

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5
STREUSAND FOR CONGRESS

ADDRESS (number and street) 2323 Clear Lake City Blvd Ste 180, Box 266 SPRING TX 77062
Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00392266
3. IS THIS REPORT NEW (N) OR AMENDED (A) TX 10
CITY STATE ZIP CODE STATE DISTRICT

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
[X] April 15 Quarterly Report (Q1)
[] July 15 Quarterly Report (Q2)
[] October 15 Quarterly Report (Q3)
[] January 31 Year-End Report (YE)
[] Termination Report (TER)
(b) 12-Day PRE-Election Report for the:
[] Primary (12P) [] General (12G) [] Runoff (12R)
[] Convention (12C) [] Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day POST-Election Report for the:
[] General (30G) [] Runoff (30R) [] Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 02 / 13 / 2014 through M M / D D / Y Y Y Y 03 / 31 / 2014

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 Mrs. Kathy Joyce Streusand

Signature of Treasurer Mrs. Kathy Joyce Streusand [Electronically Filed] Date M M / D D / Y Y Y Y 04 / 15 / 2014

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

Office Use Only table with 8 columns and 1 row. FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
STREUSAND 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))....	22555.07	83205.07
(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)).....	22555.07	83205.07
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	244467.96	658775.82
(b) Total Offsets to Operating Expenditures (from Line 14).....	3000.00	3000.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	241467.96	655775.82
8. Cash on Hand at Close of Reporting Period (from Line 27).....	29657.38	
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).....	624500.00	

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

STREUSAND 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).....	19000.00	50800.00
(ii) Unitemized.....	650.00	1375.00
(iii) TOTAL of contributions from individuals ▶	19650.00	52175.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	2905.07	31030.07
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	22555.07	83205.07
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	100000.00	600000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	100000.00	600000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	3000.00	3000.00
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)..... ▶	125555.07	686205.07

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	244467.96	658775.82
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) ►	244467.96	658775.82

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	148570.27
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	125555.07
25. SUBTOTAL (add Line 23 and Line 24).....	274125.34
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	244467.96
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	29657.38

**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 40
	<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)
STREUSAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Betty Adams		Date of Receipt MM / DD / YYYY 02 / 25 / 2014
Mailing Address PO Box 7011		Transaction ID : SA11AI.4640
City Houston	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Homemaker	Occupation Homemaker	Election Cycle-to-Date 2500.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Norm Adams		Date of Receipt MM / DD / YYYY 02 / 25 / 2014
Mailing Address PO Box 7011		Transaction ID : SA11AI.4638
City Houston	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Adams Insurance Services	Occupation Insurance Agent	Election Cycle-to-Date 2500.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. Clifton A. Crabtree		Date of Receipt MM / DD / YYYY 03 / 05 / 2014
Mailing Address 2 Courtland Place		Transaction ID : SA11AI.4759
City Houston	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self - Employed	Occupation Mortgage Banker	Election Cycle-to-Date 1000.00
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		

SUBTOTAL of Receipts This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 40
	<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)
STREUSAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Robert Cress

Mailing Address 10 Uptown Park Blvd #93

City Houston State TX Zip Code 77056

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

Name of Employer Self - Employed Occupation Real Estate Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 14 / 2014

Transaction ID : SA11AI.4754

Amount of Each Receipt this Period
 250.00
 Contribution

B. Full Name (Last, First, Middle Initial)
T. H. Dinerstein

Mailing Address 3411 Richmond Ave, Suite 200

City Houston State TX Zip Code 77045

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 25 / 2014

Transaction ID : SA11AI.4827

Amount of Each Receipt this Period
 250.00
 Contribution

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

Mailing Address 2931 Kismet Lane

City Houston State TX Zip Code 77043

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

Name of Employer Self - Employed Occupation Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

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

Transaction ID : SA11AI.4829

Amount of Each Receipt this Period
 2000.00
 Contribution

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

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

2500.00

**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 40
	<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)
STREUSAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Stephen Folzenlogen

Mailing Address 2117 University Blvd

City Houston State TX Zip Code 77030

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

Name of Employer Houston Energy LP Occupation Geologist

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 / 25 / 2014

Transaction ID : SA11AI.4636

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Austen Furse

Mailing Address 6430 Wakeforest

City Houston State TX Zip Code 77005

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

Name of Employer Hawkins Ranch, L.P. Occupation Partner

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 / 01 / 2014

Transaction ID : SA11AI.4657

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 3310 W Main Street

City Houston State TX Zip Code 77098

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

Name of Employer Grimes Energy Co. Occupation President

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 / 25 / 2014

Transaction ID : SA11AI.4653

Amount of Each Receipt this Period
 2500.00

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

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

4500.00

**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 40
	<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)
STREUSAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Windi Grimes

Mailing Address 3310 W Main St

City Houston State TX Zip Code 77098

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 / 25 / 2014

Transaction ID : SA11AI.4650

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
Ned S. Holmes

Mailing Address 55 Waugh Drive, Suite 1111

City Houston State TX Zip Code 77007

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

Name of Employer Ned S. Holmes Investments, Inc Occupation Chairman

Receipt For: 2014
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.4755

Amount of Each Receipt this Period
 1000.00

Contribution

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

Mailing Address PO Box 430

City Deer Park State TX Zip Code 77536

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

Name of Employer Self - Employed Occupation Homebuilder

Receipt For: 2014
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 27 / 2014

Transaction ID : SA11AI.4761

Amount of Each Receipt this Period
 1000.00

Contribution

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

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

4500.00

**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 9 OF 40
	<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	

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NAME OF COMMITTEE (In Full)
STREUSAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. John W. Lodge III		Date of Receipt M M / D D / Y Y Y Y 02 / 16 / 2014	
Mailing Address PO Box 96589		Transaction ID : SA11AI.4454	
City Houston	State TX	Zip Code 77213	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Self - Employed	Occupation Lumber Business		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) B. Ronnie Matthews		Date of Receipt M M / D D / Y Y Y Y 02 / 13 / 2014	
Mailing Address 101 Saddlebrook Lane		Transaction ID : SA11AI.4817	
City Tomball	State TX	Zip Code 77375	Amount of Each Receipt this Period _____ 500.00 Contribution
FEC ID number of contributing federal political committee.		C	
Name of Employer Matthews Real Estate	Occupation Real Estate		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) C. Carol Mira		Date of Receipt M M / D D / Y Y Y Y 02 / 13 / 2014	
Mailing Address 42 Redbud Ridge Place		Transaction ID : SA11AI.4752	
City The Woodlands	State TX	Zip Code 77380	Amount of Each Receipt this Period _____ 250.00 Contribution
FEC ID number of contributing federal political committee.		C	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 1250.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 40
	<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)
STREUSAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Susan B. Streusand

Mailing Address 6511 Mercer

City Houston State TX Zip Code 77005

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

Name of Employer Alliance Pathology Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 05 / 2014

Transaction ID : SA11Al.4740

Amount of Each Receipt this Period
 Contribution 250.00

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).....

250.00

19000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 40
	<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)
STREUSAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BENJAMIN EARL STREUSAND

Mailing Address 7011 Augusta Pines Cove

City SPRING State TX Zip Code 77389

FEC ID number of contributing federal political committee. **C H4TX10085**

Name of Employer Self - Employed Occupation Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
631030.07

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 29 / 2014

Transaction ID : SA11D.4786

Amount of Each Receipt this Period
2905.07

In-kind - Travel, Meals and Fees

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).....

2905.07

2905.07

**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 12 OF 40
	<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)
STREUSAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BENJAMIN EARL STREUSAND

Mailing Address 7011 Augusta Pines Cove

City SPRING State TX Zip Code 77389

FEC ID number of contributing federal political committee. **C H4TX10085**

Name of Employer Self - Employed Occupation Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **628125.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 10 / 2014

Transaction ID : SA13A.4710

Amount of Each Receipt this Period
 100000.00

Candidate Loan from Personal Funds

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).....

100000.00

100000.00

**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 13 OF 40
	<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)
STREUSAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Vital Signs of Texas

Mailing Address 1031 E. 23rd Street

City Houston State TX Zip Code 77009

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA14.4702

Amount of Each Receipt this Period
3000.00

Vendor Refund - Vital Signs on 3-25-2014

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).....

3000.00

3000.00

**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 14 OF 40			
	<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)
STREUSAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Advanced Micro Targeting, Inc.		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 13351 Peyton Dr.		Amount of Each Disbursement this Period 12500.00 Transaction ID : SB17.4680
City Dallas	State TX	
Zip Code 75240	Purpose of Disbursement Campaign Voter Research	Category/ Type
Candidate Name	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. Anthem Media		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 5524 Bee Caves Road Ste B-5		Amount of Each Disbursement this Period 40000.00 Transaction ID : SB17.4681
City Austin	State TX	
Zip Code 78746	Purpose of Disbursement Campaign Advertising	Category/ Type
Candidate Name	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. Anthem Media		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 5524 Bee Caves Road Ste B-5		Amount of Each Disbursement this Period 21899.08 Transaction ID : SB17.4712
City Austin	State TX	
Zip Code 78746	Purpose of Disbursement Campaign Advertising	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	74399.08
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 40			
	<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)
STREUSAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Anthem Media		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 5524 Bee Caves Road Ste B-5		Amount of Each Disbursement this Period 11314.50
City Austin State TX Zip Code 78746	Purpose of Disbursement Campaign Advertising	
Candidate Name	Category/Type	Transaction ID : SB17.4713
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. Bay Area Republican Women		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address P.O. Box 58103		Amount of Each Disbursement this Period 675.00
City Webster State TX Zip Code 77598	Purpose of Disbursement Contribution	
Candidate Name	Category/Type	Transaction ID : SB17.4788 [MEMO ITEM]
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. Brisco Cain		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 2526 Sea Horse Ct		Amount of Each Disbursement this Period 645.12
City Seabrook State TX Zip Code 77586	Purpose of Disbursement Political Consulting	
Candidate Name	Category/Type	Transaction ID : SB17.4837
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	11959.62
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 40	
	<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)
STREUSAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Campaign Now		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 1126 S. 70th Street Suite S414		Amount of Each Disbursement this Period 517.95
City Milwaukee	State MN Zip Code 53214	
Purpose of Disbursement Political Marketing Services	Category/Type	Transaction ID : SB17.4697
Candidate Name		
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. Casa Don Boni		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2014
Mailing Address 906 Main Street		Amount of Each Disbursement this Period 232.01
City Liberty	State TX Zip Code 77575	
Purpose of Disbursement Food & Beverage	Category/Type	Transaction ID : SB17.4812
Candidate Name		
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. CFB Strategies		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 247 Farragut Ave		Amount of Each Disbursement this Period 6077.07
City Hastings on Hudson	State NY Zip Code 10706	
Purpose of Disbursement Campaign management technology	Category/Type	Transaction ID : SB17.4688
Candidate Name		
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).....	6595.02
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 40			
	<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)
STREUSAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jon Clark		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 409 South Matthews		Amount of Each Disbursement this Period 900.00 Transaction ID : SB17.4719
City Corrigan	State TX	
Purpose of Disbursement Professional Services	Candidate Name	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) B. Jon Clark		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 409 South Matthews		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.4832
City Corrigan	State TX	
Purpose of Disbursement Professional Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	
State: District:		

Full Name (Last, First, Middle Initial) c. Clark Hill P.L.C.		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address 601 Pennsylvania Ave NW North Bldg, Ste 1000		Amount of Each Disbursement this Period 2030.00 Transaction ID : SB17.4682
City Washington	State DC	
Purpose of Disbursement Legal fees	Candidate Name	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:		

SUBTOTAL of Disbursements This Page (optional).....	4430.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 40			
	<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)
STREUSAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Colon & Company		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 3405 Edloe Street Suite 205A		Amount of Each Disbursement this Period 3500.00
City Houston	State TX Zip Code 77027	
Purpose of Disbursement Political Consulting	Category/Type	Transaction ID : SB17.4706
Candidate Name		
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. Colon & Company		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 3405 Edloe Street Suite 205A		Amount of Each Disbursement this Period 3500.00
City Houston	State TX Zip Code 77027	
Purpose of Disbursement Political Consulting	Category/Type	Transaction ID : SB17.4730
Candidate Name		
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. Digital Domain of Austin		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 3601 S. Congress Ave. Suite C-101		Amount of Each Disbursement this Period 536.50
City Austin	State TX Zip Code 78704	
Purpose of Disbursement Media Production	Category/Type	Transaction ID : SB17.4727
Candidate Name		
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).....	7536.50
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 19 OF 40	
	<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)
STREUSAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Fairmont Hotels & Resorts		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 2401 M Street NW		Amount of Each Disbursement this Period 105.90
City Washington	State DC Zip Code 20037	
Purpose of Disbursement Travel - Lodging	Category/Type	Transaction ID : SB17.4809
Candidate Name		
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. FLS Connect, LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 7300 Hudson Boulevard Suite 270		Amount of Each Disbursement this Period 10000.00
City St. Paul	State MN Zip Code 55128	
Purpose of Disbursement Campaign Message Services	Category/Type	Transaction ID : SB17.4693
Candidate Name		
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. Four One Three Communications		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address PO Box 1153		Amount of Each Disbursement this Period 8015.95
City Austin	State TX Zip Code 78767	
Purpose of Disbursement Campaign Fundraising Postage	Category/Type	Transaction ID : SB17.4684
Candidate Name		
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).....	18015.95
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 20 OF 40			
	<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)
STREUSAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Four One Three Communications		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address PO Box 1153		Amount of Each Disbursement this Period 47182.61 Transaction ID : SB17.4686
City Austin State TX Zip Code 78767	Purpose of Disbursement Campaign Data Management Consulting & Direct Mail	
Candidate Name	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) B. Four One Three Communications		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address PO Box 1153		Amount of Each Disbursement this Period 7347.76 Transaction ID : SB17.4689
City Austin State TX Zip Code 78767	Purpose of Disbursement Campaign Fundraising Mailing	
Candidate Name	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. Four One Three Communications		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address PO Box 1153		Amount of Each Disbursement this Period 25461.70 Transaction ID : SB17.4711
City Austin State TX Zip Code 78767	Purpose of Disbursement Campaign Fundraising Mail Services	
Candidate Name	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:		

SUBTOTAL of Disbursements This Page (optional).....	47182.61
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 21 OF 40			
	<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)
STREUSAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Four One Three Communications		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address PO Box 1153		Amount of Each Disbursement this Period 8862.08
City Austin State TX Zip Code 78767	Purpose of Disbursement Campaign Fundraising Mail Services	
Candidate Name		Transaction ID : SB17.4726
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. Gringos Mexican Kitchen		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 10200 Emmett Flowry Expy Suite G		Amount of Each Disbursement this Period 313.65
City Texas City State TX Zip Code 77591	Purpose of Disbursement Food and Beverage	
Candidate Name		Transaction ID : SB17.4810
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:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) c. Harris County Republican Party		Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2014
Mailing Address Attn: Travis Bryan 3311 Richmond, Suite 218		Amount of Each Disbursement this Period 250.00
City Houston State TX Zip Code 77098	Purpose of Disbursement Sponsorship	
Candidate Name		Transaction ID : SB17.4729
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	9112.08
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 22 OF 40	
	<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)
STREUSAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Holiday Inn Corporation		Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2014
Mailing Address 11766 Wilshire Blvd. Suite 1450		Amount of Each Disbursement this Period 235.00
City Los Angeles	State CA Zip Code 90025	
Purpose of Disbursement Travel - Lodging	Category/Type	Transaction ID : SB17.4793 [MEMO ITEM]
Candidate Name		
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. Matthew G. Howerton		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 2323 Clear Lake City Blvd		Amount of Each Disbursement this Period 235.00
City Spring	State TX Zip Code 77062	
Purpose of Disbursement Mileage Reimbursements	Category/Type	Transaction ID : SB17.4739
Candidate Name		
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. Iguana Joe's		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2014
Mailing Address 9118 N Hwy 146		Amount of Each Disbursement this Period 91.72
City Baytown	State TX Zip Code 77523	
Purpose of Disbursement Food and Beverage	Category/Type	Transaction ID : SB17.4804 [MEMO ITEM]
Candidate Name		
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).....	235.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 40			
	<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)
STREUSAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JJones Consulting LLC			Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014		
Mailing Address 1066 Apache Falls Drive			Amount of Each Disbursement this Period 1333.50		
City Katy	State TX	Zip Code 77450	Transaction ID : SB17.4721		
Purpose of Disbursement Professional Consulting Services		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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. JJones Consulting LLC			Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014		
Mailing Address 1066 Apache Falls Drive			Amount of Each Disbursement this Period 413.31		
City Katy	State TX	Zip Code 77450	Transaction ID : SB17.4723		
Purpose of Disbursement Professional Consulting Services		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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. JP Morgan Chase Bank			Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014		
Mailing Address PO Box 659754			Amount of Each Disbursement this Period 60.00		
City San Antonio	State TX	Zip Code 78265	Transaction ID : SB17.4661		
Purpose of Disbursement Campaign Bank Fees		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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).....	1806.81
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 24 OF 40			
	<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)
STREUSAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JP Morgan Chase Bank			Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address PO Box 659754			Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.4662
City San Antonio	State TX	Zip Code 78265	
Purpose of Disbursement Campaign Bank Fees		Candidate Name	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) B. JP Morgan Chase Bank			Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address PO Box 659754			Amount of Each Disbursement this Period 60.00 Transaction ID : SB17.4663
City San Antonio	State TX	Zip Code 78265	
Purpose of Disbursement Campaign Bank Fees		Candidate Name	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. JP Morgan Chase Bank			Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address PO Box 659754			Amount of Each Disbursement this Period 60.00 Transaction ID : SB17.4664
City San Antonio	State TX	Zip Code 78265	
Purpose of Disbursement Campaign Bank Fees		Candidate Name	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:	

SUBTOTAL of Disbursements This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 40			
	<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)
STREUSAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JP Morgan Chase Bank		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address PO Box 659754		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.4665
City San Antonio State TX Zip Code 78265	Purpose of Disbursement Campaign Bank Fees	
Candidate Name	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) B. JP Morgan Chase Bank		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address PO Box 659754		Amount of Each Disbursement this Period 25.00 Transaction ID : SB17.4666
City San Antonio State TX Zip Code 78265	Purpose of Disbursement Campaign Bank Fees	
Candidate Name	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. JP Morgan Chase Bank		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address PO Box 659754		Amount of Each Disbursement this Period 15.00 Transaction ID : SB17.4667
City San Antonio State TX Zip Code 78265	Purpose of Disbursement Campaign Bank Fees	
Candidate Name	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:		

SUBTOTAL of Disbursements This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 40	
	<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)
STREUSAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Robert Papierz		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 8818 Travis Hills Drive #222		Amount of Each Disbursement this Period 589.00 Transaction ID : SB17.4704
City Austin State TX Zip Code 78735	Purpose of Disbursement Professional Services	
Candidate Name	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) B. Pathfinder Communications		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address 115 Medalist		Amount of Each Disbursement this Period 15800.00 Transaction ID : SB17.4683
City Austin State TX Zip Code 78734	Purpose of Disbursement Campaign Advertising	
Candidate Name	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. Perception Insight		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 815A Brazos #425		Amount of Each Disbursement this Period 14540.00 Transaction ID : SB17.4714
City Austin State TX Zip Code 78701	Purpose of Disbursement Campaign Survey Expense	
Candidate Name	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:		

SUBTOTAL of Disbursements This Page (optional).....	30929.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 40	
	<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)
STREUSAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement MM / DD / YYYY 02 / 19 / 2014
Mailing Address 401 W 15th Street		Amount of Each Disbursement this Period 287.50 Transaction ID : SB17.4672
City Austin State TX Zip Code 78701	Purpose of Disbursement Campaign Merchant Fees	
Candidate Name		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) B. Piryx		Date of Disbursement MM / DD / YYYY 02 / 25 / 2014
Mailing Address 401 W 15th Street		Amount of Each Disbursement this Period 57.50 Transaction ID : SB17.4673
City Austin State TX Zip Code 78701	Purpose of Disbursement Campaign Merchant Fees	
Candidate Name		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. Piryx		Date of Disbursement MM / DD / YYYY 02 / 25 / 2014
Mailing Address 401 W 15th Street		Amount of Each Disbursement this Period 345.00 Transaction ID : SB17.4674
City Austin State TX Zip Code 78701	Purpose of Disbursement Campaign Merchant Fees	
Candidate Name		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:		

SUBTOTAL of Disbursements This Page (optional).....	690.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 40			
	<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)
STREUSAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 401 W 15th Street		Amount of Each Disbursement this Period 14.38
City Austin State TX Zip Code 78701	Purpose of Disbursement Campaign Merchant Fees	
Candidate Name		Transaction ID : SB17.4675
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. Piryx		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 401 W 15th Street		Amount of Each Disbursement this Period 1.44
City Austin State TX Zip Code 78701	Purpose of Disbursement Campaign Merchant Fees	
Candidate Name		Transaction ID : SB17.4676
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. Piryx		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 401 W 15th Street		Amount of Each Disbursement this Period 1.44
City Austin State TX Zip Code 78701	Purpose of Disbursement Campaign Merchant Fees	
Candidate Name		Transaction ID : SB17.4677
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	17.26
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 29 OF 40			
	<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)
STREUSAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Piryx			Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014		
Mailing Address 401 W 15th Street			Amount of Each Disbursement this Period 5.75		
City Austin	State TX	Zip Code 78701	Transaction ID : SB17.4678		
Purpose of Disbursement Campaign Merchant Fees		Category/ Type			
Candidate Name					
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. Raconteur Media Co.			Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014		
Mailing Address 720 Brazos #400			Amount of Each Disbursement this Period 1900.00		
City Austin	State TX	Zip Code 78701	Transaction ID : SB17.4685		
Purpose of Disbursement Campaign Website Services		Category/ Type			
Candidate Name					
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. Raconteur Media Co.			Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014		
Mailing Address 720 Brazos #400			Amount of Each Disbursement this Period 3796.91		
City Austin	State TX	Zip Code 78701	Transaction ID : SB17.4725		
Purpose of Disbursement Campaign Website Services		Category/ Type			
Candidate Name					
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).....	5702.66
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 30 OF 40	
	<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)
STREUSAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Shrimp Boat Manny's		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 1324 West Church Street		Amount of Each Disbursement this Period 102.16
City Livingston State TX Zip Code 77351	Purpose of Disbursement Food and Beverage	
Candidate Name	Category/Type	Transaction ID : SB17.4802 [MEMO ITEM]
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. BENJAMIN EARL STREUSAND		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2014
Mailing Address 7011 Augusta Pines Cove		Amount of Each Disbursement this Period 2905.07
City SPRING State TX Zip Code 77389	Purpose of Disbursement In-kind - Travel, Meals and Fees	
Candidate Name	Category/Type	Transaction ID : SB17.4787
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: TX District: 10	

Full Name (Last, First, Middle Initial) c. Super 8		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2014
Mailing Address P.O. Box 4090		Amount of Each Disbursement this Period 81.78
City Aberdees State SD Zip Code 57401	Purpose of Disbursement Travel - Lodging	
Candidate Name	Category/Type	Transaction ID : SB17.4801 [MEMO ITEM]
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).....	2905.07
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 31 OF 40		
	<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)
STREUSAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TDGT		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address P.O. Box 2911		Amount of Each Disbursement this Period 650.00
City League City	State TX	
Zip Code 77574	Purpose of Disbursement Campaign Advertising	Transaction ID : SB17.4733
Candidate Name	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) B. Texas GOP Store		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 404 I-45 South		Amount of Each Disbursement this Period 3792.81
City Huntsville	State TX	
Zip Code 77340	Purpose of Disbursement Sign Printing	Transaction ID : SB17.4717
Candidate Name	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. Texas GOP Store		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 404 I-45 South		Amount of Each Disbursement this Period 1661.64
City Huntsville	State TX	
Zip Code 77340	Purpose of Disbursement Signs	Transaction ID : SB17.4831
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6104.45
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 32 OF 40	
	<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)
STREUSAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2014
Mailing Address 77 W. Wachter Drive		Amount of Each Disbursement this Period 1177.50
City Chicago	State IL Zip Code 60601	
Purpose of Disbursement Travel - Airfare	Candidate Name	Transaction ID : SB17.4794
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Vital Signs of Texas		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 1031 E. 23rd Street		Amount of Each Disbursement this Period 4500.00
City Houston	State TX Zip Code 77009	
Purpose of Disbursement Campaign Sign Placement	Candidate Name	Transaction ID : SB17.4703
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Vital Signs of Texas		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 1031 E. 23rd Street		Amount of Each Disbursement this Period 3000.00
City Houston	State TX Zip Code 77009	
Purpose of Disbursement Campaign Sign Placement	Candidate Name	Transaction ID : SB17.4700
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 40			
	<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)
STREUSAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Carrie Whillock			Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014	
Mailing Address 20334 Evening Primrose Lane			Amount of Each Disbursement this Period 821.75	
City Tomball	State TX	Zip Code 77375	Transaction ID : SB17.4695	
Purpose of Disbursement Campaign text services and mileage		Category/ Type		
Candidate Name				
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. Carrie Whillock			Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014	
Mailing Address 20334 Evening Primrose Lane			Amount of Each Disbursement this Period 1035.00	
City Tomball	State TX	Zip Code 77375	Transaction ID : SB17.4715	
Purpose of Disbursement Professional Services		Category/ Type		
Candidate Name				
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. Carrie Whillock			Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014	
Mailing Address 20334 Evening Primrose Lane			Amount of Each Disbursement this Period 976.96	
City Tomball	State TX	Zip Code 77375	Transaction ID : SB17.4773	
Purpose of Disbursement Travel Expenses Reimbursements		Category/ Type		
Candidate Name				
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).....	2833.71
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 34 OF 40	
	<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)
STREUSAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Carrie Whillock		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 20334 Evening Primrose Lane		Amount of Each Disbursement this Period 778.25
City Tomball	State TX	
Zip Code 77375	Purpose of Disbursement Mileage	Transaction ID : SB17.4773.0
Candidate Name	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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Carrie Whillock		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 20334 Evening Primrose Lane		Amount of Each Disbursement this Period 1100.00
City Tomball	State TX	
Zip Code 77375	Purpose of Disbursement Professional Services	Transaction ID : SB17.4724
Candidate Name	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. Windstead PC		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 1100 JP Morgan Chase Tower 600 Travis Street		Amount of Each Disbursement this Period 5000.00
City Houston	State TX	
Zip Code 77002	Purpose of Disbursement Legal Services	Transaction ID : SB17.4708
Candidate Name	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:		

SUBTOTAL of Disbursements This Page (optional).....	6100.00
TOTAL This Period (last page this line number only).....	244274.82

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4403

STREUSAND FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

BENJAMIN EARL STREUSAND

Primary

General

Other (specify) ▼

Mailing Address

7011 Augusta Pines Cove

City

State

ZIP Code

SPRING

TX

77389

Original Amount of Loan

250000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

250000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 12 M /

D 26 D /

Y 2013 Y

M M /

D D /

Y Y Y Y

0.00 % (apr)

Yes

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)..... ▶

250000.00

TOTALS This Period (last page in this line only)..... ▶

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4564

STREUSAND FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

BENJAMIN EARL STREUSAND

Primary

General

Other (specify) ▼

Mailing Address

7011 Augusta Pines Cove

City

State

ZIP Code

SPRING

TX

77389

Original Amount of Loan

100000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100000.00

TERMS

Date Incurred

M 01 / D 21 / Y 2014 Y

Date Due

M M / D D / Y Y Y Y

Interest Rate

0.00 % (apr)

Secured:

Yes 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)..... ▶

100000.00

TOTALS This Period (last page in this line only)..... ▶

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4565

STREUSAND FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

BENJAMIN EARL STREUSAND

Primary

General

Other (specify) ▼

Mailing Address

7011 Augusta Pines Cove

City

State

ZIP Code

SPRING

TX

77389

Original Amount of Loan

150000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

150000.00

TERMS

Date Incurred

MM / DD / YYYY
02 / 05 / 2014

Date Due

MM / DD / YYYY

Interest Rate

0.00 % (apr)

Secured:

Yes 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)..... ▶

150000.00

TOTALS This Period (last page in this line only)..... ▶

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4710

STREUSAND FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

BENJAMIN EARL STREUSAND

Primary

General

Other (specify) ▼

Mailing Address

7011 Augusta Pines Cove

City

State

ZIP Code

SPRING

TX

77389

Original Amount of Loan

100000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100000.00

TERMS

Date Incurred

M 03 / D 10 / Y 2014 Y

Date Due

M M / D D / Y Y Y Y

Interest Rate

0.00 % (apr)

Secured:

Yes

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)..... ▶

100000.00

TOTALS This Period (last page in this line only)..... ▶

600000.00

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 39 OF 40
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

STREUSAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Anthem Media		Nature of Debt (Purpose): Campaign Advertising
Mailing Address 5524 Bee Caves Road Ste B-5		
City Austin	State TX	Zip Code 78746

Outstanding Balance Beginning This Period 21899.08	Transaction ID : SD10.4624	
Amount Incurred This Period 0.00	Payment This Period 21899.08	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Clark Hill P.L.C.		Nature of Debt (Purpose): Campaign Legal Fees Compliance Issues
Mailing Address 601 Pennsylvania Ave NW North Bldg, Ste 1000		
City Washington	State DC	Zip Code 20004

Outstanding Balance Beginning This Period 2030.00	Transaction ID : SD10.4622	
Amount Incurred This Period 0.00	Payment This Period 2030.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Four One Three Communications		Nature of Debt (Purpose): Campaign Data Management Consulting & Direct Mail
Mailing Address PO Box 1153		
City Austin	State TX	Zip Code 78767

Outstanding Balance Beginning This Period 14373.15	Transaction ID : SD10.4620	
Amount Incurred This Period 0.00	Payment This Period 14373.15	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)	0.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

STREUSAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Orion Strategies, LLC		Nature of Debt (Purpose): Professional Services
Mailing Address PO Box 427		
City Austin	State TX	Zip Code 78767

Outstanding Balance Beginning This Period	Transaction ID : SD10.4835	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="21500.00"/>	<input type="text" value="0.00"/>	<input type="text" value="21500.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Vital Signs of Texas		Nature of Debt (Purpose): Campaign Sign Placement
Mailing Address 1031 E. 23rd Street		
City Houston	State TX	Zip Code 77009

Outstanding Balance Beginning This Period	Transaction ID : SD10.4736	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="3000.00"/>	<input type="text" value="0.00"/>	<input type="text" value="3000.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	Zip Code

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="24500.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="24500.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="600000.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="624500.00"/>