12050813037

FE5AN018

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS

12 MAY 18 AM 10: 12

Office Use Only

NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typ over the lines.	ing, type	l2FE4M5	6
TIM WINTIL	L FOR COM	J.G.R.E.SS.		<u> </u>	
ADDRESS (number and street)	2414 MO	RINI IN G DR			
Check if different than previously reported. (ACC)	BAYTOWN			X	1,7,5,2,0,-1
2. FEC IDENTIFICATION N	UMBER ▼	CITY	st	ATE A	ZIP CODE A STATE ▼ DISTRICT
C005148	2,8 3. 1	S THIS X NE			
4. TYPE OF REPORT (Cr (a) Quarterly Reports: April 15 Quarterly	Report (Q1)	2-Day PRE -Election Re Primary (12 Convention	P) : :	General (1	
July 15 Quarterly f		Election on 0 5	29 2	zó í á	in the TX
January 31 Year-E	nd Report (YE) (c) 3	0-Day POST- Election R	7. - -	Runoff (30	OR) Special (30S)
Termination Report	· · ·	Election on	/ (G :G / / ·W	and and the Land Control of the Miles One of the Control	01-1
	4 01 20				2012
I certify that I have examined to Type or Print Name of Treasure	Clasti.	st of my knowledge and	d belief it is true	correct and	d complete.
Signature of Treasurer	m>	X	Dat		14/2612
NOTE: Submission of false, error Office	neous, or incomplete inform	mation may subject the p	erson signing this	Report to t	
Use Only				1	FEC FORM 3 (Revised 02/2003)

12030813038

Write or Type Committee Name_ CONGRESS

Report Covering the Period:

From:

84 61 2012

To: 05'09'2012

		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))	1.975.00	98.75.32
	(b) Total Contribution Refunds (from Line 20(d))	0.00	000
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	1,975.00	987532
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	1.758.59	9.45897
	(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	000
	(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	1,758,59	9.658.97
8.	Cash on Hand at Close of Reporting Period (from Line 27)	26641	
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 Sohedule C and/or Schedule D)	0,00	

For further information contact:

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

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

FEC Form 3 (Revised 12/2003)

DETAILED SUMMARY PAGE

of Receipts

Page 3

Write or Type Committee Name

TIM WINTILL FOR CONGRESS

Report Covering the Period:

12030813039

From

04 01 2012

To: 05'09'2012

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)	1.4.75.00	3.3.75.00		
	(ii) Unitemized	0.00 1.475.00	000 337500		
	(b) Political Party Committees	0,00	0.00		
	(d) The Candidate	1975.00	987532		
12.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	000		
13.	LOANS: (a) Made or Guaranteed by the Candidate	DDD	000		
	(b) All Other Loans	0.00	0.00		
14.	OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00		
15.	OTHER RECEIPTS (Dividends, Interest, etc.)	000	000		
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)		1,975,00	9.8.75.3.2		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

COLUMN A COLUMN B II. DISBURSEMENTS **Total This Period Election Cycle-to-Date** 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate..... Of All Other Loans TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other Than Political Committees Political Party Committees..... (b) Other Political Committees (such as PACs)..... (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... 25. SUBTOTAL (add Line 23 and Line 24)..... 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....

SCHEDULE A (FEC Form 3)

OF 4 **PAGE** FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the 11a ITEMIZED RECEIPTS 11b 11c **Detailed Summary Page** 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) LONGRESS Full Name (Last, First, Middle Initial), ambo Date of Receipt Mailing Address City Zip Code West Virginia FEC ID number of contributing Amount of Each Receipt this Period federal political committee. <u>alliki imkil likoz aktor Ambakoto .</u> Name of Employer Occupation Receipt For: **Election Cycle-to-Date** X Primary General Other (specify) Full_Name (Last, First, Middle Initial) Date of Receipt State Zip Code FEC ID number of contributing Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date **Primary** General 10000 Other (specify) Date of Receipt Mailing Address Zip Code FEC ID number of contributing Amount of Each Receipt this Period federal political committee. general section of Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... de la companya de la

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

PAGE 2 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **1**11a 11b Detailed Summary Page 13a 13b Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or fer commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) DNGRESS Full Name (Last, First, Date of Receipt Mailing Address 09 2012 Zip Code FEC ID number of contributing Amount of Each Receipt this Period federal political committee. 10000 Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General 100.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address 04 13 2012 City State Zip Code FEC ID number of contributing Amount of Each Receipt this Period federal political committee. 10000 Name of Employer Occupation Receipt For: Election Cycle-to-Date | Primary General 100,00 Other (specify) Date of Receipt Mailing Address FEC ID number of contributing Amount of Each Receipt this Period federa! political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General 250,00 Other (specify) SUBTOTAL of Receipts This Page (optional).....

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

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

PAGE OF FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the 11a 11b 11d 11c **Detailed Summary Page** 13a 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) LONGRESS Date of Receipt Mailing State Zip Code Cita FEC ID number of contributing Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt State FEC ID humber of contributing Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General 10000 Other (specify) First, Middle Initial) Date of Receipt Mailing Addre City State Zip Code FEC ID number of contributing Amount of Each Receipt this Period federal political committee. m mengeli pakaraka mbawakan bina Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General 10000 Other (specify) SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)...... 40.0基出现的特别 - **第**009年20

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

PAGE FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the 11a 11c **Detailed Summary Page** 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) OR CONGRESS Full Name (Last, First, Middle Initial) routman Date of Receipt Mailing Address City Zip Code exas FEC ID number of contributing Amount of Each Receipt this Period federal political committee. ह्मा ५००% मार्थः एकतः ह una craico acritir a miscolai catin ci Name of Employer Occupation Receipt For: Election Cycle-to-Date | Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address M M / D D / Y Y Y X City State Zip Code FEC ID number of contributing Amount of Each Receipt this Period federal political committee. பார் நடித்த கூறுக்கு நடித்த கொண்டிய வருக்கு கொண்டு रामाध्यक्ष । त्रुष्ट । वर्ष्य प्रमुख्य वर्ष्य । वर्ष्य प्रमुख्य वर्षे Name of Employer Occupation um rår sek i riskuvuksi sekriusskrijas etrakniuskseetikasu Receipt For: Election Cycle-to-Date Primary General पुरव्यक्षण पश्चाप्रसम्बद्धप्रकार क्षाप्त कृष्ट एक्षण मुख्य व्यवस्था स्वयस्थ Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code to will be controlled to the original of the equation of the FEC ID number of contributing Company and some of the design of the com-Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General า กระสาทาสาย (หลุดราช สามสุทา) สาขามสาย (สาย (ค.ศ.)) Other (specify) المستعدلات ومرافقية منهم الأكنيس مر<u>فة الممثلاث ومراوي وروفي المناس</u>م مراوعيات SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE OF (check only one) 17
Any information copied from such Reports and Statements nor for commercial purposes, other than using the name and	nay not be sold or used by any address of any political commit	person for the purpose of soliciting contributions
NAME OF COMMITTEE (IN FUII) TIM WINTILL FOR CONGR	ESS	
Full Name (Last, First, Middle Initial) Mailing Address		Date of Disbursement
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
Candidate Name Office Sought: House Disbursement For Senate Primary Other (state: District:	General	
Full Name (Last, First, Middle Initial) Mailing Address		Date of Disbursement
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement Candidate Name	Category. Type	
Office Sought: House Disbursement Fo Senate Primary President Other (s	General	
Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address City State Z	ip Code	, sufficient. Amelinatina ma sua esta catala de la
Purpose of Disbursement	j, -4 v	Amount of Each Disbursement this Period
Candidate Name	Category. Type	
Office Sought: House Disbursement Fo	General	
SUBTOTAL of Disbursements This Page (optional)		The control of the co
TOTAL This Period (last page this line number only)		the state of the s

SCHEDULE C (FEC Form 3) LOANS

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

PAGE OF

DANS	Detailed Suremary Page (check only one) 13a
ME OF COMMITTEE (In Full)	
LOAN SOURCE Full Name (Last, First, Middle Initial)	Liberting
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election: Primary
Mailing Address	General Other (specific)
Mailing Address	Other (specify) ▼
City State ZIP	Code
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	er Gregorian (Archivilla) denocada Gregorian (Archiventa) en en esta Campani.
Date Incurred Date D	
List All Endorsers or Guarantors (if any) to Loan Source	
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
	Amount (1
City State ZIP Code	Guaranteed Outstanding:
UBTOTALS This Period This Page (optional)	tan geringung menangkan kerangkangan geringung menangkan
OTALS This Period (last page in this line only)	Control of the contro
	. If no Schedule D. carry forward to appropriate line of Summary

SCHEDULE C-1 (FEC Form 3) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
Information found on
Page ____ of Schedule C

Federal Election Commission, Washington, D.C. 20463		` <u>-</u>		
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER			
	्राच्या चात्रा । इत्याक्ष्याम् ए क्ष्याम् । १६८७ रह्न			
TIM WINTILL FOR CONE	IRESS			
LENDING INSTITUTION (LENDER)	Amount of Loan	Interest Rate (APR)		
Full Name	্ৰাজ্য ৰ কিংকে কামৰে কাংকা	ragion report of the commence and executed		
	ுக்கம்கோர் நடிக்க கொட்டு கொடிக்	·		
Mailing Address	Date Incurred or Established	M M / Q Q / Y Y Y Y		
City State Zip Code	Date Due			
A. Has loan been restructured? No Yes	If yes, date originally incurred	W W / October / W Y Y Y		
B. If line of credit, Amount of this Draw:	Outstanding			
C. Are other parties secondarily liable for the debt incur No Yes (Endorsers and guarantors m	nust be reported on Schedule C.)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? No Yes If yes, specify: Does the lender have a perfected secu				
		nterest in it? No Yes		
E. Are any future contributions or future receipts of inte collateral for the loan? No Yes If yes,	specify:	What is the estimated value?		
	Location of account:	<u> </u>		
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).				
Date account established:	Address:			
M M / O O / W W W	City, State, Zip:			
F. If neither of the types of collateral described above exceed the loan amount, state the basis upon which	was pledged for this loan, or if the thing this loan was made and the bas	e amount pledged does not equal or is on which it assures repayment.		
G. COMMITTEE TREASURER		DATE		
Typed Name Signature				
H. Attach a signed copy of the loan agreement.				
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the are accurate as stated above. II. The loan was made on terms and conditions (in similar extensions of credit to other borrowers). III. This institution is aware of the requirement that complied with the requirements set forth at 11.	ncluding interest rate) no more far of comparable credit worthiness. t a loan must be made on a basis	vorable at the time than those imposed for swhich assures repayment, and has		
AUTHORIZED REPRESENTATIVE		DATE		
Typed Name		[[[] [] [] [] [] [] [] [] []		
Signature	itle			

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS

(Use separate schedule(s) for each numbered line) PAGE OF /
FOR LINE NUMBER:
(check only one) 9

luding	Loans	!		ered line)	(check drily drie)	10
	COMMITTEE (In Full)	^				
TIM	WINTILL FOR	ONGRESS				
A. Full I	Name (Last, First, Middle Initial) of De			Nature of D	ebt (Purpose):	
Mailing A	∆ddress					
Widming /	-dui 655					
City	State	Zip Code				
Outsta	anding Balance Beginning This Period					
	Amount Incurred This Period	Payment This Period	o egi i j	Outstandi	ng Balance at Clos	se of This Period
, a.	1911 - Millia II. ver ili Millian II. Alburi Millian II. Alburi	Live of the many sector Fluid on the 28	: :. : <u>حن</u> د :	Li tokasi da	andMarska adknom Munk	ا ا <u>ئسند م</u> رحد یو در
B. Full N	lame (Last, First, Middle Initial) of Deb	otor or Creditor		Nature of D	ebt (Purpose):	
Mailing A	Address					
City	State	Zip Code				
Oily	olulo	Zip Codo				
n um nyem Pan nuku	Amount Incurred This Period	Payment This Period	roma all con		ng Balance at Clos	
,i		umaani kood oo maana in 19. maana in 19.	:		. 2011. Size (18 1720) 18 170 271 (18 1720)	}
C. Full	Name (Last, First, Middle Initial) of De	btor or Creditor		Nature of D	ebt (Purpose):	
Mailing A	Address					
City		State Zip Code				
Outsta	anding Balance Beginning This Period					
. () }- 4	maga e∰ga pikaga wa an Mga ka asika asika an maja aga ga					
i in the same	Amount Incurred This Period	Payment This Period	arta nazir		ng Balance at Clos	
	on in 1990 in Alberta de San State (1991 in 1991 in 19 De la companya de la	,			in Solvens His 1994	
				; 4 : 45	an grayera	alst şileti
SUBTO	TALS This Period This Page (optional)	▶			المتحاق عبدا
TOTALS	S This Period (last page this line num	ber only)	>	The same of the sa		
TOTAL	OUTSTANDING LOANS from Schedu	ule C (last page only)	>		ing radio ginagriing	r main máint le com. Tagairtí agus le cann.
ADD 21	and 3) and come formers to appropri	ate line of Summary Page (last page o	noted •	Tyd Lide Laboration		anders of section (
~~~~ 2)	and of and carry forward to appropri	iaio inio di Juliniaiy Paye (iasi paye d	// IIY/ "	مهدد مؤسسي		تستيوس 🐿 تستخوست

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING D The FEC added this page to the end of this filing to indicate ho	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked 5/14/12
Delivery Confirmation™ or Signature Confirmation	ation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Business	Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	eipt or Postmarked
h	5/21/12
PREPARER (3/2005)	DATE PREPARED