Rpt: 35/109	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	OneMain Ho	ldings Inc. PAC				00084139	
4	Date	5 Full name of contributor out-of-s	state PAC (ID#:)	7	Amount of Contribution (\$)	
	06/16/2023	Drennan, Bob					\$25.89
		6 Contributor address; City; State; Zip Co	ode				
		1					
		1					
		Evansville, IN 47708					
8		pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Supv Networ	k Ops		OneMain Holdings Inc.			
	Date	Full name of contributor 🛛 out-of-s	state PAC (ID#:)		Amount of Contribution (\$)	
	06/30/2023	Drennan, Bob					\$11.54
		Contributor address; City; State; Zip Co					
		1					
	Dringinal occu	Evansville, IN 47708 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Supv Networ	, , ,		OneMain Holdings Inc.	9		
⊢		·					
	Date 01/13/2023		state PAC (ID#:)		Amount of Contribution (\$)	\$38.46
	01/13/2023	Fitzpatrick, Lawrence	odo				400.40
		Contributor address; City; State; Zip Co	ode				
		1					
		Baltimore, MD 21202					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	EVP Chief T	ech Officer		OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-s	state PAC (ID#:)		Amount of Contribution (\$)	
	01/27/2023	Fitzpatrick, Lawrence					\$38.46
		Contributor address; City; State; Zip Co	ode				
		1					
		Baltimore, MD 21202					
		pation / Job title (See Instructions)		Employer (See Instructions	;)		
	EVP Chief T			OneMain Holdings Inc.	_		
	Date		state PAC (ID#:)		Amount of Contribution (\$)	
	02/10/2023	Fitzpatrick, Lawrence					\$38.46
		Contributor address; City; State; Zip Co	ode				
		Baltimore, MD 21202					
⊢	Princinal occu	pation / Job title (See Instructions)	r	Employer (See Instructions	 :)		
	EVP Chief T			OneMain Holdings Inc.	9		
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The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 33/92 Rpt: 36/109		
2	2 FILER NAME			3	3 Filer ID (Ethics Commission Filers)		
	OneMain Holdings Inc. PAC				00084139		
4	Date	ate 5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$)		
	02/24/2023	Fitzpatrick, Lawrence				\$38.46	
		6 Contributor address; City; State; Zip Code		1			
Ļ	Dringinal agou	Baltimore, MD 21202					
8		pation / Job title (See Instructions) ech Officer	9 Employer (See Instructions	OneMain Holdings Inc.			
╘				1			
	Date	Full name of contributor out-of-state PAC (IE	D#:)		Amount of Contribution (\$)	* 20.40	
	03/10/2023					\$38.46	
		Contributor address; City; State; Zip Code					
	Baltimore, MD 21202						
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ג)			
	EVP Chief T	,	OneMain Holdings Inc.	-,			
⊢	Date				Amount of Contribution (\$)		
	03/24/2023				Allount of Continuation (+)	\$38.46	
	Contributor address; City; State; Zip Code			$\left \right $		TV- 111	
		Baltimore, MD 21202					
	Principal occupation / Job title (See Instructions)		Employer (See Instructions	5)			
	EVP Chief Tech Officer		OneMain Holdings Inc.				
	Date	Full name of contributor 🔲 out-of-state PAC (ID	D#:)	Ī	Amount of Contribution (\$)		
	04/07/2023	Fitzpatrick, Lawrence				\$38.46	
	Contributor address; City; State; Zip Code			1			
	Deltimore MD 21202						
\vdash	Baltimore, MD 21202 Principal occupation / Job title (See Instructions) Employer (See Instruction)		<u> </u>				
	EVP Chief Tech Officer		Employer (See Instructions OneMain Holdings Inc.	5)			
╞				1			
	Date 04/21/2023	Full name of contributor out-of-state PAC (IE)#:)		Amount of Contribution (\$)	\$38.46	
	04/21/2023					⊅ 30.40	
	Contributor address; City; State; Zip Code						
		Baltimore, MD 21202					
	Principal occupation / Job title (See Instructions) Employer (See Instruction			5)			
EVP Chief Tech Officer			OneMain Holdings Inc.				
\vdash							

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	The Instru	ction Guide explains how to comp	lete this for	rm.	1	Total pages Schedule A1: Sch: 34/92 Rpt: 37/109	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	OneMain Ho	Idings Inc. PAC				00084139	
4	Date	5 Full name of contributor out-of-st	tate PAC (ID#:)	7	Amount of Contribution (\$)	
	05/05/2023	Fitzpatrick, Lawrence					\$38.46
		6 Contributor address; City; State; Zip Coc	de				
		Baltimore, MD 21202					
8		pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	EVP Chief T	ech Officer		OneMain Holdings Inc.			
	Date	Full name of contributor 🔲 out-of-st	tate PAC (ID#:)		Amount of Contribution (\$)	
	05/19/2023	Fitzpatrick, Lawrence					\$38.46
		Contributor address; City; State; Zip Coo					
		Baltimore, MD 21202					
<u> </u>	Drincinal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	EVP Chief T	,		OneMain Holdings Inc.	5)		
╞				Chemian Florange inc.	1		
	Date 06/02/2023		tate PAC (ID#:)		Amount of Contribution (\$)	\$38.46
	00/02/2023	Fitzpatrick, Lawrence	al				Ф О0.40
		Contributor address; City; State; Zip Coc	je				
	ļ	Baltimore, MD 21202					
\vdash	Principal occu	I pation / Job title (See Instructions)		Employer (See Instructions	.		
	EVP Chief To	ech Officer		OneMain Holdings Inc.			
╞	Date	Full name of contributor 🔲 out-of-st	tate PAC (ID#:)		Amount of Contribution (\$)	
	06/16/2023	Fitzpatrick, Lawrence					\$38.46
	ļ	Contributor address; City; State; Zip Cod	de				
	ļ						
	ļ						
		Baltimore, MD 21202					
	•	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	EVP Chief To	ech Officer		OneMain Holdings Inc.			
	Date		tate PAC (ID#:)		Amount of Contribution (\$)	
	06/30/2023	Fitzpatrick, Lawrence					\$38.46
		Contributor address; City; State; Zip Coc	de				
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		Baltimore, MD 21202					
┝	Drincipal occu			Employor (Soo Instructions	<u> </u>		
	EVP Chief To	pation / Job title (See Instructions)		Employer (See Instructions OneMain Holdings Inc.)		
_				Chemain Holdings inc.			

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	The Instru	ction Guide explains how to comple	ete this for	rm.	1	Total pages Schedule A1: Sch: 35/92 Rpt: 38/109	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	OneMain Ho	Idings Inc. PAC				00084139	
4	Date	5 Full name of contributor out-of-state	e PAC (ID#:)	7	Amount of Contribution (\$)	
	01/13/2023	Gage, Maggie					\$192.31
		6 Contributor address; City; State; Zip Code					
		Owings, MD 20736					
8		pation / Job title (See Instructions)	9	Employer (See Instructions	;)		
	VP/SMD Put	-		OneMain Holdings Inc.			
	Date	—	.e PAC (ID#:)		Amount of Contribution (\$)	
	01/27/2023						\$192.31
		Contributor address; City; State; Zip Code	;				
		Owings, MD 20736					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	 :)		
	VP/SMD Put	,		OneMain Holdings Inc.	'		
╞	Date				<u> </u>	Amount of Contribution (\$)	
	02/10/2023	Gage, Maggie	e Pac (ID#)			\$192.31
	02/10/2020						Ψ102.01
		Contributor address, Oity, State, Zip Sour	,				
		Owings, MD 20736					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	VP/SMD Put	olic Policy		OneMain Holdings Inc.			
	Date	Full name of contributor 🔲 out-of-state	e PAC (ID#:)		Amount of Contribution (\$)	
	02/24/2023	Gage, Maggie					\$192.31
		Contributor address; City; State; Zip Code	;				
		Owings, MD 20736					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	VP/SMD Put			OneMain Holdings Inc.			
	Date	—	e PAC (ID#:)		Amount of Contribution (\$)	*100.01
	03/10/2023	Gage, Maggie					\$192.31
		Contributor address; City; State; Zip Code	:				
		Owings, MD 20736					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	VP/SMD Put			OneMain Holdings Inc.	,		
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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 36/92 Rpt: 39/109	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		Idings Inc. PAC			00084139	,
4	Date	5 Full name of contributor out-of-state PAC (ID#)	7	Amount of Contribution (\$)	
	03/24/2023	Gage, Maggie				\$192.31
		6 Contributor address; City; State; Zip Code				
Ļ	Dringing occu	Owings, MD 20736	Contractions	<u> </u>		
8	VP/SMD Pul	pation / Job title (See Instructions) blic Policy	9 Employer (See Instructions OneMain Holdings Inc.	5)		
				1		
	Date	Full name of contributor out-of-state PAC (ID#	:)		Amount of Contribution (\$)	#100.01
	04/07/2023					\$192.31
		Contributor address; City; State; Zip Code				
		Owings, MD 20736				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	[;)		
	VP/SMD Put		OneMain Holdings Inc.	,		
⊨	Date	Full name of contributor Out-of-state PAC (ID#		Γ	Amount of Contribution (\$)	
	04/21/2023	Gage, Maggie				\$192.31
		Owings, MD 20736				
	•	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/SMD Put	Dic Policy	OneMain Holdings Inc.			
Γ	Date	Full name of contributor out-of-state PAC (ID#	:)	Γ	Amount of Contribution (\$)	
	05/05/2023	Gage, Maggie				\$192.31
		Contributor address; City; State; Zip Code				
		Owings, MD 20736				
\vdash	Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> וו		
	VP/SMD Put		OneMain Holdings Inc.	"		
╞	Date			<u> </u>	Amount of Contribution (\$)	
	05/19/2023	Full name of contributor out-of-state PAC (ID# Gage, Maggie	/			\$192.31
	00/10/2020	Contributor address; City; State; Zip Code				Ψ102.02
		Owings, MD 20736				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/SMD Put	olic Policy	OneMain Holdings Inc.			
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 37/92 Rpt: 40/109	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	OneMain Ho	ldings Inc. PAC			00084139	ŕ
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	06/02/2023	Gage, Maggie				\$192.31
		6 Contributor address; City; State; Zip Code		1		
Ļ	Drive sized, oppu	Owings, MD 20736	• Employer (Cas Instructions	Ĺ		
8	VP/SMD Pul	· · ·	 Employer (See Instructions OneMain Holdings Inc. 	5)		
	Date	— —)		Amount of Contribution (\$)	*100.01
	06/16/2023					\$192.31
		Contributor address; City; State; Zip Code				
		Owings, MD 20736				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	VP/SMD Put		OneMain Holdings Inc.			
╞	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/30/2023	Gage, Maggie				\$192.31
		Contributor address; City; State; Zip Code				
		Owings, MD 20736				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/SMD Put		OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	01/13/2023	Gonzalez, Eloy				\$19.23
		Contributor address; City; State; Zip Code				
		El Dorado Hills, CA 95762				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
		ch Operations	OneMain Holdings Inc.	"		
╞	Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
	01/27/2023	Gonzalez, Eloy	/			\$19.23
	01/21/2022	Contributor address; City; State; Zip Code				*****
		El Dorado Hills, CA 95762				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/RD Bran	ch Operations	OneMain Holdings Inc.			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 38/92 Rpt: 41/109	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
		oldings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	02/10/2023	Gonzalez, Eloy				\$19.23
		6 Contributor address; City; State; Zip Code	,	1		
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		El Dorado Hills, CA 95762				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	VP/RD Bran	ich Operations	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	02/24/2023	Gonzalez, Eloy				\$19.23
	I	Contributor address; City; State; Zip Code		1		
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	I	El Dorado Hills, CA 95762				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/RD Bran	ch Operations	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	03/10/2023	Gonzalez, Eloy				\$19.23
	l	Contributor address; City; State; Zip Code		1		
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	I	El Dorado Hills, CA 95762				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/RD Bran	ch Operations	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	03/24/2023	Gonzalez, Eloy				\$19.23
	I	Contributor address; City; State; Zip Code		ł		
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	I	El Dorado Hills, CA 95762				
┢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	VP/RD Bran	ch Operations	OneMain Holdings Inc.			
╞	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	04/07/2023	Gonzalez, Eloy				\$19.23
	l	Contributor address; City; State; Zip Code		1		
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	I	El Dorado Hills, CA 95762				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	VP/RD Bran	ich Operations	OneMain Holdings Inc.			
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 39/92 Rpt: 42/109	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	OneMain Ho	oldings Inc. PAC			00084139	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	04/21/2023	Gonzalez, Eloy				\$19.23
	I	6 Contributor address; City; State; Zip Code		•		
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	I	El Dorado Hills, CA 95762				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	VP/RD Bran	ich Operations	OneMain Holdings Inc.			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	05/05/2023	Gonzalez, Eloy			· · · · ·	\$19.23
		Contributor address; City; State; Zip Code		•		
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	I	El Dorado Hills, CA 95762				
┢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	上 3)		
		ich Operations	OneMain Holdings Inc.			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	05/19/2023	Gonzalez, Eloy	,		, who are or e c	\$19.23
	••••	Contributor address; City; State; Zip Code		\mathbf{I}		+
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	l					
	I	El Dorado Hills, CA 95762				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	VP/RD Bran	ch Operations	OneMain Holdings Inc.			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/02/2023	Gonzalez, Eloy	,		/ who and or 2 cm	\$19.23
	00,01,11,1	Contributor address; City; State; Zip Code		•		*= •
	l	כטוונוושענטו מעטוביז, כוגץ, סומוב, בוף כסמב				
	I					
	I	El Dorado Hills, CA 95762				
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>لــــــــــــــــــــــــــــــــــــ</u>		
		ich Operations	OneMain Holdings Inc.			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/16/2023	Gonzalez, Eloy	/		,	\$19.23
		Contributor address; City; State; Zip Code	ļ	\mathbf{I}		
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	I	El Dorado Hills, CA 95762				
┢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	ل ے ن		
		ich Operations	OneMain Holdings Inc.			
⊢		J	<u> </u>			

The	Instruc	ction Guide explains how to com	plete this fo	orm.	1	Total pages Schedule A1: Sch: 40/92 Rpt: 43/109	
2 FILER	R NAME				3	Filer ID (Ethics Commission	n Filers)
		ldings Inc. PAC				00084139	,
4 Date		5 Full name of contributor out-of-s	state PAC (ID#:)	7	Amount of Contribution (\$)	
06/30	0/2023	Gonzalez, Eloy					\$19.23
		6 Contributor address; City; State; Zip Co	de				
		El Derede Hille, CA 0E762					
9 Drinci		El Dorado Hills, CA 95762 pation / Job title (See Instructions)		9 Employer (See Instructions	<u> </u>		
		ch Operations		OneMain Holdings Inc.	9		
				\		Amount of Contribution (\$)	
Date 01/13	3/2023	Goyal, Dinesh	state PAC (ID#:)			\$96.15
01,10	512025	Contributor address; City; State; Zip Co					Φ90.10
		Contributor address, City, State, Lip Co	ue				
		New York, NY 10017					
Princi	pal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
EVP	Chief C	redit Officer		OneMain Holdings Inc.			
Date		Full name of contributor	state PAC (ID#:)		Amount of Contribution (\$)	
01/27	7/2023	Goyal, Dinesh					\$96.15
		Contributor address; City; State; Zip Co	ode				
		New York, NY 10017					
Princi	ipal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
		redit Officer		OneMain Holdings Inc.	,		
Date		Full name of contributor	state PAC (ID#:)		Amount of Contribution (\$)	
	0/2023	Goyal, Dinesh		/		(1)	\$96.15
		Contributor address; City; State; Zip Co	 de				
		New York, NY 10017					
· ·		pation / Job title (See Instructions)		Employer (See Instructions)		
EVP	Chief C	redit Officer		OneMain Holdings Inc.			
Date			state PAC (ID#:)		Amount of Contribution (\$)	
02/24	4/2023	Goyal, Dinesh					\$96.15
		Contributor address; City; State; Zip Co	ode				
		New York, NY 10017					
Drinci	nal occu	pation / Job title (See Instructions)		Employor (See Instructions	<u> </u>		
		redit Officer		Employer (See Instructions OneMain Holdings Inc.	9		
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	The Instru	ction Guide explains how to complete t	his form.	1	Total pages Schedule A1: Sch: 41/92 Rpt: 44/109	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		oldings Inc. PAC			00084139	,
4	Date	5 Full name of contributor out-of-state PAC	; (ID#:)	7	Amount of Contribution (\$)	
	03/10/2023	Goyal, Dinesh				\$96.15
		6 Contributor address; City; State; Zip Code		"		
		New York, NY 10017				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
	EVP Chief C		OneMain Holdings Inc.	ς,		
╞	Date	Full name of contributor out-of-state PAC		Т	Amount of Contribution (\$)	
	03/24/2023	Goyal, Dinesh	, (iDπ)			\$96.15
		New York, NY 10017				
		ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	EVP Chief C	redit Officer	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC	; (ID#:)	Γ	Amount of Contribution (\$)	
	04/07/2023	Goyal, Dinesh				\$96.15
		Contributor address; City; State; Zip Code				
		New York, NY 10017				
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	EVP Chief C		OneMain Holdings Inc.	-,		
╞	Date	Full name of contributor Out-of-state PAC	I (ID#:)	Т	Amount of Contribution (\$)	
	04/21/2023	Goyal, Dinesh				\$96.15
		Contributor address; City; State; Zip Code				
		New York, NY 10017				
		upation / Job title (See Instructions)	Employer (See Instructions	s)		
	EVP Chief C	redit Officer	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC	; (ID#:)	Τ	Amount of Contribution (\$)	
	05/05/2023	Goyal, Dinesh				\$96.15
		Contributor address; City; State; Zip Code				
		Now York NV 10017				
\vdash	Bringinal occu	New York, NY 10017 Ipation / Job title (See Instructions)	Employer (See Instruction	<u> </u>		
	EVP Chief C		Employer (See Instructions OneMain Holdings Inc.	S)		
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The Instrue	ction Guide explains how to complete this f	orm.		Total pages Schedule A1: Sch: 42/92 Rpt: 45/109	
2 FILER NAME			3 F	Filer ID (Ethics Commission	Filers)
	oldings Inc. PAC			00084139	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 A	Amount of Contribution (\$)	
05/19/2023	Goyal, Dinesh				\$96.15
	6 Contributor address; City; State; Zip Code				
	New York, NY 10017				
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	<u>।</u> २)		
EVP Chief C		OneMain Holdings Inc.	.,		ļ
Date	Full name of contributor out-of-state PAC (ID#:_			Amount of Contribution (\$)	
06/02/2023	Goyal, Dinesh	/			\$96.15
00/02/2020					ФЭ0.±С
	Contributor address; City; State; Zip Code				I
	New York, NY 10017				
Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions)	ـــــــــــــــــــــــــــــــــــــ		
EVP Chief C		OneMain Holdings Inc.	*		
Date	Full name of contributor out-of-state PAC (ID#:)	<i>,</i>	Amount of Contribution (\$)	
06/16/2023	Goyal, Dinesh				\$96.15
	Contributor address; City; State; Zip Code		•		
	New York, NY 10017				
-	ipation / Job title (See Instructions)	Employer (See Instructions)	5)		
EVP Chief C	redit Officer	OneMain Holdings Inc.			
Date	Full name of contributor out-of-state PAC (ID#:)	4	Amount of Contribution (\$)	
06/30/2023	Goyal, Dinesh				\$96.15
	Contributor address; City; State; Zip Code				
	New York, NY 10017				
-	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
EVP Chief C	redit Officer	OneMain Holdings Inc.			
Date	Full name of contributor out-of-state PAC (ID#:)	F	Amount of Contribution (\$)	
01/13/2023	Hannah, Philip				\$19.23
	Contributor address; City; State; Zip Code				
	Evansville, IN 47708		Ĺ		
-	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
VP/SMD Sof	tware Dev	OneMain Holdings Inc.			
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	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 43/92 Rpt: 46/109	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	OneMain Ho	oldings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC (IE)	7	Amount of Contribution (\$)	
	01/27/2023	Hannah, Philip				\$19.23
		6 Contributor address; City; State; Zip Code		1		
	ļ					
		Evansville, IN 47708				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	VP/SMD Sof	tware Dev	OneMain Holdings Inc.			
	Date	Full name of contributor 🔲 out-of-state PAC (IE	D#:)	Γ	Amount of Contribution (\$)	
	02/10/2023	Hannah, Philip				\$19.23
	Contributor address; City; State; Zip Code]		
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	Drizgingl oppu	Evansville, IN 47708	Employer (Cao Instructions	<u> </u>		
	VP/SMD Sof	pation / Job title (See Instructions) ftware Dev	Employer (See Instructions OneMain Holdings Inc.	5)		
╞				.		
	Date 02/24/2023		D#:)		Amount of Contribution (\$)	\$19.23
	02/24/2023					ΦΙΆ.ΖΟ
		Contributor address; City; State; Zip Code				
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	ļ	Evansville, IN 47708				
\vdash	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/SMD Sof	itware Dev	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (IE	 D#:)	Γ	Amount of Contribution (\$)	
	03/10/2023	Hannah, Philip				\$19.23
		Contributor address; City; State; Zip Code		1		
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		Evansville, IN 47708				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/SMD Sof	tware Dev	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (IE	D#:)	Γ	Amount of Contribution (\$)	
	03/24/2023	Hannah, Philip				\$19.23
		Contributor address; City; State; Zip Code]		
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	Drizgingl oppu	Evansville, IN 47708	Employer (Cao Instructions	<u> </u>		
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	The Instruc	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 44/92 Rpt: 47/109	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	OneMain Ho	oldings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID)	7	Amount of Contribution (\$)	
	04/07/2023	Hannah, Philip				\$19.23
		6 Contributor address; City; State; Zip Code		1		
		Evansville, IN 47708				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	VP/SMD Sof	tware Dev	OneMain Holdings Inc.			
	Date	Full name of contributor 🔲 out-of-state PAC (ID	D#:)	Γ	Amount of Contribution (\$)	
	04/21/2023	Hannah, Philip				\$19.23
	Contributor address; City; State; Zip Code]		
	Dringinal occu	Evansville, IN 47708 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	VP/SMD Sof		OneMain Holdings Inc.	5)		
⊢				1	Δ	
	Date 05/05/2023	Full name of contributor out-of-state PAC (ID Hannah, Philip	D#:)		Amount of Contribution (\$)	\$19.23
	05/05/2025	·····				ΦΙΊ.ΖΟ
		Contributor address; City; State; Zip Code				
		Evansville, IN 47708				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/SMD Sof	tware Dev	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID	D#:)	Γ	Amount of Contribution (\$)	
	05/19/2023	Hannah, Philip				\$19.23
		Contributor address; City; State; Zip Code		1		
		Evansville, IN 47708	-1			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/SMD Sof		OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID	D#:)		Amount of Contribution (\$)	
	06/02/2023	Hannah, Philip				\$19.23
		Contributor address; City; State; Zip Code				
		Evansville, IN 47708				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ג)		
	VP/SMD Sof		OneMain Holdings Inc.	2)		
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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 45/92 Rpt: 48/109	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		oldings Inc. PAC			00084139	,
4	Date	5 Full name of contributor Out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	06/16/2023	Hannah, Philip				\$19.23
	ļ	6 Contributor address; City; State; Zip Code	1	1		
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		Evansville, IN 47708	-			
8		upation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	VP/SMD Sof	tware Dev	OneMain Holdings Inc.			
Γ	Date	Full name of contributor out-of-state PAC (ID#:	:)	Γ	Amount of Contribution (\$)	
	06/30/2023	Hannah, Philip				\$19.23
	1	Contributor address; City; State; Zip Code		1		
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		Evansville, IN 47708				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/SMD Sof	/tware Dev	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	01/20/2023	Kilchenstein, Mark				\$175.00
	ł	Contributor address; City; State; Zip Code		1		
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		Baltimore, MD 21202				
	-	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/SMD Cus	st Retention	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	02/20/2023	Kilchenstein, Mark				\$175.00
	ļ	Contributor address; City; State; Zip Code		ł		
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	ļ	Baltimore, MD 21202				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
	VP/SMD Cus	st Retention	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	03/20/2023	Kilchenstein, Mark				\$175.00
		Contributor address; City; State; Zip Code		1		
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	ļ	Baltimore, MD 21202				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	VP/SMD Cus	st Retention	OneMain Holdings Inc.			
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	The Instru	ction Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 46/92 Rpt: 49/109	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		oldings Inc. PAC			00084139	
4	Date	5 Full name of contributor Out-of-state PAC (I	ID#:)	7	Amount of Contribution (\$)	
	04/20/2023	Kilchenstein, Mark				\$175.00
	ļ	6 Contributor address; City; State; Zip Code		1		
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Ļ		Baltimore, MD 21202	<u> </u>			
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	VP/SMD Cus	st Retention	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (I	ID#:)	T	Amount of Contribution (\$)	
	05/20/2023	Kilchenstein, Mark				\$175.00
	ļ	Contributor address; City; State; Zip Code		1		
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	<u> </u>	Baltimore, MD 21202		Ĺ		
		ipation / Job title (See Instructions)	Employer (See Instructions	S)		
	VP/SMD Cus		OneMain Holdings Inc.	-		
	Date	Full name of contributor out-of-state PAC (I	ID#:)		Amount of Contribution (\$)	
	06/20/2023	Kilchenstein, Mark]		\$175.00
	ļ	Contributor address; City; State; Zip Code				
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	1	Baltimore, MD 21202				
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	VP/SMD Cus		OneMain Holdings Inc.	5)		
╞				Т	Amount of Contribution (\$)	
	Date 01/13/2023	Full name of contributor out-of-state PAC (I	ID#:)		Amount of Contribution (\$)	\$38.46
	01/13/2023	Kubba, Sundus		-		4 30.40
	ļ	Contributor address; City; State; Zip Code				
	ļ					
	ļ	New York, NY 10017				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	VP/SMD Chi		OneMain Holdings Inc.	.,		
╞	Date			Т	Amount of Contribution (\$)	
	01/27/2023	Full name of contributor Out-of-state PAC (I Kubba, Sundus	ID#:)			\$38.46
	01/21/2020			-		ΨΟΟ.ΤΟ
	ļ	Contributor address; City; State; Zip Code				
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	ļ	New York, NY 10017				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	L s)		
	VP/SMD Chi		OneMain Holdings Inc.	-,		
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The Instruction Guide explains how to complete this form. 1 Total pages Schedule Sch: 47/92 Rpt: 50. 2 FILER NAME 3 Filer ID (Ethics Com O0084139)	
	nmission Filers)
4 Date 5 Full name of contributor 🔲 out-of-state PAC (ID#:) 7 Amount of Contribution	on (\$)
02/10/2023 Kubba, Sundus	\$38.46
6 Contributor address; City; State; Zip Code	
New York, NY 10017	
 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 9 One Main Heldings Inc. 	
VP/SMD Chief of Staff OneMain Holdings Inc.	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution	
02/24/2023 Kubba, Sundus	\$38.46
Contributor address; City; State; Zip Code	
New York, NY 10017	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
VP/SMD Chief of Staff OneMain Holdings Inc.	
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Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution 03/10/2023 Kubba, Sundus Amount of Contribution	on (\$) \$38.46
	Φ30.40
Contributor address; City; State; Zip Code	
New York, NY 10017	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
VP/SMD Chief of Staff OneMain Holdings Inc.	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution	 on (\$)
03/24/2023 Kubba, Sundus	\$38.46
Contributor address; City; State; Zip Code	
New York, NY 10017	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Principal occupation / Job title (See Instructions) Employer (See Instructions) VP/SMD Chief of Staff OneMain Holdings Inc. Date Full name of contributor out-of-state PAC (ID#:) Amount of Contributor	.,
Principal occupation / Job title (See Instructions) Employer (See Instructions) VP/SMD Chief of Staff OneMain Holdings Inc.	on (\$) \$38.46
Principal occupation / Job title (See Instructions) Employer (See Instructions) VP/SMD Chief of Staff OneMain Holdings Inc. Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution	.,
Principal occupation / Job title (See Instructions) Employer (See Instructions) VP/SMD Chief of Staff OneMain Holdings Inc. Date Full name of contributor out-of-state PAC (ID#:) 04/07/2023 Kubba, Sundus Amount of Contribution	.,
Principal occupation / Job title (See Instructions) Employer (See Instructions) VP/SMD Chief of Staff OneMain Holdings Inc. Date Full name of contributor out-of-state PAC (ID#:) 04/07/2023 Kubba, Sundus Amount of Contribution Contributor address; City; State; Zip Code One	.,
Principal occupation / Job title (See Instructions) Employer (See Instructions) VP/SMD Chief of Staff OneMain Holdings Inc. Date Full name of contributor out-of-state PAC (ID#:) 04/07/2023 Kubba, Sundus Contributor address; City; State; Zip Code Amount of Contributor New York, NY 10017 New York, NY 10017	.,
Principal occupation / Job title (See Instructions) Employer (See Instructions) VP/SMD Chief of Staff OneMain Holdings Inc. Date Full name of contributor out-of-state PAC (ID#:) 04/07/2023 Kubba, Sundus Amount of Contributor Contributor address; City; State; Zip Code New York, NY 10017 Principal occupation / Job title (See Instructions) Employer (See Instructions)	.,
Principal occupation / Job title (See Instructions) Employer (See Instructions) VP/SMD Chief of Staff OneMain Holdings Inc. Date Full name of contributor out-of-state PAC (ID#:) 04/07/2023 Kubba, Sundus Contributor address; City; State; Zip Code Amount of Contributor New York, NY 10017 New York, NY 10017	.,

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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 48/92 Rpt: 51/109	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	OneMain Ho	oldings Inc. PAC			00084139	
4	Date	5 Full name of contributor Out-of-state PAC (ID#	t:)	7	Amount of Contribution (\$)	
	04/21/2023	Kubba, Sundus				\$38.46
	1	6 Contributor address; City; State; Zip Code		1		
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		New York, NY 10017				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	3)		
	VP/SMD Chi	ef of Staff	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#	#:)	Γ	Amount of Contribution (\$)	
	05/05/2023	Kubba, Sundus				\$38.46
	1	Contributor address; City; State; Zip Code		1		
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		New York, NY 10017	<u> </u>			
		upation / Job title (See Instructions)	Employer (See Instructions	3)		
	VP/SMD Chi	.ef of Staff	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#	t:)	Γ	Amount of Contribution (\$)	
	05/19/2023	Kubba, Sundus				\$38.46
	ļ	Contributor address; City; State; Zip Code		1		
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		New York, NY 10017	_			
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/SMD Chi	et of Staff	OneMain Holdings Inc.	_		
	Date	Full name of contributor out-of-state PAC (ID#	k)	Γ	Amount of Contribution (\$)	
	06/02/2023	Kubba, Sundus				\$38.46
	ļ	Contributor address; City; State; Zip Code		1		
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		ipation / Job title (See Instructions)	Employer (See Instructions	3)		
	VP/SMD Chi		OneMain Holdings Inc.	—		
	Date	Full name of contributor out-of-state PAC (ID#	::)		Amount of Contribution (\$)	
	06/16/2023	Kubba, Sundus				\$38.46
	Contributor address; City; State; Zip Code					
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		New York, NY 10017		Ĺ		
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/SMD Chi	er of Stan	OneMain Holdings Inc.			

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	The Instruc	ction Guide explains how to complete	e this for	rm.	1	Total pages Schedule A1: Sch: 49/92 Rpt: 52/109	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	OneMain Ho	oldings Inc. PAC				00084139	
4	Date	5 Full name of contributor out-of-state PA	AC (ID#:)	7	Amount of Contribution (\$)	
	06/30/2023	Kubba, Sundus					\$38.46
		6 Contributor address; City; State; Zip Code					
		New York, NY 10017					
8		pation / Job title (See Instructions)	9	Employer (See Instructions)		
	VP/SMD Chi	ef of Staff		OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	03/10/2023	Leasure, Susan					\$38.46
		Contributor address; City; State; Zip Code					
	Dringinal occu	Evansville, IN 47708 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	VP/D Mktg P	,		OneMain Holdings Inc.)		
⊢		- 					
	Date 03/24/2023	Full name of contributor out-of-state P/ Leasure, Susan	'AC (ID#:)		Amount of Contribution (\$)	\$38.46
	0312412023						400.40
		Contributor address; City; State; Zip Code					
		Evansville, IN 47708					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	VP/D Mktg P	rograms		OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	04/07/2023	Leasure, Susan					\$38.46
		Contributor address; City; State; Zip Code					
		Evansville, IN 47708					
		pation / Job title (See Instructions)		Employer (See Instructions)		
	VP/D Mktg P	-		OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state P/	PAC (ID#:)		Amount of Contribution (\$)	
	04/21/2023	Leasure, Susan					\$38.46
		Contributor address; City; State; Zip Code					
		Evansville, IN 47708					
┝	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>ן</u>		
	VP/D Mktg P			OneMain Holdings Inc.	,		
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	The Instru	ction Guide explains how to con	nplete this fo	orm.	1	Total pages Schedule A1: Sch: 50/92 Rpt: 53/109	
2	FILER NAME				3	Filer ID (Ethics Commission	ı Filers)
	OneMain Hc	oldings Inc. PAC				00084139	
4	Date	5 Full name of contributor out-of	of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	05/05/2023	Leasure, Susan					\$38.46
	I	6 Contributor address; City; State; Zip C	Code				
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		Evansville, IN 47708					
8	Principal occu	ipation / Job title (See Instructions)	;	9 Employer (See Instructions	5)		
	VP/D Mktg P	rograms		OneMain Holdings Inc.			
F	Date	Full name of contributor out-of	of-state PAC (ID#:)		Amount of Contribution (\$)	
	05/19/2023	Leasure, Susan					\$38.46
	I	Contributor address; City; State; Zip C	Code				
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	I	1					
	I	Evansville, IN 47708					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	VP/D Mktg P	rograms		OneMain Holdings Inc.			
⊨	Date	Full name of contributor out-of	of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/02/2023	Leasure, Susan				•••	\$38.46
	I	Contributor address; City; State; Zip C	Code				
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	I	Evansville, IN 47708					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	VP/D Mktg P	rograms		OneMain Holdings Inc.			
⊨	Date	Full name of contributor out-of	of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/16/2023	Leasure, Susan	-				\$38.46
	I	Contributor address; City; State; Zip C	Code				
	I						
	I	1					
	I	Evansville, IN 47708					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	VP/D Mktg P	rograms		OneMain Holdings Inc.			
⊢	Date	Full name of contributor out-of	of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/30/2023	Leasure, Susan					\$38.46
	I	Contributor address; City; State; Zip C	Code				
	I						
	I	1					
	I	Evansville, IN 47708					
┢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	VP/D Mktg P	rograms		OneMain Holdings Inc.			
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 51/92 Rpt: 54/109	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
		ldings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	04/21/2023	Lehman, Gregg				\$1,000.00
		6 Contributor address; City; State; Zip Code				
Ļ	D 1 start see	Fort Worth, TX 76137		Ĺ		
8		· · ·	9 Employer (See Instructions	5)		
	Deputy Gene		OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	too 40
	01/13/2023	Lewis, Robin				\$38.46
		Contributor address; City; State; Zip Code				
		Baltimore, MD 21202				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	.) :)		
	HRIS Mgr		OneMain Holdings Inc.	,		
╞	Date	Full name of contributor out-of-state PAC (ID#:	-		Amount of Contribution (\$)	
	01/27/2023	Lewis, Robin	/		Amount of Contribution (*)	\$38.46
	0_,	Contributor address; City; State; Zip Code				+
		Baltimore, MD 21202				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	HRIS Mgr		OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/10/2023	Lewis, Robin				\$38.46
		Contributor address; City; State; Zip Code				
		D Minser MD 01000				
	Dringing oogu	Baltimore, MD 21202	Employer (Cool Instructions			
	HRIS Mgr	pation / Job title (See Instructions)	Employer (See Instructions OneMain Holdings Inc.	9		
	-					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	Φ <u>20</u> 46
	02/24/2023	Lewis, Robin				\$38.46
		Contributor address; City; State; Zip Code				
		Baltimore, MD 21202				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	HRIS Mgr		OneMain Holdings Inc.			

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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 52/92 Rpt: 55/109	
2	FILER NAME			3	Filer ID (Ethics Commission	1 Filers)
		oldings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	03/10/2023	Lewis, Robin				\$38.46
	I	6 Contributor address; City; State; Zip Code		1		
	l					
	I	1				
	I	Baltimore, MD 21202				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	HRIS Mgr	1	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	03/24/2023	Lewis, Robin			-	\$38.46
	I	Contributor address; City; State; Zip Code		ł		
	I					
	I	1				
		Baltimore, MD 21202				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	HRIS Mgr	1	OneMain Holdings Inc.			
╞	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	04/07/2023	Lewis, Robin	/		, and an e e e e e e e e e e e e e e e e e e	\$38.46
	0	Contributor address; City; State; Zip Code		ł		TU = 1 + 1
	l	CUltilibutor audress, City, State, Zip Code				
	I	1				
	I	Baltimore, MD 21202				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>لــــــــــــــــــــــــــــــــــــ</u>		
	HRIS Mgr	,	OneMain Holdings Inc.	.,		
╞	Date	Full name of contributor Out-of-state PAC (ID#:		—	Amount of Contribution (\$)	
	Dale 04/21/2023)			\$38.46
	04/21/2023	Lewis, Robin				490.40
	l	Contributor address; City; State; Zip Code				
	I	1				
	I	Baltimore, MD 21202				
_	Drincinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	HRIS Mgr		OneMain Holdings Inc.	り		
L				—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	* 20.40
	05/05/2023	Lewis, Robin				\$38.46
	I	Contributor address; City; State; Zip Code				
	I	1				
	I					
		Baltimore, MD 21202		Ļ		
		upation / Job title (See Instructions)	Employer (See Instructions	;)		
	HRIS Mgr		OneMain Holdings Inc.			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 53/92 Rpt: 56/109	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
		oldings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	05/19/2023	Lewis, Robin				\$38.46
		6 Contributor address; City; State; Zip Code		1		
		Baltimore, MD 21202				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	HRIS Mgr		OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/02/2023	Lewis, Robin				\$38.46
		Contributor address; City; State; Zip Code		1		
		Baltimore, MD 21202				
		pation / Job title (See Instructions)	Employer (See Instructions	3)		
	HRIS Mgr		OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/16/2023	Lewis, Robin				\$38.46
		Contributor address; City; State; Zip Code		1		
		Baltimore, MD 21202	-			
		pation / Job title (See Instructions)	Employer (See Instructions	;)		
	HRIS Mgr		OneMain Holdings Inc.			
Γ	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/30/2023	Lewis, Robin				\$38.46
		Contributor address; City; State; Zip Code	, ,	1		
		Baltimore, MD 21202	1			
		pation / Job title (See Instructions)	Employer (See Instructions	;)		
	HRIS Mgr		OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	01/13/2023	Mauerman, Michelle				\$19.23
		Contributor address; City; State; Zip Code	1	1		
		Cook County, IL 60525	_			
		ipation / Job title (See Instructions)	Employer (See Instructions	3)		
	Deputy Gene	eral Counsel	OneMain Holdings Inc.			
				-		

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 54/92 Rpt: 57/109
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
OneMain Holdings Inc. PAC	00084139
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$)
01/27/2023 Mauerman, Michelle	\$19.23
6 Contributor address; City; State; Zip Code	
Cook County, IL 60525	
8 Principal occupation / Job title (See Instructions) 9 Employer (See In	
Deputy General Counsel OneMain Holdi	ings Inc.
Date Full name of contributor in out-of-state PAC (ID#:) Amount of Contribution (\$)
02/10/2023 Mauerman, Michelle	\$19.23
Contributor address; City; State; Zip Code	
Cook County, IL 60525	· · · · · · · · · · · · · · · · · · ·
Principal occupation / Job title (See Instructions)Employer (See Instructions)Deputy General CounselOneMain Holdi	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
02/24/2023 Mauerman, Michelle	\$19.23
Contributor address; City; State; Zip Code	
Cook County, IL 60525	
Principal occupation / Job title (See Instructions) Employer (See In	Instructions)
Deputy General Counsel OneMain Holdi	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
03/10/2023 Mauerman, Michelle	\$19.23
Contributor address; City; State; Zip Code	
Cook County, IL 60525	
Principal occupation / Job title (See Instructions) Employer (See In	nstructions)
Deputy General Counsel OneMain Holdi	ings Inc.
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
03/24/2023 Mauerman, Michelle	\$19.23
Contributor address; City; State; Zip Code	
Cook County, IL 60525	
Principal occupation / Job title (See Instructions) Employer (See In	
Deputy General Counsel OneMain Holdi	ings Inc.

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 55/92 Rpt: 58/109
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
OneMain Holdings Inc. PAC	00084139
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$)
04/07/2023 Mauerman, Michelle	\$19.23
6 Contributor address; City; State; Zip Code	
Cook County, IL 60525	
	r (See Instructions)
Deputy General Counsel OneMair	n Holdings Inc.
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
04/21/2023 Mauerman, Michelle	\$19.23
Contributor address; City; State; Zip Code	
Cook County, IL 60525	
	r (See Instructions) n Holdings Inc.
	-
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
05/05/2023 Mauerman, Michelle	\$19.23
Contributor address; City; State; Zip Code	
Cook County, IL 60525	
	r (See Instructions)
	n Holdings Inc.
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
05/19/2023 Mauerman, Michelle	\$19.23
Contributor address; City; State; Zip Code	
Cook County, IL 60525	
Principal occupation / Job title (See Instructions) Employer	r (See Instructions)
Deputy General Counsel OneMair	n Holdings Inc.
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
06/02/2023 Mauerman, Michelle	\$19.23
Contributor address; City; State; Zip Code	
Cook County, IL 60525	
	r (See Instructions)
Deputy General Counsel OneMair	n Holdings Inc.

Th	e Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 56/92 Rpt: 59/109	
2 FILE	ER NAME			3	Filer ID (Ethics Commission	n Filers)
		Idings Inc. PAC			00084139	
4 Dat	e	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
06/	16/2023	Mauerman, Michelle				\$19.23
		6 Contributor address; City; State; Zip Code		1		
		Cook County, IL 60525				
		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
Dep	puty Gene	eral Counsel	OneMain Holdings Inc.			
Dat		Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
06/3	30/2023	Mauerman, Michelle				\$19.23
		Contributor address; City; State; Zip Code		1		
		Cook County, IL 60525				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
Dep	puty Gene	eral Counsel	OneMain Holdings Inc.			
Dat	e	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
01/	13/2023	Mccalmont, Holly				\$19.23
		Contributor address; City; State; Zip Code		1		
		Hooksett, NH 03106		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
Ass	SOC DIF HU	Iman Resources	OneMain Holdings Inc.			
Dat		Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
01/2	27/2023	Mccalmont, Holly				\$19.23
		Contributor address; City; State; Zip Code				
		Hooksett, NH 03106		Ļ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
Ass	soc Dir Hu	Iman Resources	OneMain Holdings Inc.			
Dat		Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
02/	10/2023	Mccalmont, Holly				\$19.23
		Contributor address; City; State; Zip Code]		
		Hooksett, NH 03106				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
Ass	soc Dir Hu	Iman Resources	OneMain Holdings Inc.			

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	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 57/92 Rpt: 60/109	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	OneMain Ho	oldings Inc. PAC			00084139	-
4	Date 02/24/2023	5 Full name of contributor out-of-state PAC (IE Mccalmont, Holly)	7	Amount of Contribution (\$)	\$19.23
	0212412025			•		Ψ10.20
		6 Contributor address; City; State; Zip Code				
		Hooksett, NH 03106				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Assoc Dir Hı	uman Resources	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID		Γ	Amount of Contribution (\$)	
	03/10/2023	Mccalmont, Holly				\$19.23
		Contributor address; City; State; Zip Code		1		
		Hooksett, NH 03106				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Assoc Dir Hı	uman Resources	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (IE)		Amount of Contribution (\$)	
	03/24/2023	Mccalmont, Holly				\$19.23
		Contributor address; City; State; Zip Code		1		
		Hooksett, NH 03106				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Assoc Dir Hu	uman Resources	OneMain Holdings Inc.			
	Date	Full name of contributor 🔲 out-of-state PAC (ID	D#:)	Γ	Amount of Contribution (\$)	
	04/07/2023	Mccalmont, Holly				\$19.23
		Contributor address; City; State; Zip Code		1		
		Hooksett, NH 03106		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
		uman Resources	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (IE	D#:)		Amount of Contribution (\$)	
	04/21/2023	Mccalmont, Holly]		\$19.23
		Contributor address; City; State; Zip Code				
		Laskeett NLL 02106				
	Dringingl goog	Hooksett, NH 03106	Employer (See Instruction)	<u> </u>		
		pation / Job title (See Instructions) uman Resources	Employer (See Instructions OneMain Holdings Inc.	5)		
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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 58/92 Rpt: 61/109	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		Idings Inc. PAC			00084139	,
4	Date	5 Full name of contributor Out-of-state PAC (ID#)	7	Amount of Contribution (\$)	
	05/05/2023	Mccalmont, Holly				\$19.23
		6 Contributor address; City; State; Zip Code		1		
		Hooksett, NH 03106				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Assoc Dir Hu	uman Resources	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#	· :)		Amount of Contribution (\$)	
	05/19/2023	Mccalmont, Holly				\$19.23
		Contributor address; City; State; Zip Code				
		Hooksett, NH 03106				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Assoc Dir Hu	uman Resources	OneMain Holdings Inc.			
⊨	Date	Full name of contributor out-of-state PAC (ID#	<u> </u>	Γ	Amount of Contribution (\$)	
	06/02/2023	Mccalmont, Holly				\$19.23
		Contributor address; City; State; Zip Code				
		Hooksett, NH 03106				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Assoc Dir Hu	uman Resources	OneMain Holdings Inc.			
⊨	Date	Full name of contributor out-of-state PAC (ID#	· :)		Amount of Contribution (\$)	
	06/16/2023	Mccalmont, Holly				\$19.23
		Contributor address; City; State; Zip Code				
		Hooksett, NH 03106				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> چ)		
	Assoc Dir Hu	uman Resources	OneMain Holdings Inc.			
⊨	Date	Full name of contributor out-of-state PAC (ID#	<u> </u>	Γ	Amount of Contribution (\$)	
	06/30/2023	Mccalmont, Holly				\$19.23
		Contributor address; City; State; Zip Code				
		Contributor address, Oky, State, Zip Code				
		Hooksett, NH 03106				
⊢	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> چ)		
		uman Resources	OneMain Holdings Inc.			
⊢			1			

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	The Instru	ction Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 59/92 Rpt: 62/109	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	OneMain Ho	Idings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC (I	D#:)	7	Amount of Contribution (\$)	
	01/13/2023	Minor, Ashley				\$38.46
	I	6 Contributor address; City; State; Zip Code		1		
	I					
	I					
Ļ		London, KY 40741				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Customer Ca	-	OneMain Holdings Inc.	-		
	Date		ID#:)		Amount of Contribution (\$)	
	01/27/2023					\$38.46
	I	Contributor address; City; State; Zip Code				
	I					
	I	London, KY 40741				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ן דו		
	Customer Ca		OneMain Holdings Inc.	5)		
╞	Date	Full name of contributor out-of-state PAC (I		Τ	Amount of Contribution (\$)	
	02/10/2023	Minor, Ashley	D#			\$38.46
	02/10/2020			·		400
	l					
	l					
	l	London, KY 40741				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Customer Ca	are Mgr	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (I		Γ	Amount of Contribution (\$)	
	02/24/2023	Minor, Ashley				\$38.46
	I	Contributor address; City; State; Zip Code		1		
	I					
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	Dringing occu	London, KY 40741 pation / Job title (See Instructions)	Employer (Soo Instruction	<u> </u>		
	Customer Ca		Employer (See Instructions OneMain Holdings Inc.	5)		
╞				T		
	Date 03/10/2023	Full name of contributor Out-of-state PAC (I Minor, Ashley	D#:)		Amount of Contribution (\$)	\$38.46
	03/10/2023			•		
	I	Contributor address; City; State; Zip Code				
	I					
	l	London, KY 40741				
\vdash	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Customer Ca		OneMain Holdings Inc.	,		

	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 60/92 Rpt: 63/109	
2	FILER NAME			3	Filer ID (Ethics Commission	ו Filers)
	OneMain Ho	oldings Inc. PAC			00084139	
4	Date	5 Full name of contributor Out-of-state PAC (ID)#:)	7	Amount of Contribution (\$)	
	03/24/2023	Minor, Ashley	1			\$38.46
	I	6 Contributor address; City; State; Zip Code	,	1		
			1			
			1			
		London, KY 40741		Ļ		
8		upation / Job title (See Instructions)	9 Employer (See Instructions)	5)		
	Customer Ca	-	OneMain Holdings Inc.	—		
	Date		D#:)]	Amount of Contribution (\$)	_
	04/07/2023 Minor, Ashley				\$38.46	
		Contributor address; City; State; Zip Code]		
			1			
			1			
	Dringing oog	London, KY 40741	Employer (See Instruction)			
	Customer Ca	upation / Job title (See Instructions)	Employer (See Instructions) OneMain Holdings Inc.	3)		
				—		
	Date	Full name of contributor out-of-state PAC (ID)#:)		Amount of Contribution (\$)	÷22.40
	04/21/2023					\$38.46
		Contributor address; City; State; Zip Code	1			
			1			
		London, KY 40741	1			
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	⊥ 3)		
	Customer Ca		OneMain Holdings Inc.			
╞	Date	Full name of contributor out-of-state PAC (ID		Γ	Amount of Contribution (\$)	
	05/05/2023	Minor, Ashley	π			\$38.46
	00,00,	Contributor address; City; State; Zip Code		•		+
			1			
			1			
		London, KY 40741	,			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Customer Ca	are Mgr	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID)	Γ	Amount of Contribution (\$)	
	05/19/2023	Minor, Ashley	,			\$38.46
	l	Contributor address; City; State; Zip Code		1		
			1			
			1			
		London, KY 40741				
		upation / Job title (See Instructions)	Employer (See Instructions)	3)		
	Customer Ca	are Mgr	OneMain Holdings Inc.			
			· ·			

	The Instru	ction Guide explains how to complete t	this fo	orm.	1	Total pages Schedule A1: Sch: 61/92 Rpt: 64/109	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	OneMain Ho	oldings Inc. PAC				00084139	
4	Date	5 Full name of contributor out-of-state PAC	.C (ID#:)	7	Amount of Contribution (\$)	
	06/02/2023	Minor, Ashley					\$38.46
		6 Contributor address; City; State; Zip Code					
		London, KY 40741					
8	8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions		;)				
	Customer Ca	are Mgr		OneMain Holdings Inc.			
	Date	Full name of contributor Out-of-state PAC	.C (ID#:)		Amount of Contribution (\$)	
	06/16/2023 Minor, Ashley				\$38.46		
		Contributor address; City; State; Zip Code					
		London, KY 40741					
	Principal occu	pation / Job title (See Instructions)	1	Employer (See Instructions	5)		
	Customer Ca	are Mgr		OneMain Holdings Inc.			
	Date	Full name of contributor Out-of-state PAC	.C (ID#:)		Amount of Contribution (\$)	
	06/30/2023	Minor, Ashley				· ·	\$38.46
		Contributor address; City; State; Zip Code					
		London, KY 40741					
	Principal occu	ipation / Job title (See Instructions)		Employer (See Instructions	;)		
	Customer Ca	are Mgr		OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC	.C (ID#:)		Amount of Contribution (\$)	
	06/09/2023	Neal, Ron					\$1,000.00
		Contributor address; City; State; Zip Code					
		Fort Worth, TX 76137					
	Principal occu	ipation / Job title (See Instructions)		Employer (See Instructions	;)		
	Head of Insu	Irance		OneMain Holdings Inc.			
⊨	Date	Full name of contributor Out-of-state PAC	.C (ID#:)		Amount of Contribution (\$)	
	01/13/2023	Nelson, Warren					\$38.46
		Contributor address; City; State; Zip Code					
		New York, NY 10017					
	Principal occu	ipation / Job title (See Instructions)		Employer (See Instructions	;)		
	VP/SMD Bra	anch Operations		OneMain Holdings Inc.			

	The Instru	ction Guide explains how to complet	te this fo	rm.	1	Total pages Schedule A1: Sch: 62/92 Rpt: 65/109	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
		ldings Inc. PAC				00084139	
4	Date	5 Full name of contributor 🔲 out-of-state F	PAC (ID#:)	7	Amount of Contribution (\$)	
	01/27/2023	Nelson, Warren					\$38.46
		6 Contributor address; City; State; Zip Code					
		New York, NY 10017					
8	Principal occu	I Ipation / Job title (See Instructions)	ç	 Employer (See Instructions 	L;)		
	VP/SMD Branch Operations OneMain Holdings Inc.						
⊨	Date	Full name of contributor Out-of-state F	PAC (ID#:)		Amount of Contribution (\$)	
	02/10/2023	Nelson, Warren				• •	\$38.46
		New York, NY 10017					
	•	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	VP/SMD Bra	anch Operations		OneMain Holdings Inc.			
	Date	Full name of contributor 🔲 out-of-state F	PAC (ID#:)		Amount of Contribution (\$)	
	02/24/2023	Nelson, Warren					\$38.46
		Contributor address; City; State; Zip Code					
		New York, NY 10017					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	 ;)		
	VP/SMD Bra	anch Operations		OneMain Holdings Inc.			
╞	Date	Full name of contributor Out-of-state F	 PAC (ID#:)		Amount of Contribution (\$)	
	03/10/2023	Nelson, Warren					\$38.46
		Contributor address; City; State; Zip Code					
		New York, NY 10017					
	•	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	VP/SMD Bra	anch Operations		OneMain Holdings Inc.			
	Date	Full name of contributor Out-of-state F	PAC (ID#:)	Γ	Amount of Contribution (\$)	
	03/24/2023	Nelson, Warren					\$38.46
		Contributor address; City; State; Zip Code					
		Now York NY 10017					
┝	Dringing occu	New York, NY 10017	r	Employer (See Instructions	<u> </u>		
		pation / Job title (See Instructions) anch Operations		Employer (See Instructions OneMain Holdings Inc.	5)		
┡			L	Unemain riolaings inc.			

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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 63/92 Rpt: 66/109	
2	FILER NAME			3		ו Filers)
		oldings Inc. PAC			00084139	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	04/07/2023	Nelson, Warren				\$38.46
	1	6 Contributor address; City; State; Zip Code		1		
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Ļ	21.1.1	New York, NY 10017		Ĺ		
8			5)			
		· · · · · · · · · · · · · · · · · · ·	OneMain Holdings Inc.	_		
	Date	Full name of contributor out-of-state PAC (ID#:	:)		Amount of Contribution (\$)	
	04/21/2023					\$38.46
	I	Contributor address; City; State; Zip Code				
	I					
	I	New York, NY 10017				
_	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u> •)		
		anch Operations	OneMain Holdings Inc.	5)		
⊨		· · · · · · · · · · · · · · · · · · ·		Г	Amount of Contribution (\$)	
	Date 05/05/2023	Full name of contributor out-of-state PAC (ID#: Nelson, Warren)		Amount of Contribution (\$)	\$38.46
	03/03/2023			-		Φ ΟΟ. 4 υ
	I	Contributor address; City; State; Zip Code				
	l					
	I	New York, NY 10017				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/SMD Bra	anch Operations	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	<u>.</u>)		Amount of Contribution (\$)	
	05/19/2023	Nelson, Warren				\$38.46
	I	Contributor address; City; State; Zip Code		1		
	l					
	l					
		New York, NY 10017		Ĺ		
	•	Ipation / Job title (See Instructions)	Employer (See Instructions	5)		
		anch Operations	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	:)		Amount of Contribution (\$)	**** 10
	06/02/2023	Nelson, Warren				\$38.46
	I	Contributor address; City; State; Zip Code				
	I					
	I	New York, NY 10017				
┝	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ``		
		anch Operations	OneMain Holdings Inc.)		
┝						

	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 64/92 Rpt: 67/109	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		ldings Inc. PAC		-	00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	06/16/2023	Nelson, Warren				\$38.46
		6 Contributor address; City; State; Zip Code				
Ļ		New York, NY 10017		Ļ		
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
		anch Operations	OneMain Holdings Inc.	_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/30/2023	Nelson, Warren				\$38.46
		Contributor address; City; State; Zip Code				
		Now York NV 10017				
	Dringing oog	New York, NY 10017				
	•	pation / Job title (See Instructions) anch Operations	Employer (See Instructions OneMain Holdings Inc.	5)		
		·		-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	÷ 44 07
	01/27/2023	Osterhout, Jenny				\$41.67
		Contributor address; City; State; Zip Code				
		New York, NY 10017				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
		strategy Officer	OneMain Holdings Inc.	,		
⊨	Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
	02/27/2023	Osterhout, Jenny)			\$41.67
	02/21/2020	Contributor address; City; State; Zip Code				Ψ+1.07
		Contributor address, City, State, Zip Code				
		New York, NY 10017				
	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	•	trategy Officer	OneMain Holdings Inc.			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	03/27/2023	Osterhout, Jenny			• -	\$41.67
		Contributor address; City; State; Zip Code				
		New York, NY 10017				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	EVP Chief S	trategy Officer	OneMain Holdings Inc.			
l I						

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 65/92 Rpt: 68/109	
2	FILER NAME			3	Filer ID (Ethics Commission	i Filers)
	OneMain Ho	ldings Inc. PAC			00084139	
4	Date 04/27/2023	5 Full name of contributorout-of-state PAC (ID#: Osterhout, Jenny)	7	Amount of Contribution (\$)	\$41.67
		6 Contributor address; City; State; Zip Code		1		
		New York, NY 10017				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	EVP Chief Strategy Officer OneMain Holdings Inc.					
⊨	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	05/27/2023 Osterhout, Jenny				\$41.67	
		Contributor address; City; State; Zip Code		1		
		New York, NY 10017				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	EVP Chief S	trategy Officer	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	06/27/2023	Osterhout, Jenny				\$41.67
	Contributor address; City; State; Zip Code					
		New York, NY 10017				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> د)		
		trategy Officer	OneMain Holdings Inc.	,		
⊨	Date	Full name of contributor out-of-state PAC (ID#:		Г	Amount of Contribution (\$)	
	01/17/2023	Owens, James)			\$83.33
	01/11/2020	Contributor address; City; State; Zip Code		ł		\$00.00
		Evansville, IN 47714				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/SMD Arc	hitect/Technology Strategy	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	02/17/2023	Owens, James				\$83.33
		Contributor address; City; State; Zip Code		1		
		Evansville, IN 47714		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/SIVID Arc	hitect/Technology Strategy	OneMain Holdings Inc.			

	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 66/92 Rpt: 69/109	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	OneMain Ho	ldings Inc. PAC			00084139	,
4	Date	5 Full name of contributor 🔲 out-of-state PAC (ID	#:)	7	Amount of Contribution (\$)	
	03/17/2023	Owens, James				\$83.33
		6 Contributor address; City; State; Zip Code				
		Evansville, IN 47714				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	VP/SMD Arc	hitect/Technology Strategy	OneMain Holdings Inc.			
╞	Date	Full name of contributor out-of-state PAC (ID	#:)	Г	Amount of Contribution (\$)	
	04/17/2023	Owens, James				\$83.33
		Contributor address; City; State; Zip Code				
		Evansville, IN 47714				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/SMD Arc	hitect/Technology Strategy	OneMain Holdings Inc.			
	Date	Full name of contributor 🛛 out-of-state PAC (ID	#:)		Amount of Contribution (\$)	
	05/17/2023	Owens, James				\$83.33
		Contributor address; City; State; Zip Code				
		Evansville, IN 47714				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/SMD Arc	hitect/Technology Strategy	OneMain Holdings Inc.			
	Date	Full name of contributor 🔲 out-of-state PAC (ID	#:)		Amount of Contribution (\$)	
	01/13/2023	Pentapati, Ravina				\$38.46
		Contributor address; City; State; Zip Code		1		
⊢	Dringingloggy	Evansville, IN 47708 pation / Job title (See Instructions)	Employer (See Instructions			
	•	Software Engineer Sr	Employer (See Instructions OneMain Holdings Inc.	5)		
				_		
	Date	Full name of contributor out-of-state PAC (ID	#:)		Amount of Contribution (\$)	¢20.46
	01/27/2023	Pentapati, Ravina				\$38.46
		Contributor address; City; State; Zip Code				
		Evansville, IN 47708				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Technology	Software Engineer Sr	OneMain Holdings Inc.			
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	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 67/92 Rpt: 70/109	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	OneMain Ho	oldings Inc. PAC			00084139	
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	02/10/2023	Pentapati, Ravina				\$38.46
	1	6 Contributor address; City; State; Zip Code		1		
	I					
	l					
		Evansville, IN 47708	-			
8		upation / Job title (See Instructions)	9 Employer (See Instructions	3)		
	Technology :	Software Engineer Sr	OneMain Holdings Inc.	_		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	02/24/2023	Pentapati, Ravina				\$38.46
	I	Contributor address; City; State; Zip Code]		
	I					
	l	Evansville, IN 47708				
	Principal occur	upation / Job title (See Instructions)	Employer (See Instructions			
		Software Engineer Sr	OneMain Holdings Inc.	5)		
╞				_	Amount of Contribution (\$)	
	Date 03/10/2023	Full name of contributor out-of-state PAC (ID#: Pentapati, Ravina)		Amount of Contribution (\$)	\$38.46
	03/10/2023			•		ΨΟΟ. Π Ο
	I	Contributor address; City; State; Zip Code				
	l					
	l	Evansville, IN 47708				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Technology	Software Engineer Sr	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	03/24/2023	Pentapati, Ravina				\$38.46
	I	Contributor address; City; State; Zip Code		1		
	l					
	l					
		Evansville, IN 47708		Ĺ		
		Ipation / Job title (See Instructions)	Employer (See Instructions	5)		
		Software Engineer Sr	OneMain Holdings Inc.	_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	±00.40
	04/07/2023	Pentapati, Ravina				\$38.46
	l	Contributor address; City; State; Zip Code				
	I					
	l	Evansville, IN 47708				
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
		Software Engineer Sr	OneMain Holdings Inc.	"		
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	The Instru	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 68/92 Rpt: 71/109	
2	FILER NAME			3	Filer ID (Ethics Commission	ו Filers)
	OneMain Ho	oldings Inc. PAC			00084139	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	04/21/2023	Pentapati, Ravina				\$38.46
	1	6 Contributor address; City; State; Zip Code		1		
	I					
	l					
		Evansville, IN 47708	,			
8		Ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Technology :	Software Engineer Sr	OneMain Holdings Inc.	_		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	05/05/2023	Pentapati, Ravina				\$38.46
	I	Contributor address; City; State; Zip Code]		
	I					
	l	Evansville, IN 47708				
_	Principal occur	ipation / Job title (See Instructions)	Employer (See Instructions			
		Software Engineer Sr	OneMain Holdings Inc.	3)		
╞				_	Amount of Contribution (\$)	
	Date 05/19/2023	Full name of contributor out-of-state PAC (ID#: Pentapati, Ravina)		Amount of Contribution (\$)	\$38.46
	0011012020	· · · · · · · · · · · · · · · · · · ·		•		ΨΟΟ. Π Ο
	I	Contributor address; City; State; Zip Code				
	l					
	l	Evansville, IN 47708				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Technology	Software Engineer Sr	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	06/02/2023	Pentapati, Ravina				\$38.46
	I	Contributor address; City; State; Zip Code		1		
	l					
	l					
		Evansville, IN 47708		Ĺ		
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
		Software Engineer Sr	OneMain Holdings Inc.	_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	±00.40
	06/16/2023	Pentapati, Ravina				\$38.46
	l	Contributor address; City; State; Zip Code				
	I					
	l	Evansville, IN 47708				
\vdash	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
		Software Engineer Sr	OneMain Holdings Inc.	"		
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 69/92 Rpt: 72/109	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	OneMain Hc	oldings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	06/30/2023	Pentapati, Ravina				\$38.46
		6 Contributor address; City; State; Zip Code		1		
		Evansville, IN 47708				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Technology	Software Engineer Sr	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	01/13/2023	Perry, Christina				\$19.23
	Contributor address; City; State; Zip Code		1			
		Steubenville, OH 43952				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	Branch Mgr_	_11553	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	01/27/2023	Perry, Christina				\$19.23
		Contributor address; City; State; Zip Code		1		
		Steubenville, OH 43952				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Branch Mgr_	_11553	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	02/10/2023	Perry, Christina				\$19.23
		Contributor address; City; State; Zip Code		1		
		Steubenville, OH 43952				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Branch Mgr_	_11553	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	02/24/2023	Perry, Christina				\$19.23
		Contributor address; City; State; Zip Code		1		
		Steubenville, OH 43952				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Branch Mgr_	_11553	OneMain Holdings Inc.			
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 70/92 Rpt: 73/109	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	OneMain Hc	oldings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	03/10/2023	Perry, Christina				\$19.23
	I	6 Contributor address; City; State; Zip Code		1		
		Steubenville, OH 43952				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Branch Mgr_	_11553	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	03/24/2023	Perry, Christina				\$19.23
	I	Contributor address; City; State; Zip Code		ł		
		Steubenville, OH 43952				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	 3)		
	Branch Mgr_	_11553	OneMain Holdings Inc.			
╞	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	04/07/2023	Perry, Christina			· · · · · · · · · · · · · · · · · · ·	\$19.23
		Contributor address; City; State; Zip Code		ł		-
		Steubenville, OH 43952				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Branch Mgr_	_11553	OneMain Holdings Inc.			
╞	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	04/21/2023	Perry, Christina				\$19.23
	•	Contributor address; City; State; Zip Code		\cdot		Ŧ -
		Steubenville, OH 43952				
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	Branch Mgr_		OneMain Holdings Inc.			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	05/05/2023	Perry, Christina			· · · · · · · · · · · · · · · · · · ·	\$19.23
	I	Contributor address; City; State; Zip Code		1		
		Steubenville, OH 43952				
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Branch Mgr		OneMain Holdings Inc.	,		
		<u> </u>				

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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 71/92 Rpt: 74/109	
2	FILER NAME			3	Filer ID (Ethics Commission	ו Filers)
	OneMain Ho	oldings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	05/19/2023	Perry, Christina				\$19.23
		6 Contributor address; City; State; Zip Code		1		
	I					
	l					
Ļ		Steubenville, OH 43952		Ĺ		
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Branch Mgr_		OneMain Holdings Inc.	—		
	Date	Full name of contributor out-of-state PAC (ID#:	:)		Amount of Contribution (\$)	
	06/02/2023					\$19.23
	I	Contributor address; City; State; Zip Code				
	I					
	I	Steubenville, OH 43952				
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ال</u>		
	Branch Mgr_		OneMain Holdings Inc.	"		
╞	Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
	06/16/2023	Perry, Christina				\$19.23
	00/10/2020	Contributor address; City; State; Zip Code		•		Ψ±0.20
	I	Communication address, only, state, zip code				
	l					
	I	Steubenville, OH 43952				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Branch Mgr_	_11553	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	·)	Γ	Amount of Contribution (\$)	
	06/30/2023	Perry, Christina				\$19.23
	I	Contributor address; City; State; Zip Code		1		
	I					
	I					
	Drivelasov	Steubenville, OH 43952		ŕ		
	Principal occu Branch Mgr	ipation / Job title (See Instructions)	Employer (See Instructions OneMain Holdings Inc.	3)		
				—		
	Date	Full name of contributor out-of-state PAC (ID#:	:)		Amount of Contribution (\$)	¢10.00
	01/13/2023	Santosuosso, John				\$19.23
		Contributor address; City; State; Zip Code				
	I					
	l	Washington, DC 20001				
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	L 5)		
		Software Engineer	OneMain Holdings Inc.	.,		
⊢						

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 72/92 Rpt: 75/109	
2 FILER NAME			3 Filer ID (Ethics Commission File	arc)
	oldings Inc. PAC		00084139	:13)
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
01/27/2023	Santosuosso, John		\$	519.23
	6 Contributor address; City; State; Zip Code			
	Washington, DC 20001			
	upation / Job title (See Instructions)	9 Employer (See Instructions))	
Technology	Software Engineer	OneMain Holdings Inc.		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
02/10/2023	Santosuosso, John		\$	519.23
	Contributor address; City; State; Zip Code			
	Washington, DC 20001			
	upation / Job title (See Instructions)	Employer (See Instructions))	
Technology	Software Engineer	OneMain Holdings Inc.		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
02/24/2023	Santosuosso, John		\$	\$19.23
	Contributor address; City; State; Zip Code			
	Washington, DC 20001		-	
-	upation / Job title (See Instructions)	Employer (See Instructions))	
Téchnology	Software Engineer	OneMain Holdings Inc.		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
03/10/2023	Santosuosso, John		\$	\$19.23
	Contributor address; City; State; Zip Code			
	Weshington DC 20001			
Dringingloog	Washington, DC 20001		\	
-	upation / Job title (See Instructions) Software Engineer	Employer (See Instructions) OneMain Holdings Inc.)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	10.00
03/24/2023	Santosuosso, John		\$	519.23
	Contributor address; City; State; Zip Code			
	Washington, DC 20001			
Dringingloog	-			
-	upation / Job title (See Instructions) Software Engineer	Employer (See Instructions) OneMain Holdings Inc.)	
Теспноюду	Soltware Engineer			

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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 73/92 Rpt: 76/109	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
		oldings Inc. PAC		Ĺ	00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	04/07/2023	Santosuosso, John	1			\$19.23
	,	6 Contributor address; City; State; Zip Code	1	1		
	1		1			ļ
	,		1			
		Washington, DC 20001	!			
8		upation / Job title (See Instructions)	9 Employer (See Instructions)	3)		
	Technology	Software Engineer	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:	:)	Γ	Amount of Contribution (\$)	
	04/21/2023	Santosuosso, John	1			\$19.23
	,	Contributor address; City; State; Zip Code	1	1		ļ
	,		1			ļ
	,		1			
		Washington, DC 20001				
	•	upation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Technology ?	Software Engineer	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	05/05/2023	Santosuosso, John	1			\$19.23
	,	Contributor address; City; State; Zip Code	1	1		
	,		1			
	1		1			
		Washington, DC 20001				
		upation / Job title (See Instructions)	Employer (See Instructions)	3)		
	Technology :	Software Engineer	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	05/19/2023	Santosuosso, John				\$19.23
	1	Contributor address; City; State; Zip Code		1		
	,					
	1		1			
		Washington, DC 20001				
	•	upation / Job title (See Instructions)	Employer (See Instructions)	3)		
	Technology 9	Software Engineer	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/02/2023	Santosuosso, John				\$19.23
	1	Contributor address; City; State; Zip Code	1	1		
	1		1			
	1		1			
		Washington, DC 20001				
		upation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Technology '	Software Engineer	OneMain Holdings Inc.	_		

The Instruc	tion Guide explains how to complete	e this form.	1 Total pages Schedule A1: Sch: 74/92 Rpt: 77/109
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	dings Inc. PAC		00084139
4 Date	5 Full name of contributor out-of-state P	PAC (ID#:)	7 Amount of Contribution (\$)
06/16/2023	Santosuosso, John		\$19
	6 Contributor address; City; State; Zip Code		
	Washington, DC 20001		
8 Principal occup	pation / Job title (See Instructions)	9 Employer (See Instruction	ns)
	Software Engineer	OneMain Holdings Inc.	
Date	Full name of contributor Out-of-state P	PAC (ID#:)	Amount of Contribution (\$)
06/30/2023	Santosuosso, John	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$19
	Washington, DC 20001		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ns)
Technology S	Software Engineer	OneMain Holdings Inc.	
Date	Full name of contributor out-of-state P	PAC (ID#:)	Amount of Contribution (\$)
01/13/2023	Schulz, Dave		\$38
	Contributor address; City; State; Zip Code		
	New York, NY 10017		
	pation / Job title (See Instructions)	Employer (See Instruction	,
SVP Treasure	ər	OneMain Holdings Inc.	<u>. </u>
Date	Full name of contributor out-of-state P	PAC (ID#:)	Amount of Contribution (\$)
01/27/2023	Schulz, Dave		\$38
ĺ	Contributor address; City; State; Zip Code		
	New York, NY 10017		
	pation / Job title (See Instructions)	Employer (See Instruction	
SVP Treasure	-	OneMain Holdings Inc.	
Date	Full name of contributor out-of-state P	PAC (ID#:)	Amount of Contribution (\$)
02/10/2023	Schulz, Dave		
	Contributor address; City; State; Zip Code		
	Now York NV 10017		
Dringing oppur	New York, NY 10017	Employer (Soo Instruction	
SVP Treasure	pation / Job title (See Instructions)	Employer (See Instruction	
SVF IIEasun		OneMain Holdings Inc.	

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	The Instru	ction Guide explains how to complete t	his form.	1	Total pages Schedule A1: Sch: 75/92 Rpt: 78/109	
2	FILER NAME			3	Filer ID (Ethics Commission	ו Filers)
	OneMain Ho	oldings Inc. PAC			00084139	
4	Date 02/24/2023	5 Full name of contributor out-of-state PAC Schulz, Dave)	7	Amount of Contribution (\$)	\$38.46
	0212412025					φ30.40
		6 Contributor address; City; State; Zip Code New York, NY 10017				
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	SVP Treasu	/er	OneMain Holdings Inc.			
⊨	Date	Full name of contributor out-of-state PAC	C (ID#:)		Amount of Contribution (\$)	
	03/10/2023	Schulz, Dave				\$38.46
		Contributor address; City; State; Zip Code				
		New York, NY 10017				
		ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	SVP Treasu	/er	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC	(ID#:)	Τ	Amount of Contribution (\$)	
	03/24/2023	Schulz, Dave				\$38.46
		Contributor address; City; State; Zip Code New York, NY 10017				
\vdash	Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	SVP Treasu		OneMain Holdings Inc.	,		
	Date 04/07/2023	Full name of contributor out-of-state PAC Schulz, Dave Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$38.46
		New York, NY 10017				
		ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	SVP Treasur	/er	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC	(ID#:)	Ī	Amount of Contribution (\$)	
	04/21/2023	Schulz, Dave				\$38.46
		Contributor address; City; State; Zip Code New York, NY 10017				
\vdash	Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	SVP Treasur		OneMain Holdings Inc.	-,		
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2	FILER NAME			3	Filer ID (Ethics Commission	ו Filers)
	OneMain Ho	oldings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC	; (ID#:)	7	Amount of Contribution (\$)	
	05/05/2023	Schulz, Dave				\$38.46
		6 Contributor address; City; State; Zip Code				
Ļ		New York, NY 10017		Ĺ		
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	SVP Treasu		OneMain Holdings Inc.			
	Date		(ID#:)		Amount of Contribution (\$)	
	05/19/2023					\$38.46
		Contributor address; City; State; Zip Code				
		New York, NY 10017				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	SVP Treasur		OneMain Holdings Inc.	ς,		
╞	Date	Full name of contributor Out-of-state PAC		Т	Amount of Contribution (\$)	
	06/02/2023	Schulz, Dave	(ID#)			\$38.46
	00,02,222			·		Ŧ ♥ =
		New York, NY 10017				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	SVP Treasu	er	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC	; (ID#:)	T	Amount of Contribution (\$)	
	06/16/2023	Schulz, Dave				\$38.46
		Contributor address; City; State; Zip Code		1		
	Dringing occu	New York, NY 10017	Employer (Soo Instruction	<u> </u>		
	SVP Treasu	pation / Job title (See Instructions)	Employer (See Instructions OneMain Holdings Inc.	S)		
						
	Date 06/30/2023	Full name of contributor out-of-state PAC	(ID#:)		Amount of Contribution (\$)	\$96.15
	00/30/2023	Schulz, Dave				Φ 90.T0
		Contributor address; City; State; Zip Code				
		New York, NY 10017				
	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	SVP Treasu		OneMain Holdings Inc.			
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2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
-		oldings Inc. PAC		[00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID#)	7	Amount of Contribution (\$)	
	01/13/2023	Sweatt, Timothy				\$38.46
	1	6 Contributor address; City; State; Zip Code		1		
	l					
	I					
		Fort Mill, SC 29715				
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		ļ
	VP/D Collect	.ions	OneMain Holdings Inc.	_		
	Date	Full name of contributor out-of-state PAC (ID#	t:)		Amount of Contribution (\$)	
	01/27/2023	Sweatt, Timothy				\$38.46
	Contributor address; City; State; Zip Code				ļ	
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	I	5-4 Mill CC 20715				
	Drizsingl oppu	Fort Mill, SC 29715	Employer (Cool Instructions			
	VP/D Collect	ipation / Job title (See Instructions) tions	Employer (See Instructions OneMain Holdings Inc.	3)		
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	Date	Full name of contributor out-of-state PAC (ID#	:)		Amount of Contribution (\$)	÷22.40
	02/10/2023	Sweatt, Timothy				\$38.46
	I	Contributor address; City; State; Zip Code				
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	l	Fort Mill, SC 29715				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	L 5)		
	VP/D Collect		OneMain Holdings Inc.	.,		
⊨	Date	Full name of contributor out-of-state PAC (ID#		Γ	Amount of Contribution (\$)	
	02/24/2023	Sweatt, Timothy	·/		/ inount of contraction (+)	\$38.46
	•	Contributor address; City; State; Zip Code				+ - -
	I					
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	I	Fort Mill, SC 29715				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ل</u> ے		
	VP/D Collect	tions	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#)	Γ	Amount of Contribution (\$)	
	03/10/2023	Sweatt, Timothy				\$38.46
	I	Contributor address; City; State; Zip Code		1		
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		Fort Mill, SC 29715				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/D Collect	ions	OneMain Holdings Inc.			
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6 Contributor address; City; State; Zip Code Fort Mill, SC 29715 9 8 Principal occupation / Job title (See Instructions) 0 04/07/2023 Full name of contributor out-of-state PAC (ID#	4	Date	5 Full name of contributor Out-of-state PAC (ID#	<i>t</i> :)	7	Amount of Contribution (\$)	
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Contributor address; City, State; Zip Code Fort Mill, SC 29715 Principal occupation / Job title (See Instructions) OAt21/2023 Full name of contributor Out-of-state PAC (Dor) Amount of Contribution (\$) O4/21/2023 Fort Mill, SC 29715 Principal occupation / Job title (See Instructions) OneMain Holdings Inc. Principal occupation / Job title (See Instructions) OneMain Holdings Inc. Orb/D2/2023 Fort Mill, SC 29715 Principal occupation / Job title (See Instructions) OneMain Holdings Inc. Obj/05/2023 Sweatt, Timothy Contributor address; City, State; Zip Code Fort Mill, SC 29715 Principal occupation / Job title (See Instructions) Of/05/2023 Sweatt, Timothy Contributor address; City, State; Zip Code Fort Mill, SC 29715 Principal occupation / Job title (See Instructions) OneMain Holdings Inc. Obj/19/2023 Full name of contributor Out-of-state PAC (Der				£)		Amount of Contribution (\$)	¢00.40
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04/21/2023 Sweatt, Timothy \$38.46 Contributor address; City; State; Zip Code Fort Mill, SC 29715 Principal occupation / Job title (See Instructions) Employer (See Instructions) VP/D Collections OneMain Holdings Inc. Date Full name of contributor out-of-state PAC (ID#:						Amount of Contribution (\$)	
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Contributor address; City; State; Zip Code Fort Mill, SC 29715 Principal occupation / Job title (See Instructions) Employer (See Instructions)		Date	Full name of contributor out-of-state PAC (ID#	<i>t</i> :)	Γ	Amount of Contribution (\$)	
Fort Mill, SC 29715 Principal occupation / Job title (See Instructions) Employer (See Instructions)		05/19/2023	Sweatt, Timothy				\$38.46
Principal occupation / Job title (See Instructions) Employer (See Instructions)		I	Contributor address; City; State; Zip Code	1	1		
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 79/92 Rpt: 82/109	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	OneMain Ho	oldings Inc. PAC			00084139	-
4	Date 06/02/2023	5 Full name of contributor out-of-state PAC (ID#: Sweatt, Timothy		7	Amount of Contribution (\$)	\$38.46
		6 Contributor address; City; State; Zip Code Fort Mill, SC 29715				
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	VP/D Collect	ions	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/16/2023	Sweatt, Timothy				\$38.46
		Contributor address; City; State; Zip Code				
L		Fort Mill, SC 29715	1 <u>.</u>			
		ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	VP/D Collect	.ions	OneMain Holdings Inc.	<u>.</u>		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/30/2023	Sweatt, Timothy				\$38.46
		Contributor address; City; State; Zip Code Fort Mill, SC 29715				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	VP/D Collect	tions	OneMain Holdings Inc.			
	Date 01/13/2023	Full name of contributor out-of-state PAC (ID#: Timlen, Donna Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$38.46
	ļ	Baltimore, MD 21202				
	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	1 S)		
	-	f Compliance & Controls Proc	OneMain Holdings Inc.			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	01/27/2023	Timlen, Donna				\$38.46
		Contributor address; City; State; Zip Code				
L		Baltimore, MD 21202				
		ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	SVP Head of	f Compliance & Controls Proc	OneMain Holdings Inc.			

	The Instrue	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 80/92 Rpt: 83/109	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	OneMain Ho	ldings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	02/10/2023	Timlen, Donna				\$38.46
		6 Contributor address; City; State; Zip Code				
		Baltimore ND 21202				
ŀ	Drincipal occu	Baltimore, MD 21202 pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
l°		f Compliance & Controls Proc	OneMain Holdings Inc.)		
╞			Shemain Holdings inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	¢20.46
	02/24/2023 Timlen, Donna				\$38.46	
		Contributor address; City; State; Zip Code				
		Baltimore, MD 21202				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	SVP Head of	f Compliance & Controls Proc	OneMain Holdings Inc.			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	03/10/2023	Timlen, Donna				\$38.46
		Contributor address; City; State; Zip Code				
		Baltimore, MD 21202				
		pation / Job title (See Instructions)	Employer (See Instructions)		
	SVP Head of	f Compliance & Controls Proc	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	03/24/2023	Timlen, Donna				\$38.46
		Contributor address; City; State; Zip Code				
		Deltimore MD 01000				
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		pation / Job title (See Instructions) f Compliance & Controls Proc	Employer (See Instructions OneMain Holdings Inc.)		
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	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	#00.40
	04/07/2023	Timlen, Donna				\$38.46
		Contributor address; City; State; Zip Code				
		Baltimore, MD 21202				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
		f Compliance & Controls Proc	OneMain Holdings Inc.	,		
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	The Instrue	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 81/92 Rpt: 84/109	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	OneMain Ho	ldings Inc. PAC			00084139	,
4	Date	5 Full name of contributor Dut-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	04/21/2023	Timlen, Donna				\$38.46
		6 Contributor address; City; State; Zip Code		1		
		Baltimore, MD 21202				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	L;)		
		f Compliance & Controls Proc	OneMain Holdings Inc.	,		
╞	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	05/05/2023	Timlen, Donna)		/	\$38.46
		Contributor address; City; State; Zip Code				
		Baltimore, MD 21202				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	SVP Head of	f Compliance & Controls Proc	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	05/19/2023	Timlen, Donna				\$38.46
		Contributor address; City; State; Zip Code				
		Baltimore, MD 21202				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
		f Compliance & Controls Proc	OneMain Holdings Inc.			
╞	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	06/02/2023	Timlen, Donna				\$38.46
		Contributor address; City; State; Zip Code				
		Baltimore, MD 21202				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	SVP Head of	f Compliance & Controls Proc	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	06/16/2023	Timlen, Donna				\$38.46
		Contributor address; City; State; Zip Code				
		Poltimoro MD 21202				
\vdash	Principal occu	Baltimore, MD 21202 pation / Job title (See Instructions)	Employer (See Instructions	 :)		
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	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 82/92 Rpt: 85/109	
2	FILER NAME			3	Filer ID (Ethics Commission	1 Filers)
	OneMain Ho	Idings Inc. PAC			00084139	,
4	Date	5 Full name of contributor Dut-of-state PAC (ID)	#:)	7	Amount of Contribution (\$)	
	06/30/2023	Timlen, Donna				\$38.46
		6 Contributor address; City; State; Zip Code		1		
		Baltimore, MD 21202	. <u>.</u>			
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	SVP Head o	f Compliance & Controls Proc	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID:	#:)	Ī	Amount of Contribution (\$)	
	01/13/2023	Woodyard, Tracey				\$19.23
	Contributor address; City; State; Zip Code			1		
		London, KY 40741				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/MD Colle	ection Strategy	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID;)	Γ	Amount of Contribution (\$)	
	01/27/2023	Woodyard, Tracey				\$19.23
		Contributor address; City; State; Zip Code		1		
		London, KY 40741				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/MD Colle	ection Strategy	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID)	#:)	Γ	Amount of Contribution (\$)	
	02/10/2023	Woodyard, Tracey				\$19.23
		Contributor address; City; State; Zip Code		1		
		London, KY 40741				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	VP/MD Colle	ection Strategy	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID;	#:)		Amount of Contribution (\$)	
	02/24/2023	Woodyard, Tracey				\$19.23
		Contributor address; City; State; Zip Code		1		
		London, KY 40741				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/MD Colle	ection Strategy	OneMain Holdings Inc.			
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The Instruc	ction Guide explains how to complete this	form.	Sch: 83/92 Rpt: 86/109	
2 FILER NAME			3 Filer ID (Ethics Commission	ı Filers)
OneMain Ho	Idings Inc. PAC		00084139	-
4 Date	5 Full name of contributor out-of-state PAC (ID#	f:)	7 Amount of Contribution (\$)	
03/10/2023	Woodyard, Tracey			\$19.23
	6 Contributor address; City; State; Zip Code			
2 Duin singly agon	London, KY 40741		<u>`</u>	
-	pation / Job title (See Instructions) ection Strategy	9 Employer (See Instructions) OneMain Holdings Inc.)	
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Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	* 10.00
03/24/2023	Woodyard, Tracey			\$19.23
	Contributor address; City; State; Zip Code			
	London, KY 40741			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
	ection Strategy	OneMain Holdings Inc.	,	
Date	Full name of contributor out-of-state PAC (ID#	<i>‡</i> :)	Amount of Contribution (\$)	
04/07/2023	Woodyard, Tracey	·		\$19.23
	Contributor address; City; State; Zip Code			
	London, KY 40741			
	pation / Job title (See Instructions)	Employer (See Instructions	;)	
VP/MD Colle	ection Strategy	OneMain Holdings Inc.		
Date	Full name of contributor out-of-state PAC (ID#	t:)	Amount of Contribution (\$)	
04/21/2023	Woodyard, Tracey			\$19.23
	Contributor address; City; State; Zip Code			
	London, KY 40741			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
	ection Strategy	OneMain Holdings Inc.	/	
Date	Full name of contributor out-of-state PAC (ID#		Amount of Contribution (\$)	
05/05/2023	Woodyard, Tracey	·	,	\$19.23
	Contributor address; City; State; Zip Code			
	London, KY 40741			
	pation / Job title (See Instructions)	Employer (See Instructions	(i)	
VP/MD Colle	ection Strategy	OneMain Holdings Inc.		

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 84/92 Rpt: 87/109	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
		oldings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	05/19/2023	Woodyard, Tracey				\$19.23
		6 Contributor address; City; State; Zip Code		1		
Ļ		London, KY 40741		Ĺ		
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
		ection Strategy	OneMain Holdings Inc.	_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/02/2023	Woodyard, Tracey				\$19.23
		Contributor address; City; State; Zip Code				
		London, KY 40741				
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
		ection Strategy	OneMain Holdings Inc.	<i>>)</i>		
╞	Date			Г	Amount of Contribution (\$)	
	Dale 06/16/2023	Full name of contributor out-of-state PAC (ID#: Woodyard, Tracey)		Amount of Contribution (\$)	\$19.23
	00/10/2020			-		Ψ10.20
		Contributor address; City; State; Zip Code				
		London, KY 40741				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	VP/MD Colle	ection Strategy	OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/30/2023	Woodyard, Tracey				\$19.23
		Contributor address; City; State; Zip Code		1		
		London, KY 40741	- · · · · · · · ·	Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
		ection Strategy	OneMain Holdings Inc.	_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	÷20.40
	01/13/2023	Wright, Natasha				\$38.46
		Contributor address; City; State; Zip Code				
		Gahanna, OH 43230				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> נו		
	Branch Mgr_		OneMain Holdings Inc.	<i>,</i>		
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2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		Idings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	01/27/2023	Wright, Natasha				\$38.46
		6 Contributor address; City; State; Zip Code		1		
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8	Principal occu Branch Mgr_	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
			OneMain Holdings Inc.	-		
	Date	—)		Amount of Contribution (\$)	±00.40
	02/10/2023					\$38.46
		Contributor address; City; State; Zip Code				
		Gahanna, OH 43230				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	Branch Mgr_		OneMain Holdings Inc.	''		
╞	Date	- Full name of contributor Out-of-state PAC (ID#:_		Γ	Amount of Contribution (\$)	
	02/24/2023	Wright, Natasha			Allount of Contribution (4)	\$38.46
	0_,					TV- 111
		Gahanna, OH 43230				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Branch Mgr_	_10156	OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	03/10/2023	Wright, Natasha				\$38.46
		Contributor address; City; State; Zip Code				
	Drivel easy	Gahanna, OH 43230		Ĺ		
	•	pation / Job title (See Instructions)	Employer (See Instructions OneMain Holdings Inc.	5)		
	Branch Mgr_					
	Date	Full name of contributor out-of-state PAC (ID#:))		Amount of Contribution (\$)	#20.40
	03/24/2023	Wright, Natasha				\$38.46
		Contributor address; City; State; Zip Code				
		Gahanna, OH 43230				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	Branch Mgr_		OneMain Holdings Inc.	,		
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	The Instrue	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 86/92 Rpt: 89/109	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		Idings Inc. PAC			00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	04/07/2023	Wright, Natasha				\$38.46
		6 Contributor address; City; State; Zip Code				
Ļ	<u> </u>	Gahanna, OH 43230		Ļ		
8			9 Employer (See Instructions	;)		
	Branch Mgr_	_10156	OneMain Holdings Inc.	_		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	04/21/2023	Wright, Natasha				\$38.46
	Contributor address; City; State; Zip Code					
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		pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Branch Mgr_		OneMain Holdings Inc.	—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	05/05/2023	Wright, Natasha				\$38.46
		Contributor address; City; State; Zip Code				
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		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Branch Mgr_		OneMain Holdings Inc.	—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	05/19/2023	Wright, Natasha				\$38.46
		Contributor address; City; State; Zip Code				
		Cabanna OH 12220				
\vdash	Dringing occu	Gahanna, OH 43230 pation / Job title (See Instructions)	Employer (See Instructions	$\overline{\Gamma}$		
	Branch Mgr		Employer (See Instructions OneMain Holdings Inc.	9		
				—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	*****
	06/02/2023	Wright, Natasha				\$38.46
		Contributor address; City; State; Zip Code				
		Gahanna, OH 43230				
\vdash	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	$\sum_{i=1}^{n}$		
	Branch Mgr_		OneMain Holdings Inc.	9		
\vdash		.10130	One want i fordinge inter			

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	The Instru	ction Guide explains how to complete	this for	rm.	1	Total pages Schedule A1: Sch: 87/92 Rpt: 90/109	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	OneMain Ho	Idings Inc. PAC				00084139	
4	Date	5 Full name of contributor 🔲 out-of-state PA	AC (ID#:)	7	Amount of Contribution (\$)	
	06/16/2023	Wright, Natasha					\$38.46
		6 Contributor address; City; State; Zip Code					
		Gahanna, OH 43230					
8		pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Branch Mgr_	_10156		OneMain Holdings Inc.			
Γ	Date	— —	AC (ID#:)		Amount of Contribution (\$)	
	06/30/2023	Wright, Natasha					\$38.46
	Contributor address; City; State; Zip Code						
	ļ						
	ļ	Cabanna OH 42220					
\vdash	Dringingl occu	Gahanna, OH 43230		Employer (Soo Instructions	<u> </u>		
	Branch Mgr	pation / Job title (See Instructions) 10156		Employer (See Instructions OneMain Holdings Inc.	9		
╞							
	Date 01/13/2023	Full name of contributor out-of-state PA Young, Shannon	4C (ID#:)		Amount of Contribution (\$)	\$38.46
	01/13/2023						4 30.40
		Contributor address; City; State; Zip Code					
		Webster, MN 55088					
\vdash	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	VP/RD Bran	ch Operations		OneMain Holdings Inc.			
╞	Date	Full name of contributor 🔲 out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	01/27/2023	Young, Shannon					\$38.46
		Contributor address; City; State; Zip Code					
	ļ						
	ļ						
		Webster, MN 55088					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	VP/RD Bran	ch Operations		OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PA)		Amount of Contribution (\$)	
	02/10/2023	Young, Shannon					\$38.46
		Contributor address; City; State; Zip Code					
		Webster, MN 55088					
┝	Dringing occu			Employer (See Instructions	<u> </u>		
		pation / Job title (See Instructions) ch Operations		Employer (See Instructions OneMain Holdings Inc.	9		
\vdash				One wain Froungo mo.			

	The Instru	ction Guide explains how to complete t	this fo	orm.	1	Total pages Schedule A1: Sch: 88/92 Rpt: 91/109	
2	FILER NAME				3	Filer ID (Ethics Commission	ı Filers)
	OneMain Ho	oldings Inc. PAC				00084139	
4	Date	5 Full name of contributor Out-of-state PAC	AC (ID#:)	7	Amount of Contribution (\$)	
	02/24/2023	Young, Shannon					\$38.46
	I	6 Contributor address; City; State; Zip Code					
	I	1					
	I	Webster, MN 55088					
8				9 Employer (See Instructions	<u> </u>		
Č		ich Operations	ľ	OneMain Holdings Inc.	ワ		
⊨			2 /12 //:		—	Associated Contribution (\$)	
	Date 03/10/2023		νC (ID#:)		Amount of Contribution (\$)	\$38.46
	03/10/2023						\$ 30.40
	Contributor address; City; State; Zip Code						
	I	1					
	I	Webster, MN 55088					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	ل ۱		
		ich Operations		OneMain Holdings Inc.	·)		
┝─	Date	Full name of contributor out-of-state PAC			—	Amount of Contribution (\$)	
	03/24/2023	Young, Shannon	ιC (ID#)			\$38.46
	0312412020						Ψυυ.τυ
	I	Contributor address; City; State; Zip Code					
	I	1					
	I	Webster, MN 55088					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	VP/RD Bran	ch Operations		OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC	AC (ID#:)	Γ	Amount of Contribution (\$)	
	04/07/2023	Young, Shannon					\$38.46
	I	Contributor address; City; State; Zip Code					
	I						
	I	1					
		Webster, MN 55088					
\square	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	;)		
	VP/RD Bran	ich Operations		OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC	AC (ID#:)	Γ	Amount of Contribution (\$)	
	04/21/2023	Young, Shannon					\$38.46
		Contributor address; City; State; Zip Code					
	I	1					
	I	1					
		Webster, MN 55088					
		ipation / Job title (See Instructions)		Employer (See Instructions	;)		
	VP/RD Bran	ich Operations		OneMain Holdings Inc.			

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The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 89/92 Rpt: 92/109	
2 FILER NAME			3 Filer ID (Ethics Commission F	Filers)
	oldings Inc. PAC		00084139	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
05/05/2023	Young, Shannon			\$38.46
	6 Contributor address; City; State; Zip Code			
	Webster, MN 55088			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions))	
VP/RD Bran	ich Operations	OneMain Holdings Inc.		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
05/19/2023	Young, Shannon			\$38.46
	Contributor address; City; State; Zip Code			
	Webster, MN 55088			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions))	
VP/RD Bran	ich Operations	OneMain Holdings Inc.		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
06/02/2023	Young, Shannon			\$38.46
	Contributor address; City; State; Zip Code			
	Webster, MN 55088			
	upation / Job title (See Instructions)	Employer (See Instructions))	
VP/RD Bran	ich Operations	OneMain Holdings Inc.		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
06/16/2023	Young, Shannon			\$38.46
	Contributor address; City; State; Zip Code			
	Michotor MNI EE000			
Drippingl.000	Webster, MN 55088	Employer (See Instructions	N	
	upation / Job title (See Instructions) Ich Operations	Employer (See Instructions) OneMain Holdings Inc.)	
	·			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	±00.40
06/30/2023	Young, Shannon			\$38.46
	Contributor address; City; State; Zip Code			
	Webster, MN 55088			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	N	
	ich Operations	OneMain Holdings Inc.)	
		Onemain Fromings mo.		

	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 90/92 Rpt: 93/109	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		Idings Inc. PAC		-	00084139	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	01/13/2023	Zaragoza, Adrian				\$38.46
		6 Contributor address; City; State; Zip Code				
Ļ	Dringinal agou	Tempe, AZ 85282	Employer (Soo Instructions	<u> </u>		
8	Principal occu Sales Mgr	pation / Job title (See Instructions)	 Employer (See Instructions OneMain Holdings Inc.)		
╘	_					
	Date	—)		Amount of Contribution (\$)	* 20.40
	01/27/2023					\$38.46
		Contributor address; City; State; Zip Code				
		Tempe, AZ 85282				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Sales Mgr		OneMain Holdings Inc.	,		
╞	Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
	02/10/2023	Zaragoza, Adrian	/			\$38.46
	02/10/2020					ΨΟΟ
		Tempe, AZ 85282				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Sales Mgr		OneMain Holdings Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/24/2023	Zaragoza, Adrian				\$38.46
		Contributor address; City; State; Zip Code				
		Tempe, AZ 85282				
	•	pation / Job title (See Instructions)	Employer (See Instructions)		
	Sales Mgr		OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	03/10/2023	Zaragoza, Adrian				\$38.46
		Contributor address; City; State; Zip Code				
		Tempe, AZ 85282				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ן</u>		
	Sales Mgr		OneMain Holdings Inc.)		
\vdash						
1						

	The Instruc	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 91/92 Rpt: 94/109	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		Idings Inc. PAC			00084139	
4	Date	5 Full name of contributor Out-of-state PAC (ID	#:)	7	Amount of Contribution (\$)	
	03/24/2023	Zaragoza, Adrian				\$38.46
		6 Contributor address; City; State; Zip Code		1		
Ļ		Tempe, AZ 85282		Ĺ		
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Sales Mgr		OneMain Holdings Inc.			
Γ	Date	Full name of contributor 🔲 out-of-state PAC (ID	#:)	Ţ	Amount of Contribution (\$)	
	04/07/2023	Zaragoza, Adrian				\$38.46
		Contributor address; City; State; Zip Code]		
		T				
	D 1 - size 1 a a a u	Tempe, AZ 85282		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Sales Mgr		OneMain Holdings Inc.			
	Date	Full name of contributor out-of-state PAC (ID	#:)		Amount of Contribution (\$)	
	04/21/2023	Zaragoza, Adrian				\$38.46
		Contributor address; City; State; Zip Code				
		Tompo A7 05202				
	Drizoinal agou	Tempe, AZ 85282		<u> </u>		
	Sales Mgr	pation / Job title (See Instructions)	Employer (See Instructions OneMain Holdings Inc.	5)		
╘				_		
	Date	Full name of contributor out-of-state PAC (ID	#:)		Amount of Contribution (\$)	*00 40
	05/05/2023	Zaragoza, Adrian				\$38.46
		Contributor address; City; State; Zip Code				
		Tempe, AZ 85282				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Sales Mgr		OneMain Holdings Inc.	5)		
╞				1		
	Date	Full name of contributor out-of-state PAC (ID	#:)		Amount of Contribution (\$)	400 A6
	05/19/2023	Zaragoza, Adrian				\$38.46
		Contributor address; City; State; Zip Code				
		Tempe, AZ 85282				
⊢	Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Sales Mgr		OneMain Holdings Inc.	>)		
\vdash	Ouldo Ingi					

The Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 92/92 Rpt: 95/109	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
OneMain Holdings Inc. PAC		00084139	
4 Date 5 Full name of contributor Out-of-state PAC (ID#:_	Date 5 Full name of contributor out-of-state PAC (ID#:)		
06/02/2023 Zaragoza, Adrian		\$38.46	
6 Contributor address; City; State; Zip Code			
Tempe, AZ 85282			
8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions	;)	
Sales Mgr	OneMain Holdings Inc.		
Date Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
06/16/2023 Zaragoza, Adrian		\$38.46	
Contributor address; City; State; Zip Code			
Tempe, AZ 85282			
Principal occupation / Job title (See Instructions)	Employer (See Instructions	;)	
Sales Mgr	OneMain Holdings Inc.		
Date Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
06/30/2023 Zaragoza, Adrian		\$38.46	
Contributor address; City; State; Zip Code			
Tempe, AZ 85282			
Principal occupation / Job title (See Instructions)	Employer (See Instructions	3)	
Sales Mgr	OneMain Holdings Inc.		

NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C4

	The Instru	cti	on Guide explains how to complete this form.	1	Total pages S Sch: 1/1 Rp	Schedule C4: ht: 96/109	
2	2 FILER NAME				Filer ID	(Ethics Commission Filers)	
	OneMain Ho	oldir	ngs Inc. PAC		00084139		
4	Date	5	Corporation / Labor Organization name	6	Amount (\$)		
	06/30/2023		OneMain Holdings Inc.				500.00

EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Gitt/Awards/Memorials Expense Printing Expense Travel Out of District								
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)								
Sch: 1/12 Rpt: 97/109	OneMain Holdings Inc. PAC 00084139								
4 Date	5 Payee name								
01/27/2023	Atlantic Union Bank								
6 Amount (\$)	7 Payee address; City; State; Zip Code								
\$15.00									
Expenditure from corporate funds	Richmond, VA 23219								
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Bank Service Charge (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank Service Charge 								
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held								
Date	Payee name								
03/07/2023	Atlantic Union Bank								
Amount (\$)	Payee address; City; State; Zip Code								
\$15.00	1051 East Cary St								
Expenditure from corporate funds	Richmond, VA 23219								
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Bank Service Charge (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank Service Charge 								
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held								
Date	Payee name								
03/27/2023	Atlantic Union Bank								
Amount (\$)	Payee address; City; State; Zip Code								
\$15.00	1051 East Cary St								
Expenditure from corporate funds	Richmond, VA 23219								
PURPOSE OF EXPENDITURE	Bank Service Charge								
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held								

EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Glft/Awards/Memorials Expense Printing Expense Travel Out of District							
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)							
Sch: 2/12 Rpt: 98/109	OneMain Holdings Inc. PAC 00084139							
4 Date	5 Payee name							
04/03/2023	Atlantic Union Bank							
6 Amount (\$)	7 Payee address; City; State; Zip Code							
\$15.00	1051 East Cary St							
Expenditure from corporate funds	Richmond, VA 23219							
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF EXPENDITURE	Bank Service Charge Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank Service Charge							
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
Date	Payee name							
04/21/2023	Atlantic Union Bank							
Amount (\$)	Payee address; City; State; Zip Code							
\$15.00	\$15.00 1051 East Cary St							
Expenditure from corporate funds	Richmond, VA 23219							
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Bank Service Charge (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank Service Charge 							
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held							
Date	Payee name							
04/25/2023	Atlantic Union Bank							
Amount (\$)	Payee address; City; State; Zip Code							
\$30.00	1051 East Cary St							
Expenditure from corporate funds	Richmond, VA 23219							
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Bank Service Charge (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank Service Charge 							
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							

EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Re Fees Office O Food/Beverage Expense Polling E Gift/Awards/Memorials Expense Printing	payment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense Expense Travel in District Byges/Contract Labor OTHER (enter a category not listed above)	e						
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Fil	lers)						
Sch: 3/12 Rpt: 99/109	OneMain Holdings Inc. PAC 00084139								
4 Date	5 Payee name								
05/17/2023	Atlantic Union Bank								
6 Amount (\$)	ount (\$) 7 Payee address; City; State; Zip Code								
\$15.00									
Expenditure from corporate funds									
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description							
OF EXPENDITURE	Bank Service Charge	Check if travel outside of Texas. Complete Schedule T.							
-		Check if Austin, TX, officeholder living expense Bank Service Charge							
		Bank Service Charge							
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught Office held							
Date	Payee name								
06/28/2023	Atlantic Union Bank								
Amount (\$)	Payee address; City; State; Zip C	Code							
\$15.00	1051 East Cary St								
Expenditure from corporate funds	Richmond, VA 23219								
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Bank Service Charge (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank Service Charge									
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H								
Date	Payee name								
05/03/2023	North Carolina State Board of Elections								
Amount (\$)	Payee address; City; State; Zip C	Code							
\$400.00	PO Box 27255								
Expenditure from corporate funds	Raleigh, NC 27611								
PURPOSE OF EXPENDITURE	OF Filing Fee								
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	ught Office held							

EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment									
1 Total pages Schedule F1:									
Sch: 4/12 Rpt:	2 FILER NAME 3 Filer ID (Ethics Commission OneMain Holdings Inc. PAC 00084139								
4 Date	Payee name								
01/07/2023	PayPal Inc.								
6 Amount (\$) \$0.92									
Expenditure from corporate funds	Mountain View, CA 94039								
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution 								
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H								
Date	Payee name								
01/17/2023	PayPal Inc.								
Amount (\$) \$2.90	Payee address; City; State; Zip Code D P.O. Box 7022								
Expenditure from corporate funds	Mountain View, CA 94039								
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution 								
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H								
Date	Payee name								
01/20/2023	PayPal Inc.								
Amount (\$) \$5.55	Payee address; City; State; Zip Code P.O. Box 7022								
Expenditure from corporate funds	Mountain View, CA 94039								
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution 								
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H								

EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment									
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)								
Sch: 5/12 Rpt:	OneMain Holdings Inc. PAC 00084139								
4 Date	5 Payee name								
01/27/2023	PayPal Inc.								
6 Amount (\$)									
\$1.69 P.O. Box 7022									
Expenditure from corporate funds	Mountain View, CA 94039								
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution									
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H								
Date	Payee name								
02/07/2023	PayPal Inc.								
Amount (\$)	Payee address; City; State; Zip Code								
\$0.92	P.O. Box 7022								
Expenditure from corporate funds	Mountain View, CA 94039								
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution 								
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H								
Date	Payee name								
02/17/2023	PayPal Inc.								
Amount (\$)	Payee address; City; State; Zip Code								
\$2.90	P.O. Box 7022								
Expenditure from corporate funds	Mountain View, CA 94039								
PURPOSE OF EXPENDITURE	OF Credit Card Processing Eee								
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H								

EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling Expense Travel in District By - Gift/Awards/Memorials Expense Printing Expense Travel Out of District	uipment & Related Expense							
1 Total pages Schedule F1:	L: 2 FILER NAME 3 Filer ID	(Ethics Commission Filers)							
Sch: 6/12 Rpt:	OneMain Holdings Inc. PAC 00084139								
4 Date	5 Payee name								
02/20/2023	PayPal Inc.								
6 Amount (\$)									
\$5.55 P.O. Box 7022									
Expenditure from corporate funds									
8 PURPOSE OF EXPENDITURE	OF Credit Card Processing Fee								
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O		d							
Date	Payee name								
02/27/2023	PayPal Inc.								
Amount (\$)	Payee address; City; State; Zip Code								
\$1.69 P.O. Box 7022									
Expenditure from corporate funds	Mountain View, CA 94039								
PURPOSE OF EXPENDITURE	OF Credit Card Processing Eee								
Complete <u>ONLY</u> if direct expenditure to benefit C/O	•	d							
Date	Payee name								
03/07/2023	PayPal Inc.								
Amount (\$)	Payee address; City; State; Zip Code								
\$29.39	P.O. Box 7022								
Expenditure from corporate funds	Mountain View, CA 94039								
PURPOSE OF EXPENDITURE	OF Credit Card Processing Eee								
Complete <u>ONLY</u> if direct expenditure to benefit C/O		d							

EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment									
1 Total pages Schedule F1:									
Sch: 7/12 Rpt:	OneMain Holdings Inc. PAC OneMain Holdings Inc. PAC								
4 Date 03/07/2023	Payee name PayPal Inc.								
6 Amount (\$) \$0.92									
Expenditure from corporate funds	Mountain View, CA 94039								
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution 								
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H								
Date	Payee name								
03/17/2023	PayPal Inc.								
Amount (\$) \$2.90	Payee address; City; State; Zip Code D P.O. Box 7022								
Expenditure from corporate funds	Mountain View, CA 94039								
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution 								
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H								
Date	Payee name								
03/20/2023	PayPal Inc.								
Amount (\$) \$5.55	Payee address; City; State; Zip Code								
Expenditure from corporate funds	Mountain View, CA 94039								
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution 								
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H								

EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment								
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)							
Sch: 8/12 Rpt:	OneMain Holdings Inc. PAC 00084139							
4 Date	5 Payee name							
03/27/2023	PayPal Inc.							
6 Amount (\$)	7 Payee address; City; State; Zip Code							
\$1.69								
Expenditure from corporate funds	Mountain View, CA 94039							
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF EXPENDITURE	Credit Card Processing Fee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
	PayPal fee for credit card contribution							
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held							
Date	Payee name							
04/07/2023	PayPal Inc.							
Amount (\$)	Payee address; City; State; Zip Code							
\$0.92 P.O. Box 7022								
Expenditure from corporate funds	Mountain View, CA 94039							
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee (b) Description (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution								
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held							
Date	Payee name							
04/17/2023	PayPal Inc.							
Amount (\$)	Payee address; City; State; Zip Code							
\$2.90	P.O. Box 7022							
Expenditure from corporate funds	Mountain View, CA 94039							
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF EXPENDITURE	Credit Card Processing Fee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution							
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held							

EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment									
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filer	s)							
Sch: 9/12 Rpt:	OneMain Holdings Inc. PAC 00084139								
4 Date	Payee name								
04/20/2023	PayPal Inc.								
6 Amount (\$)	7 Payee address; City; State; Zip Code								
\$5.55									
Expenditure from corporate funds	Mountain View, CA 94039								
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description								
EXPENDITURE	Credit Card Processing Fee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense								
	PayPal fee for credit card contribution								
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H								
Date	Payee name								
04/21/2023	PayPal Inc.								
Amount (\$)	Payee address; City; State; Zip Code								
\$29.39									
Expenditure from corporate funds	Mountain View, CA 94039								
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution 								
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held								
expenditure to benefit C/O	H								
Date	Payee name								
04/27/2023	PayPal Inc.								
Amount (\$)	Payee address; City; State; Zip Code								
\$1.69	P.O. Box 7022								
Expenditure from corporate funds	Mountain View, CA 94039								
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
OF EXPENDITURE	Credit Card Processing Fee Check if travel outside of Texas. Complete Schedule T.								
	Check if Austin, TX, officeholder living expense								
	PayPal fee for credit card contribution								
Complete ONU V if direct	Candidate/Officeholder name Office sought Office held								
Complete <u>ONLY</u> if direct expenditure to benefit C/O	5								

EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment								
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)							
Sch: 10/12 Rpt:	OneMain Holdings Inc. PAC 00084139							
4 Date	5 Payee name							
05/07/2023	Payee name PayPal Inc.							
6 Amount (\$)	7 Payee address; City; State; Zip Code							
\$0.92	P.O. Box 7022							
Expenditure from corporate funds	Mountain View, CA 94039							
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF EXPENDITURE	Credit Card Processing Fee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
	PayPal fee for credit card contribution							
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H							
Date	Payee name							
05/17/2023	PayPal Inc.							
Amount (\$)	Payee address; City; State; Zip Code							
\$2.90 P.O. Box 7022								
Expenditure from corporate funds	Mountain View, CA 94039							
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution								
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held							
expenditure to benefit C/O	H							
Date	Payee name							
05/20/2023	PayPal Inc.							
Amount (\$)	Payee address; City; State; Zip Code							
\$5.55	P.O. Box 7022							
ψ0.00								
Expenditure from corporate funds	Mountain View, CA 94039							
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description							
EXPENDITURE	Credit Card Processing Fee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
	PayPal fee for credit card contribution							
Complete ONLV if direct	Candidate/Officeholder name Office sought Office held							
Complete <u>ONLY</u> if direct expenditure to benefit C/O	5							

EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment									
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)								
Sch: 11/12 Rpt:	OneMain Holdings Inc. PAC 00084139								
4 Date	5 Payee name								
05/27/2023	PayPal Inc.								
6 Amount (\$)	ount (\$) 7 Payee address; City; State; Zip Code								
\$1.69 P.O. Box 7022									
Expenditure from corporate funds	Mountain View, CA 94039								
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution									
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held								
Date	Payee name								
06/07/2023	PayPal Inc.								
Amount (\$)	Payee address; City; State; Zip Code								
\$0.92 P.O. Box 7022									
Expenditure from corporate funds	Mountain View, CA 94039								
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee (b) Description Check if tavel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution 								
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held								
Date	Payee name								
06/09/2023	PayPal Inc.								
Amount (\$)	Payee address; City; State; Zip Code								
\$29.39	P.O. Box 7022								
Expenditure from corporate funds	Mountain View, CA 94039								
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution 								
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held								

EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense				e	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1 T	otal pages Schedule F1:	2	FILER NAME	<u> </u>				3	Filer ID	(Ethics Commission Filers)
	Sch: 12/12 Rpt:		OneMain Holdings Inc. PAC 00084139							
4 D	ate	5	Payee name							
0	6/20/2023		PayPal Inc.							
6 A	xmount (\$) 7 Payee address; City; State; Zip Code									
	\$5.55 P.O. Box 7022									
	Expenditure from corporate funds Mountain View, CA 94039									
8	PURPOSE OF	(a)			I at the top of this sch	edule)	(b) Description			
	EXPENDITURE		Credit Card	Processing	Fee				side of Texas. Com X, officeholder living	
									credit card co	
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH		Candidate/Off	ceholder name	e (Dffice sou	Jht		Office he	eld
D	ate		Payee name							
0	6/27/2023		PayPal Inc.							
A	mount (\$)		Payee addre	ss; City;	State;	; Zip Co	de			
	\$1.69		P.O. Box 70)22						
	Expenditure from corporate funds		Mountain V	iew, CA 9403	39					
1	PURPOSE OF EXPENDITURE	OF Credit Card Processing Eee						expense		
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OF		Candidate/Off	ceholder name	e C	Dffice sou	Jht		Office he	eld
D	ate		Payee name							
0	6/13/2023		Square Inc.							
A	mount (\$)		Payee addre	ss; City;	State:	; Zip Co	le			
	\$2.70		,	et Street Suite						
	Expenditure from corporate funds		San Francis	sco, CA 9410	3					
I	PURPOSE OF EXPENDITURE	Credit Card Processing Fee							expense	
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OF		Candidate/Off	ceholder name	e C	Dffice sou	Jht		Office he	eld

TEXT ANNOTATION

Sch: 1/1 Rpt: 109/109

FILER NAME	Filer ID (Ethics Commission Filers)
OneMain Holdings Inc. PAC	00084139

Schedule

Cover Sheet

Information entered by filer as a memo:

This balance may include other transactions not required to be reported per Ethics Advisory Opinion #208. Non-Texas and Federal disbursements during the reporting period total \$19,000.00.