

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
THUY LOWE 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))....	3954.55	3954.55
(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)).....	3954.55	3954.55
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	3989.31	3989.31
(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)).....	3989.31	3989.31
8. Cash on Hand at Close of Reporting Period (from Line 27).....	549.70	
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).....	300.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

THUY LOWE 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).....	2250.00	2250.00
(ii) Unitemized.....	1089.94	1089.94
(iii) TOTAL of contributions from individuals ▶	3339.94	3339.94
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	614.61	614.61
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	3954.55	3954.55
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	300.00	300.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	300.00	300.00
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)..... ▶	4254.55	4254.55

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	3989.31	3989.31
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) ►	3989.31	3989.31

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	284.46
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	4254.55
25. SUBTOTAL (add Line 23 and Line 24).....	4539.01
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	3989.31
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	549.70

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 18
	<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	

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)
THUY LOWE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Douglas Duerr

Mailing Address 16238 E Shirley Shores Dr

City Tavares State FL Zip Code 32778

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 13 / 2014

Transaction ID : SA11AI.4137

Amount of Each Receipt this Period
 250.00

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

Mailing Address 25711 Timuquana Dr

City Sorrento State FL Zip Code 32776

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 12 / 2014

Transaction ID : SA11AI.4287

Amount of Each Receipt this Period
 500.00

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

Mailing Address 16238 E Shirley Shores Dr

City Tavares State FL Zip Code 32778

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 13 / 2014

Transaction ID : SA11AI.4139

Amount of Each Receipt this Period
 250.00

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

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

1000.00

**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 18
	<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)
THUY LOWE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Fitzhugh Powell

Mailing Address **PO Box 41490**

City **Jacksonville** State **FL** Zip Code **32203**

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

Name of Employer **Power Insurance** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 03 / 2014

Transaction ID : SA11AI.4161

Amount of Each Receipt this Period
 1000.00

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

Mailing Address **219 N Newman St**

City **Jacksonville** State **FL** Zip Code **32202**

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

Name of Employer **Powell Insurance** Occupation **Insurance sales**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 19 / 2014

Transaction ID : SA11AI.4141

Amount of Each Receipt this Period
 250.00

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).....

1250.00

2250.00

**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 18
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
THUY LOWE FOR CONGRESS

Full Name (Last, First, Middle Initial) THUY LOWE		Date of Receipt M M / D D / Y Y Y Y 01 / 10 / 2014	
Mailing Address 31622 BRONSON ROAD PO BOX 1555		Transaction ID : SA11D.4104	
City SORRENTO	State FL	Zip Code 32776	Amount of Each Receipt this Period 93.81
FEC ID number of contributing federal political committee. C H4FL05073		In-kind -	
Name of Employer none	Occupation none	Amount of Each Receipt this Period 93.81	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 93.81	In-kind -	

Full Name (Last, First, Middle Initial) THUY LOWE		Date of Receipt M M / D D / Y Y Y Y 01 / 12 / 2014	
Mailing Address 31622 BRONSON ROAD PO BOX 1555		Transaction ID : SA11D.4106	
City SORRENTO	State FL	Zip Code 32776	Amount of Each Receipt this Period 15.00
FEC ID number of contributing federal political committee. C H4FL05073		In-kind -	
Name of Employer none	Occupation none	Amount of Each Receipt this Period 15.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 108.81	In-kind -	

Full Name (Last, First, Middle Initial) THUY LOWE		Date of Receipt M M / D D / Y Y Y Y 01 / 19 / 2014	
Mailing Address 31622 BRONSON ROAD PO BOX 1555		Transaction ID : SA11D.4102	
City SORRENTO	State FL	Zip Code 32776	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. C H4FL05073		In-kind -	
Name of Employer none	Occupation none	Amount of Each Receipt this Period 75.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 183.81	In-kind -	

SUBTOTAL of Receipts This Page (optional).....	183.81
TOTAL This Period (last page this line number only).....	183.81

**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 18
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
THUY LOWE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THUY LOWE

Mailing Address 31622 BRONSON ROAD
PO BOX 1555

City SORRENTO State FL Zip Code 32776

FEC ID number of contributing federal political committee. **C H4FL05073**

Name of Employer none Occupation none

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
190.81

Date of Receipt
 M M / D D / Y Y Y Y
01 / 30 / 2014

Transaction ID : SA11D.4108

Amount of Each Receipt this Period
7.00

In-kind -

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

Mailing Address 31622 BRONSON ROAD
PO BOX 1555

City SORRENTO State FL Zip Code 32776

FEC ID number of contributing federal political committee. **C H4FL05073**

Name of Employer none Occupation none

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
198.01

Date of Receipt
 M M / D D / Y Y Y Y
02 / 07 / 2014

Transaction ID : SA11D.4110

Amount of Each Receipt this Period
7.20

In-kind -

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

Mailing Address 31622 BRONSON ROAD
PO BOX 1555

City SORRENTO State FL Zip Code 32776

FEC ID number of contributing federal political committee. **C H4FL05073**

Name of Employer none Occupation none

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
248.01

Date of Receipt
 M M / D D / Y Y Y Y
02 / 10 / 2014

Transaction ID : SA11D.4114

Amount of Each Receipt this Period
50.00

In-kind -

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

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

64.20

**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 9 OF 18
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
THUY LOWE FOR CONGRESS

Full Name (Last, First, Middle Initial) THUY LOWE		Date of Receipt M M / D D / Y Y Y Y 02 / 15 / 2014	
Mailing Address 31622 BRONSON ROAD PO BOX 1555		Transaction ID : SA11D.4116	
City SORRENTO	State FL	Zip Code 32776	
FEC ID number of contributing federal political committee. C H4FL05073		Amount of Each Receipt this Period 15.00	
Name of Employer none	Occupation none		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 263.01		

Full Name (Last, First, Middle Initial) THUY LOWE		Date of Receipt M M / D D / Y Y Y Y 02 / 27 / 2014	
Mailing Address 31622 BRONSON ROAD PO BOX 1555		Transaction ID : SA11D.4118	
City SORRENTO	State FL	Zip Code 32776	
FEC ID number of contributing federal political committee. C H4FL05073		Amount of Each Receipt this Period 8.40	
Name of Employer none	Occupation none		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 271.41		

Full Name (Last, First, Middle Initial) THUY LOWE		Date of Receipt M M / D D / Y Y Y Y 03 / 01 / 2014	
Mailing Address 31622 BRONSON ROAD PO BOX 1555		Transaction ID : SA11D.4120	
City SORRENTO	State FL	Zip Code 32776	
FEC ID number of contributing federal political committee. C H4FL05073		Amount of Each Receipt this Period 150.00	
Name of Employer none	Occupation none		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 421.41		

SUBTOTAL of Receipts This Page (optional).....	173.40
TOTAL This Period (last page this line number only).....	[]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 18
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
THUY LOWE FOR CONGRESS

Full Name (Last, First, Middle Initial) THUY LOWE		Date of Receipt M M / D D / Y Y Y Y 03 / 03 / 2014	
Mailing Address 31622 BRONSON ROAD PO BOX 1555		Transaction ID : SA11D.4122	
City SORRENTO	State FL	Zip Code 32776	
FEC ID number of contributing federal political committee. C H4FL05073		Amount of Each Receipt this Period 9.20	
Name of Employer none	Occupation none		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 430.61		

Full Name (Last, First, Middle Initial) THUY LOWE		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2014	
Mailing Address 31622 BRONSON ROAD PO BOX 1555		Transaction ID : SA11D.4124	
City SORRENTO	State FL	Zip Code 32776	
FEC ID number of contributing federal political committee. C H4FL05073		Amount of Each Receipt this Period 12.10	
Name of Employer none	Occupation none		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 442.71		

Full Name (Last, First, Middle Initial) THUY LOWE		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2014	
Mailing Address 31622 BRONSON ROAD PO BOX 1555		Transaction ID : SA11D.4126	
City SORRENTO	State FL	Zip Code 32776	
FEC ID number of contributing federal political committee. C H4FL05073		Amount of Each Receipt this Period 17.50	
Name of Employer none	Occupation none		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 460.21		

SUBTOTAL of Receipts This Page (optional).....	38.80
TOTAL This Period (last page this line number only).....	[]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 18
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
THUY LOWE FOR CONGRESS

Full Name (Last, First, Middle Initial) THUY LOWE		Date of Receipt M M / D D / Y Y Y Y 03 / 18 / 2014	
Mailing Address 31622 BRONSON ROAD PO BOX 1555		Transaction ID : SA11D.4128	
City SORRENTO	State FL	Zip Code 32776	
FEC ID number of contributing federal political committee. C H4FL05073		Amount of Each Receipt this Period 121.30	
Name of Employer none	Occupation none	In-kind -	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 581.51		

Full Name (Last, First, Middle Initial) THUY LOWE		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 31622 BRONSON ROAD PO BOX 1555		Transaction ID : SA11D.4130	
City SORRENTO	State FL	Zip Code 32776	
FEC ID number of contributing federal political committee. C H4FL05073		Amount of Each Receipt this Period 19.00	
Name of Employer none	Occupation none	In-kind -	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.51		

Full Name (Last, First, Middle Initial) THUY LOWE		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 31622 BRONSON ROAD PO BOX 1555		Transaction ID : SA11D.4132	
City SORRENTO	State FL	Zip Code 32776	
FEC ID number of contributing federal political committee. C H4FL05073		Amount of Each Receipt this Period 14.10	
Name of Employer none	Occupation none	In-kind -	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 614.61		

SUBTOTAL of Receipts This Page (optional).....	154.40
TOTAL This Period (last page this line number only).....	614.61

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

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

FOR LINE NUMBER: PAGE 12 OF 18
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
THUY LOWE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THUY LOWE FOR CONGRESS

Mailing Address 31622 BRONSON RD
PO BOX 1555

City State Zip Code
SORRENTO FL 32776

FEC ID number of contributing federal political committee. **C** C00550046

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 03 / 2014

Transaction ID : SA13A.4143

Amount of Each Receipt this Period
300.00

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).....

300.00

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 18			
	<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)
THUY LOWE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Copyfax		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 5310 Alpha Dr		Amount of Each Disbursement this Period 324.83
City Orlando	State FL Zip Code 32810	
Purpose of Disbursement Printing campaign materials	Candidate Name	Transaction ID : SB17.4238
Category/Type 006		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Copyfax		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 5310 Alpha Dr		Amount of Each Disbursement this Period 164.01
City Orlando	State FL Zip Code 32810	
Purpose of Disbursement Printing campaign materials	Candidate Name	Transaction ID : SB17.4260
Category/Type 006		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Duval Lincoln Center		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 4963 Beach Blvd		Amount of Each Disbursement this Period 600.00
City Jacksonville	State FL Zip Code 32207	
Purpose of Disbursement Dinner & advertisement	Candidate Name	Transaction ID : SB17.4261
Category/Type 007		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1088.84
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 15 OF 18			
	<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)
THUY LOWE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THUY LOWE		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2014
Mailing Address 31622 BRONSON ROAD PO BOX 1555		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.4121
City SORRENTO State FL Zip Code 32776	Purpose of Disbursement In-kind - 007 Category/Type	
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 05		

Full Name (Last, First, Middle Initial) B. THUY LOWE		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 31622 BRONSON ROAD PO BOX 1555		Amount of Each Disbursement this Period 9.20 Transaction ID : SB17.4123
City SORRENTO State FL Zip Code 32776	Purpose of Disbursement In-kind - 003 Category/Type	
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 05		

Full Name (Last, First, Middle Initial) C. THUY LOWE		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 31622 BRONSON ROAD PO BOX 1555		Amount of Each Disbursement this Period 12.10 Transaction ID : SB17.4125
City SORRENTO State FL Zip Code 32776	Purpose of Disbursement In-kind - 003 Category/Type	
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 05		

SUBTOTAL of Disbursements This Page (optional).....	171.30
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 16 OF 18	
	<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)
THUY LOWE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THUY LOWE		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address 31622 BRONSON ROAD PO BOX 1555		Amount of Each Disbursement this Period 17.50 Transaction ID : SB17.4127
City SORRENTO State FL Zip Code 32776	Purpose of Disbursement In-kind - Candidate Name Category/Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 05	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. THUY LOWE		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 31622 BRONSON ROAD PO BOX 1555		Amount of Each Disbursement this Period 121.30 Transaction ID : SB17.4129
City SORRENTO State FL Zip Code 32776	Purpose of Disbursement In-kind - Candidate Name Category/Type 006	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 05	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. THUY LOWE		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 31622 BRONSON ROAD PO BOX 1555		Amount of Each Disbursement this Period 19.00 Transaction ID : SB17.4131
City SORRENTO State FL Zip Code 32776	Purpose of Disbursement In-kind - Candidate Name Category/Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 05	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	157.80
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 17 OF 18			
	<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)
THUY LOWE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THUY LOWE		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 31622 BRONSON ROAD PO BOX 1555		Amount of Each Disbursement this Period 14.10
City SORRENTO	State FL	
Zip Code 32776	Purpose of Disbursement In-kind -	Transaction ID : SB17.4133
Candidate Name	003 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL	District: 05	

Full Name (Last, First, Middle Initial) B. St Phillip PhanVan Minh		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 15 W Par St		Amount of Each Disbursement this Period 500.00
City Orlando	State FL	
Zip Code 32804	Purpose of Disbursement Vietnamese New Year Festival	Transaction ID : SB17.4206
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
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).....	514.10
TOTAL This Period (last page this line number only).....	2005.44

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **THUY LOWE FOR CONGRESS** Transaction ID : **SC/10.4143**

LOAN SOURCE Full Name (Last, First, Middle Initial) THUY LOWE FOR CONGRESS	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 31622 BRONSON RD PO BOX 1555	

City	State	ZIP Code
SORRENTO	FL	32776

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
300.00	0.00	300.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
02 / 03 / 2014	11/30/2014	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	300.00
TOTALS This Period (last page in this line only).....	▶	300.00

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