

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines.
Jeramey McElhaney for Congress

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER**
3. IS THIS REPORT NEW (N) OR AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of

(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

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

Type or Print Name of Treasurer Jeramey McElhaney

Signature of Treasurer Jeramey McElhaney [Electronically Filed] Date / /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Jeramey McElhaney for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	7530.00	7530.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	7530.00	7530.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	9112.89	9112.89
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	9112.89	9112.89
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1604.59	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	3187.48	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Jeramey McElhaney for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3600.00	3600.00
(ii) Unitemized.....	3930.00	3930.00
(iii) TOTAL of contributions from individuals ▶	7530.00	7530.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	7530.00	7530.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	3187.48	3187.48
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	3187.48	3187.48
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	10717.48	10717.48

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	9112.89	9112.89
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	9112.89	9112.89

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	10717.48
25. SUBTOTAL (add Line 23 and Line 24).....	10717.48
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	9112.89
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1604.59

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 13
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)
Jeramey McElhaney for Congress

A. Full Name (Last, First, Middle Initial)
Dorothy (Dottie) Byrd

Mailing Address 38 N Main St

City Moab State UT Zip Code 84532

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

Name of Employer Self (The T-shirt shop) Occupation Merchant

Receipt For: 2012
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2012

Transaction ID : SA11AI.4197

Amount of Each Receipt this Period
500.00

In-kind - Campaign signs and banners

B. Full Name (Last, First, Middle Initial)
Dave Cozzens

Mailing Address 901 E. Oak St

City Moab State UT Zip Code 84532

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

Name of Employer Self Occupation general contractor

Receipt For: 2012
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2012

Transaction ID : SA11AI.4222

Amount of Each Receipt this Period
300.00

check

C. Full Name (Last, First, Middle Initial)
Joseph Galbraith

Mailing Address po box 623

City Weimar State TX Zip Code 78962

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

Name of Employer unknown Occupation Engineer

Receipt For: 2012
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 08 / 2011

Transaction ID : SA11AI.4134

Amount of Each Receipt this Period
250.00

Credit card

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 13
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jeramey McElhaney for Congress

A. Full Name (Last, First, Middle Initial)
Rex Holman

Mailing Address PO box 698

City Moab State UT Zip Code 84532

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

Name of Employer retired Occupation retired

Receipt For: 2012
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2012

Transaction ID : SA11AI.4209

Amount of Each Receipt this Period
 300.00
 check

B. Full Name (Last, First, Middle Initial)
Ralph and Bonnie Keith

Mailing Address 10 Carriage Ln

City Yarmouth State ME Zip Code 04096

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

Name of Employer unknown Occupation unknown

Receipt For: 2012
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 27 / 2011

Transaction ID : SA11AI.4205

Amount of Each Receipt this Period
 250.00
 check

C. Full Name (Last, First, Middle Initial)
Jeramey McElhaney

Mailing Address 95 Arches Dr

City Moab State UT Zip Code 84532

FEC ID number of contributing federal political committee. **C** H2UT02365

Name of Employer Self/KTM Construction Occupation General Contractor

Receipt For: 2012
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2012

Transaction ID : SA11AI.4390

Amount of Each Receipt this Period
 1000.00
 check

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

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

1550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 13
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jeramey McElhaney for Congress

A. Full Name (Last, First, Middle Initial)
J.J. and Shouyu Wang

Mailing Address 168 E Center St

City Moab State UT Zip Code 84532

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

Name of Employer Self Occupation Motel Owner

Receipt For: 2012
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2012

Transaction ID : SA11Al.4230

Amount of Each Receipt this Period
 1000.00
 check

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1000.00

3600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 13
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jeramey McElhaney for Congress

A. Full Name (Last, First, Middle Initial)
Jeramey McElhaney for Congress

Mailing Address 95 Arches Drive

City Moab State UT Zip Code 84532

FEC ID number of contributing federal political committee. **C** C00514398

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2012

Transaction ID : SA13A.4389

Amount of Each Receipt this Period
 3187.48

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

3187.48

3187.48

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 13
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Jeramey McElhaney for Congress

Full Name (Last, First, Middle Initial) A. Dorothy (Dottie) Byrd		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012
Mailing Address 38 N Main St		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4238
City Moab	State UT	
Zip Code 84532	Purpose of Disbursement In-kind - Campaign signs and banners	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Convention	State: District:	

Full Name (Last, First, Middle Initial) B. Canyon Color Graphics		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2012
Mailing Address 11 N Main St		Amount of Each Disbursement this Period 287.25 Transaction ID : SB17.4272
City Moab	State UT	
Zip Code 84532	Purpose of Disbursement Brochures	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Convention	State: District:	

Full Name (Last, First, Middle Initial) c. Canyon Color Graphics		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2012
Mailing Address 11 N Main St		Amount of Each Disbursement this Period 1171.44 Transaction ID : SB17.4312
City Moab	State UT	
Zip Code 84532	Purpose of Disbursement Brochures	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Convention	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1958.69
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 13	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Jeramey McElhaney for Congress

Full Name (Last, First, Middle Initial) A. Canyonlands Copy Center		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2012
Mailing Address 375 South Main		Amount of Each Disbursement this Period 430.93 Transaction ID : SB17.4388
City Moab	State UT Zip Code 84532	
Purpose of Disbursement stickers	Category/Type 006	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) B. Expedia.com		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2012
Mailing Address		Amount of Each Disbursement this Period 818.82 Transaction ID : SB17.4259
City	State Zip Code	
Purpose of Disbursement 2 plane tickets to Washington DC	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) c. Maverik Cedar City		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2012
Mailing Address 204 SMain St		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.4382
City Cedar City	State UT Zip Code 84532	
Purpose of Disbursement fuel	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1349.75
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 13	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Jeramey McElhaney for Congress

Full Name (Last, First, Middle Initial) A. Maverik Cedar City		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2012
Mailing Address 204 SMain St		Amount of Each Disbursement this Period 101.22
City Cedar City	State UT Zip Code 84532	
Purpose of Disbursement fuel	Category/Type 002	Transaction ID : SB17.4365
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) B. Moab Post Office		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2011
Mailing Address		Amount of Each Disbursement this Period 264.00
City Moab	State UT Zip Code 84532	
Purpose of Disbursement Stamps	Category/Type 003	Transaction ID : SB17.4245
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) c. Salt Lake County GOP		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2012
Mailing Address PO Box 719		Amount of Each Disbursement this Period 225.00
City Salt Lake City	State UT Zip Code 84110	
Purpose of Disbursement SLGOP Lincoln Day Dinner	Category/Type 007	Transaction ID : SB17.4281
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	590.22
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 13		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Jeramey McElhaney for Congress

Full Name (Last, First, Middle Initial) A. Utah GOP		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2012
Mailing Address 117 E South Temple		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.4293
City Salt Lake City	State UT	
Zip Code 84111	Purpose of Disbursement Booth at State Convention	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Convention	State: District:	

Full Name (Last, First, Middle Initial) B. Washington County GOP		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2012
Mailing Address PO Box 1508		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.4289
City St George	State UT	
Zip Code 84771	Purpose of Disbursement Washington County Lincoln Day Breakfast	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Convention	State: District:	

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

SUBTOTAL of Disbursements This Page (optional).....	1900.00
TOTAL This Period (last page this line number only).....	5798.66

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

NAME OF COMMITTEE (In Full) **Jeramey McElhaney for Congress** Transaction ID : **SC/10.4389**

LOAN SOURCE Full Name (Last, First, Middle Initial) Jeramey McElhaney for Congress	[PERSONAL FUNDS]	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention
Mailing Address 95 Arches Drive		

City	State	ZIP Code
Moab	UT	84532

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3187.48	0.00	3187.48

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	M 03 / D 01 / Y 2012	M M / D D / Y 5/31/2012	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....	<input type="text" value="3187.48"/>
TOTALS This Period (last page in this line only).....	<input type="text" value="3187.48"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	