

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
KYLE MCCARTER FOR CONGRESS COMMITTEE

ADDRESS (number and street) 40 COMMERCE LANE
 Check if different than previously reported. (ACC) LEBANON IL 62264

2. **FEC IDENTIFICATION NUMBER** C C00589739 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
IL 15

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

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on 03 / 15 / 2016 in the State of IL
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period 01 / 01 / 2016 through 02 / 24 / 2016

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 Kelly Standfield
Signature of Treasurer Kelly Standfield [Electronically Filed] Date 03 / 03 / 2016

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

KYLE MCCARTER FOR CONGRESS COMMITTEE

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)).... | 171018.20 | 251960.34 |
| (b) Total Contribution Refunds (from Line 20(d)) | 53963.69 | 55963.69 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 117054.51 | 195996.65 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 137504.15 | 189054.75 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 0.00 | 43.29 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 137504.15 | 189011.46 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 106985.19 | |
| 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)..... | 100000.00 | |

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

KYLE MCCARTER FOR CONGRESS COMMITTEE

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)..... | 147030.24 | 221643.93 |
| (ii) Unitemized | 17012.00 | 21152.00 |
| (iii) TOTAL of contributions from individuals | 164042.24 | 242795.93 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 6975.96 | 9164.41 |
| (d) The Candidate | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 171018.20 | 251960.34 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 40000.00 | 100000.00 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 40000.00 | 100000.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 0.00 | 43.29 |
| 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)..... | 211018.20 | 352003.63 |

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 137504.15 | 189054.75 |
| 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 | 53963.69 | 55963.69 |
| (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))..... | 53963.69 | 55963.69 |
| 21. OTHER DISBURSEMENTS | 0.00 | 0.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶ | 191467.84 | 245018.44 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 87434.83 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 211018.20 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 298453.03 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 191467.84 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 106985.19 |

**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 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Duane Alton

Mailing Address 712 North Lancashire Lane

City State Zip Code
Liberty Lake WA 99019

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 14 / 2016

Transaction ID : SA11AI.4950

Amount of Each Receipt this Period
250.00

Memo Item
See Earmark Memo

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 14 / 2016

Transaction ID : SA11AI.4950.0

Amount of Each Receipt this Period
250.00

Memo Item
Earmark

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

Mailing Address 40 Market St
Apt 601

City State Zip Code
Morristown NJ 07960

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

Name of Employer Occupation
GGHC & Co. Broker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 29 / 2016

Transaction ID : SA11AI.4462

Amount of Each Receipt this Period
2500.00

Memo Item
See Earmark Memo

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

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

2750.00

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

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

FOR LINE NUMBER: PAGE 6 OF 95
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
18495.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 29 / 2016

Transaction ID : SA11AI.4462.0

Amount of Each Receipt this Period
2500.00

Memo Item
Earmark

B. Full Name (Last, First, Middle Initial)
Alfred A Angelo

Mailing Address 340 N Ave E

City Cranford State NJ Zip Code 07016

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

Name of Employer Occupation
Angelo & O'Brien PA CPA

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2016

Transaction ID : SA11AI.5110

Amount of Each Receipt this Period
500.00

Memo Item
See Earmark Memo

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
50598.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2016

Transaction ID : SA11AI.5110.0

Amount of Each Receipt this Period
500.00

Memo Item
Earmark

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

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

500.00

**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 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | | |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) Robert Arnott | | Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 09 / 2016 | |
| Mailing Address 4100 Newport Place Dr Ste 750 | | Transaction ID : SA11AI.4576 | |
| City Newport Beach | State CA | Zip Code 92660 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2700.00 | |
| Name of Employer Research Affiliates | Occupation Investments | | |
| Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 2700.00 | | |

| | | | |
|---|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) CLUB FOR GROWTH | | Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 09 / 2016 | |
| Mailing Address 2001 L ST NE STE 600 | | Transaction ID : SA11AI.4576.0 | |
| City WASHINGTON | State DC | Zip Code 20036 | |
| FEC ID number of contributing federal political committee. C C90009945 | | Amount of Each Receipt this Period 2700.00 | |
| Name of Employer | | Occupation | |
| Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 39723.00 | | |

| | | | |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) Robert Arnott | | Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 09 / 2016 | |
| Mailing Address 4100 Newport Place Dr Ste 750 | | Transaction ID : SA11AI.4949 | |
| City Newport Beach | State CA | Zip Code 92660 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2700.00 | |
| Name of Employer Research Affiliates | Occupation Investments | | |
| Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 5400.00 | | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 5400.00 |
| TOTAL This Period (last page this line number only)..... | 5400.00 |

**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 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
42423.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 09 / 2016

Transaction ID : SA11AI.4949.0

Amount of Each Receipt this Period
2700.00

Memo Item
Earmark

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

Mailing Address 1555 Astor St

City State Zip Code
Chicago IL 60610

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

Name of Employer Occupation

Information Requested Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 22 / 2016

Transaction ID : SA11AI.4585

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Cole A. Bailey

Mailing Address 6316 Xenia Iola Rd

City State Zip Code
Xenia IL 62899

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

Name of Employer Occupation

Information Requested Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 11 / 2016

Transaction ID : SA11AI.4995

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

3700.00

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

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

FOR LINE NUMBER: PAGE 9 OF 95
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Cynthia J. Bailey

Mailing Address 6121 Xenia Iola Rd

City State Zip Code
Xenia IL 62899

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 11 / 2016

Transaction ID : SA11AI.4999

Amount of Each Receipt this Period
 2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Darren A. Bailey

Mailing Address 6121 Xenia Iola Rd

City State Zip Code
Xenia IL 62899

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 11 / 2016

Transaction ID : SA11AI.4997

Amount of Each Receipt this Period
 2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Zachary A. Bailey

Mailing Address 720 Madison St

City State Zip Code
Louisville IL 62858

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 11 / 2016

Transaction ID : SA11AI.5001

Amount of Each Receipt this Period
 2700.00

Memo Item

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

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

8100.00

**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 10 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Wayne Barber Jr.

Mailing Address 219 Eden Park Blvd

City State Zip Code
Shiloh IL 62269

FEC ID number of contributing federal political committee.

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.4771

Amount of Each Receipt this Period

Memo Item

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

Mailing Address PO Box 190

City State Zip Code
Vandalia IL 62471

FEC ID number of contributing federal political committee.

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.5522

Amount of Each Receipt this Period

Memo Item
In-kind - Food and Drinks for Event

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

Mailing Address PO Box 190

City State Zip Code
Vandalia IL 62471

FEC ID number of contributing federal political committee.

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.4641

Amount of Each Receipt this Period

Memo Item

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

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: PAGE 11 OF 95
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Paula R. Barenfanger

Mailing Address 928 Conoco Rd

City Mulberry Grove State IL Zip Code 62262

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

Name of Employer None Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 29 / 2016

Transaction ID : SA11AI.4609

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Jane C Beneke

Mailing Address 4201 Armstrong Pkwy

City Dallas State TX Zip Code 75205

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

Name of Employer Self Employed Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2016

Transaction ID : SA11AI.5142

Amount of Each Receipt this Period
 500.00

Memo Item
See Earmark Memo

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2016

Transaction ID : SA11AI.5142.0

Amount of Each Receipt this Period
 500.00

Memo Item
Earmark

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 12 OF 95
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Kenneth Berger

Mailing Address 6229 Majorca Circle

City State Zip Code
Long Beach CA 60803

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 02 / 2016

Transaction ID : SA11AI.4891

Amount of Each Receipt this Period
300.00

Memo Item
See Earmark Memo

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
19948.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 02 / 2016

Transaction ID : SA11AI.4891.0

Amount of Each Receipt this Period
300.00

Memo Item
Earmark

C. Full Name (Last, First, Middle Initial)
Gareld L. Bilyew

Mailing Address 1719 E 935th Ave

City State Zip Code
Oblong IL 62449

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

Name of Employer Occupation
Pump Repair Specialst, Inc. President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 22 / 2016

Transaction ID : SA11AI.4597

Amount of Each Receipt this Period
1500.00

Memo Item

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

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

1800.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 13 OF 95

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
R. Dean Bingham

Mailing Address 1017 Beckham Dr

City Effingham State IL Zip Code 62401

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

Name of Employer Agracel, Inc. Occupation Real Estate Developer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 07 / 2016

Transaction ID : SA11AI.4769

Amount of Each Receipt this Period
 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Harry A. Brandt

Mailing Address 4711 Van Kleeck Dr

City New Smyrna Beach State FL Zip Code 32169

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2016

Transaction ID : SA11AI.5188

Amount of Each Receipt this Period
 2700.00

Memo Item
 See Earmark Memo

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 77393.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2016

Transaction ID : SA11AI.5188.0

Amount of Each Receipt this Period
 2700.00

Memo Item
 Earmark

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

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

3200.00

**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 14 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Anthony W. Bryant

Mailing Address 108 N. Barstow St

City State Zip Code
Waukesha WI 53188

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

Name of Employer Occupation
Century Fence Co. Business Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 08 / 2016

Transaction ID : SA11AI.4687

Amount of Each Receipt this Period
500.00

Memo Item
See Earmark Memo

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
31573.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 08 / 2016

Transaction ID : SA11AI.4687.0

Amount of Each Receipt this Period
500.00

Memo Item
Earmark

C. Full Name (Last, First, Middle Initial)
James P. Buchwald

Mailing Address 17156 Glen Rd

City State Zip Code
Mount Vernon OH 43050

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 02 / 2016

Transaction ID : SA11AI.4729

Amount of Each Receipt this Period
1000.00

Memo Item
See Earmark Memo

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 15 OF 95
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
21958.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2016

Transaction ID : SA11AI.4729.0

Amount of Each Receipt this Period
500.00

Memo Item
Earmark

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

Mailing Address PO Box 5005
Pmb 116

City State Zip Code
Rancho Santa Fe CA 92067

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

Name of Employer Occupation

Information Requested Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11AI.5256

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Robert L. Clark

Mailing Address 10510 Moxley Rd

City State Zip Code
Damascus MD 20872

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

Name of Employer Occupation

Information Requested Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11AI.4691

Amount of Each Receipt this Period
250.00

Memo Item
See Earmark Memo

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

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

500.00

**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 16 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
31073.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11AI.4691.0

Amount of Each Receipt this Period
250.00

Memo Item
Earmark

B. Full Name (Last, First, Middle Initial)
Charles S. Cohn

Mailing Address 9936 Villa Granito Ln

City Granite Bay State CA Zip Code 95746

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

Name of Employer Occupation
Wells Fargo Adviodors Financial Advisor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2016

Transaction ID : SA11AI.4938

Amount of Each Receipt this Period
500.00

Memo Item
See Earmark Memo

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
13095.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2016

Transaction ID : SA11AI.4938.0

Amount of Each Receipt this Period
500.00

Memo Item
Earmark

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

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

500.00

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

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

FOR LINE NUMBER: PAGE 17 OF 95
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
William L. Cook

Mailing Address 28431 Rochester Ct

City State Zip Code
Bonita Springs FL 34135

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

Name of Employer Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2016

Transaction ID : SA11AI.5194

Amount of Each Receipt this Period
1000.00

Memo Item
See Earmark Memo

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
74693.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2016

Transaction ID : SA11AI.5194.0

Amount of Each Receipt this Period
1000.00

Memo Item
Earmark

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

Mailing Address 13424 N 1000th St

City State Zip Code
Martinsville IL 62442

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

Name of Employer Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2016

Transaction ID : SA11AI.4721

Amount of Each Receipt this Period
300.00

Memo Item

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

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

1300.00

**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 18 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Richard K Davis

Mailing Address 7885 Saddlebrook Dr

City State Zip Code
Port Saint Lucie FL 34986

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 17 / 2016

Transaction ID : SA11AI.5102

Amount of Each Receipt this Period
250.00

Memo Item
See Earmark Memo

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48348.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 17 / 2016

Transaction ID : SA11AI.5102.0

Amount of Each Receipt this Period
250.00

Memo Item
Earmark

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

Mailing Address 160 N Fairview Ave
Ste 4

City State Zip Code
Goleta CA 93117

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 14 / 2016

Transaction ID : SA11AI.4955

Amount of Each Receipt this Period
250.00

Memo Item
See Earmark Memo

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

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

500.00

**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 19 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| WASHINGTON | DC | 20036 |

FEC ID number of contributing federal political committee. **C** C90009945

| | |
|------------------|------------|
| Name of Employer | Occupation |
| | |

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 14 / 2016

Transaction ID : SA11AI.4955.0

Amount of Each Receipt this Period
 _____ 250.00

Memo Item
 Earmark

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

Mailing Address 5928 Kensington Dr

| | | |
|-------|-------|----------|
| City | State | Zip Code |
| Plano | TX | 75093 |

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

| | |
|-----------------------|-----------------------|
| Name of Employer | Occupation |
| Information Requested | Information Requested |

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.5282

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
James P. Finnegan

Mailing Address 460 E Lake Shore Dr

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Barrington | IL | 60010 |

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

| | |
|-----------------------|-----------------------|
| Name of Employer | Occupation |
| Information Requested | Information Requested |

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 07 / 2016

Transaction ID : SA11AI.4767

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

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

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

_____ 1500.00

**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 20 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Arie Friedman

Mailing Address 394 Roger Williams Ave

City Highland Park State IL Zip Code 60035

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 05 / 2016

Transaction ID : SA11AI.5241

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address PO Box 9790

City Jackson State WY Zip Code 83002

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2016

Transaction ID : SA11AI.5067

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 445 Old Homestead Trail

City Duluth State GA Zip Code 30097

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

Name of Employer Information Requested Occupation Information Requested
 Gaby Foundation Trustee

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2016

Transaction ID : SA11AI.5314

Amount of Each Receipt this Period
2700.00

Memo Item
See Earmark Memo

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

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

4200.00

**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 21 OF 95 | | | |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| | 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 58793.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2016

Transaction ID : SA11AI.5314.0

Amount of Each Receipt this Period
 2700.00

Memo Item
 Earmark

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

Mailing Address 445 Old Homestead Trail

City Duluth State GA Zip Code 30097

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

Name of Employer Occupation
 Gaby Foundation Trustee

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2016

Transaction ID : SA11AI.5317

Amount of Each Receipt this Period
 2700.00

Memo Item
 See Earmark Memo

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 61493.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2016

Transaction ID : SA11AI.5317.0

Amount of Each Receipt this Period
 2700.00

Memo Item
 Earmark

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

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

2700.00

**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 22 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Richard Gaby

Mailing Address 445 Old Homestead Trail

City State Zip Code
Duluth GA 30097

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

Name of Employer Occupation
Gaby Foundation Trustee

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 24 / 2016

Transaction ID : SA11AI.5316

Amount of Each Receipt this Period
2700.00

Memo Item
See Earmark Memo

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
64193.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 24 / 2016

Transaction ID : SA11AI.5316.0

Amount of Each Receipt this Period
2700.00

Memo Item
Earmark

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

Mailing Address 445 Old Homestead Trail

City State Zip Code
Duluth GA 30097

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

Name of Employer Occupation
Gaby Foundation Trustee

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 24 / 2016

Transaction ID : SA11AI.5318

Amount of Each Receipt this Period
2700.00

Memo Item
See Earmark Memo

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

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

5400.00

**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 23 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 66893.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2016

Transaction ID : SA11AI.5318.0

Amount of Each Receipt this Period
 2700.00

Memo Item
Earmark

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

Mailing Address 3900 Sundown Dr

City McAllen State TX Zip Code 78503

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

Name of Employer Occupation

Information Requested Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 01 / 2016

Transaction ID : SA11AI.5236

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
C.L. Buddy Glover

Mailing Address 4393 N Illinois 130

City Olney State IL Zip Code 62450

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

Name of Employer Occupation

Information Requested Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 09 / 2016

Transaction ID : SA11AI.4667

Amount of Each Receipt this Period
 250.00

Memo Item

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

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

1250.00

**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 24 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | | |
|--|---|--|--|
| Full Name (Last, First, Middle Initial) A. Elena Goyanes | | Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 14 / 2016 | |
| Mailing Address 3215 Tarryhollow Dr | | Transaction ID : SA11AI.4979 | |
| City Austin State TX Zip Code 78703 | Amount of Each Receipt this Period 2700.00 | | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Memo Item See Earmark Memo | | |
| Name of Employer None Occupation Retired | Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| Election Cycle-to-Date 2700.00 | | | |

| | | | |
|--|---|--|--|
| Full Name (Last, First, Middle Initial) B. CLUB FOR GROWTH | | Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 14 / 2016 | |
| Mailing Address 2001 L ST NE STE 600 | | Transaction ID : SA11AI.4979.0 | |
| City WASHINGTON State DC Zip Code 20036 | Amount of Each Receipt this Period 2700.00 | | |
| FEC ID number of contributing federal political committee. C C90009945 | <input checked="" type="checkbox"/> Memo Item Earmark | | |
| Name of Employer Occupation | Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| Election Cycle-to-Date 7075.00 | | | |

| | | | |
|---|---|--|--|
| Full Name (Last, First, Middle Initial) C. Everado Goyanes | | Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 14 / 2016 | |
| Mailing Address 3215 Tarryhollow Dr | | Transaction ID : SA11AI.4976 | |
| City Austin State TX Zip Code 78703 | Amount of Each Receipt this Period 2700.00 | | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Memo Item See Earmark Memo | | |
| Name of Employer Information Requested Occupation Information Requested | Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| Election Cycle-to-Date 2700.00 | | | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 5400.00 |
| 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 25 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 4375.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 14 / 2016

Transaction ID : SA11AI.4976.0

Amount of Each Receipt this Period
 2700.00

Memo Item
Earmark

B. Full Name (Last, First, Middle Initial)
Charles W. Gregg Sr.

Mailing Address 950 Markham Woods Rd

City Longwood State FL Zip Code 32779

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

Name of Employer Occupation
Greater Properties, Inc. President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2016

Transaction ID : SA11AI.4797

Amount of Each Receipt this Period
 250.00

Memo Item
See Earmark Memo

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 19623.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2016

Transaction ID : SA11AI.4797.0

Amount of Each Receipt this Period
 250.00

Memo Item
Earmark

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

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

250.00

**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 26 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Marilyn Hayden

Mailing Address 10306 E. Calli de Las Brisas

City State Zip Code
Scottsdale AZ 85255

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2016

Transaction ID : SA11AI.4581

Amount of Each Receipt this Period
1000.00

Memo Item
See Earmark Memo

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
15595.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2016

Transaction ID : SA11AI.4581.0

Amount of Each Receipt this Period
1000.00

Memo Item
Earmark

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

Mailing Address 25 Saybrook Dr

City State Zip Code
Greensboro NC 27455

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 14 / 2016

Transaction ID : SA11AI.4958

Amount of Each Receipt this Period
500.00

Memo Item
See Earmark Memo

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

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

1500.00

**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 27 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 14 / 2016

Transaction ID : SA11AI.4958.0

Amount of Each Receipt this Period
500.00

Memo Item
Earmark

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

Mailing Address 2604 Haarmann St

City State Zip Code
Effingham il IL 62401

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

Name of Employer Occupation

Information Requested Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 03 / 2016

Transaction ID : SA11AI.5247

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Chalres O Heuerman

Mailing Address 14046 N 1600th St

City State Zip Code
Teutopolis IL 62467

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

Name of Employer Occupation

Information Requested Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2016

Transaction ID : SA11AI.5114

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

1250.00

**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 28 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Tatnall L. Hillman

Mailing Address 504 W Bleeker St

City State Zip Code
Aspen CO 81611

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

Name of Employer Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2016

Transaction ID : SA11AI.5184

Amount of Each Receipt this Period
2700.00

Memo Item
See Earmark Memo

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
69993.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2016

Transaction ID : SA11AI.5184.0

Amount of Each Receipt this Period
2700.00

Memo Item
Earmark

C. Full Name (Last, First, Middle Initial)
Tatnall L. Hillman

Mailing Address 504 W Bleeker St

City State Zip Code
Aspen CO 81611

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

Name of Employer Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2016

Transaction ID : SA11AI.5186

Amount of Each Receipt this Period
2700.00

Memo Item
See Earmark Memo

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

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

5400.00

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

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

FOR LINE NUMBER: PAGE 29 OF 95
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 72693.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2016

Transaction ID : SA11AI.5186.0

Amount of Each Receipt this Period
 2700.00

Memo Item
Earmark

B. Full Name (Last, First, Middle Initial)
David A. Holder Jr.

Mailing Address 12186 Carmichael Circle

City North Huntington State PA Zip Code 15642

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

Name of Employer Occupation

Information Requested Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11AI.4693

Amount of Each Receipt this Period
 200.00

Memo Item
See Earmark Memo

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 31773.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11AI.4693.0

Amount of Each Receipt this Period
 200.00

Memo Item
Earmark

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

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

200.00

**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 30 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
David W. Holmes

Mailing Address 9524 Heather Ct

City State Zip Code
Blue Ash OH 45242

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

Name of Employer Occupation
Curtiss-Wright Controller

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 02 / 2016

Transaction ID : SA11AI.4908

Amount of Each Receipt this Period
500.00

Memo Item
See Earmark Memo

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
21273.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 02 / 2016

Transaction ID : SA11AI.4908.0

Amount of Each Receipt this Period
500.00

Memo Item
Earmark

C. Full Name (Last, First, Middle Initial)
William B. Hotaling

Mailing Address 125 Quassaick Ave

City State Zip Code
New Windsor NY 12553

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 04 / 2016

Transaction ID : SA11AI.5252

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 31 OF 95
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
William B. Hotaling

Mailing Address 125 Quassaick Ave

City State Zip Code
New Windsor NY 12553

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

Name of Employer Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2016

Transaction ID : SA11AI.5029

Amount of Each Receipt this Period
500.00

Memo Item
See Earmark Memo

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
45623.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2016

Transaction ID : SA11AI.5029.0

Amount of Each Receipt this Period
500.00

Memo Item
Earmark

C. Full Name (Last, First, Middle Initial)
Peter H. Huizenga

Mailing Address 2215 York Rd Ste 500

City State Zip Code
Oak Brook IL 60523

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

Name of Employer Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11AI.4703

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

1500.00

**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 32 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Janet B. Hunsche

Mailing Address 12610 Niggli Rd

City Highland State IL Zip Code 62249

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2016

Transaction ID : SA11AI.4589

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address PO Box 60

City Lambertville State NJ Zip Code 08530

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2016

Transaction ID : SA11AI.4733

Amount of Each Receipt this Period
2700.00

Memo Item
See Earmark Memo

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
27358.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2016

Transaction ID : SA11AI.4733.0

Amount of Each Receipt this Period
2700.00

Memo Item
Earmark

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

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

3200.00

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

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

FOR LINE NUMBER: PAGE 33 OF 95
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Virginia James

Mailing Address **PO Box 60**

City **Lambertville** State **NJ** Zip Code **08530**

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

Name of Employer **None** Occupation **Retired**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 02 / 2016

Transaction ID : SA11AI.4735

Amount of Each Receipt this Period
2700.00

Memo Item
See Earmark Memo

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address **2001 L ST NE STE 600**

City **WASHINGTON** State **DC** Zip Code **20036**

FEC ID number of contributing federal political committee. **C C90009945**

Name of Employer **None** Occupation **None**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **24658.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 02 / 2016

Transaction ID : SA11AI.4735.0

Amount of Each Receipt this Period
2700.00

Memo Item
Earmark

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

Mailing Address **5 Turnberry Place**

City **Shoal Creek** State **AL** Zip Code **35242**

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

Name of Employer **None** Occupation **Retired**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 17 / 2016

Transaction ID : SA11AI.5071

Amount of Each Receipt this Period
500.00

Memo Item
See Earmark Memo

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

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

3200.00

**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 34 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48098.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2016

Transaction ID : SA11AI.5071.0

Amount of Each Receipt this Period
500.00

Memo Item
Earmark

B. Full Name (Last, First, Middle Initial)
Captain H.A. Johnson Jr.

Mailing Address 17491 Old Harmony Dr
Unit 202

City State Zip Code
Fort Myers FL 33908

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

Name of Employer Occupation

Information Requested Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2016

Transaction ID : SA11AI.5208

Amount of Each Receipt this Period
300.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Velinda S Johnson

Mailing Address 16 Hawkview Rd

City State Zip Code
Hudson NH 03051

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

Name of Employer Occupation

Information Requested Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2016

Transaction ID : SA11AI.5124

Amount of Each Receipt this Period
250.00

Memo Item
See Earmark Memo

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

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

550.00

**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 35 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
47098.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2016

Transaction ID : SA11AI.5124.0

Amount of Each Receipt this Period
250.00

Memo Item
Earmark

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

Mailing Address PO Box 237

City State Zip Code
Vincennes IN 47591

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

Name of Employer Occupation

Information Requested Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 29 / 2016

Transaction ID : SA11AI.5232

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
James M Jones

Mailing Address 4510 S Komensky Ave

City State Zip Code
Chicago IL 60632

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

Name of Employer Occupation

Information Requested Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2016

Transaction ID : SA11AI.5160

Amount of Each Receipt this Period
400.00

Memo Item
See Earmark Memo

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

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

1400.00

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

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

FOR LINE NUMBER: PAGE 36 OF 95
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
67293.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2016

Transaction ID : SA11AI.5160.0

Amount of Each Receipt this Period
400.00

Memo Item
Earmark

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

Mailing Address 515 Madison Ave
Floor 31

City New York State NY Zip Code 10022

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

Name of Employer Occupation
Kayser & Redfern, LLP Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11AI.4697

Amount of Each Receipt this Period
500.00

Memo Item
See Earmark Memo

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
32273.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11AI.4697.0

Amount of Each Receipt this Period
500.00

Memo Item
Earmark

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

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

500.00

**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 37 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
David H. Kellogg

Mailing Address 3619 Vermont St

City State Zip Code
Arlington VA 22207

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

Name of Employer Occupation
Solers Defense Contractor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 24 / 2016

Transaction ID : SA11AI.5170

Amount of Each Receipt this Period
1000.00

Memo Item
See Earmark Memo

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
73693.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 24 / 2016

Transaction ID : SA11AI.5170.0

Amount of Each Receipt this Period
1000.00

Memo Item
Earmark

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

Mailing Address PO Box 7066

City State Zip Code
Carmel CA 93921

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 08 / 2016

Transaction ID : SA11AI.4853

Amount of Each Receipt this Period
250.00

Memo Item
See Earmark Memo

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

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

1250.00

**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 38 OF 95 | | | |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| | 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 30798.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11AI.4853.0

Amount of Each Receipt this Period
 250.00

Memo Item
 Earmark

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

Mailing Address 5465 Mills Civic Pkwy Suite 400

City West Des Moines State IA Zip Code 50266

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

Name of Employer Occupation

Information Requested Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 03 / 2016

Transaction ID : SA11AI.5243

Amount of Each Receipt this Period
 2700.00

Memo Item

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

Mailing Address 31483 Morning Star Dr

City Evergreen State CO Zip Code 80439

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

Name of Employer Occupation
 None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2016

Transaction ID : SA11AI.4899

Amount of Each Receipt this Period
 500.00

Memo Item
 See Earmark Memo

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

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

3200.00

**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 39 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 20473.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2016

Transaction ID : SA11AI.4899.0

Amount of Each Receipt this Period
 500.00

Memo Item
Earmark

B. Full Name (Last, First, Middle Initial)
William E. Lamonthe

Mailing Address 6160 Victory Dr

City Ave Maria State FL Zip Code 34142

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11AI.4719

Amount of Each Receipt this Period
 1000.00

Memo Item
See Earmark Memo

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 33273.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11AI.4719.0

Amount of Each Receipt this Period
 1000.00

Memo Item
Earmark

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

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

1000.00

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 40 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Henry A Langerak

Mailing Address **PO Box 85**

City **Hudsonville** State **MI** Zip Code **49426**

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

Name of Employer Information Requested
Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 17 / 2016

Transaction ID : SA11AI.5084

Amount of Each Receipt this Period
250.00

Memo Item
See Earmark Memo

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address **2001 L ST NE STE 600**

City **WASHINGTON** State **DC** Zip Code **20036**

FEC ID number of contributing federal political committee. **C C90009945**

Name of Employer Information Requested
Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
49098.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 17 / 2016

Transaction ID : SA11AI.5084.0

Amount of Each Receipt this Period
250.00

Memo Item
Earmark

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

Mailing Address **2 Longmeadow Drive**

City **Barrington** State **IL** Zip Code **60010**

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

Name of Employer Information Requested
Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
375.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 17 / 2016

Transaction ID : SA11AI.5334

Amount of Each Receipt this Period
375.00

Memo Item
See Earmark Memo

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

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

625.00

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

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

FOR LINE NUMBER: PAGE 41 OF 95
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 46348.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2016

Transaction ID : SA11AI.5334.0

Amount of Each Receipt this Period
 375.00

Memo Item
Earmark

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

Mailing Address PO Box 1510

City Glen Ellen State CA Zip Code 95442

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

Name of Employer Occupation
Paul Leach & Company Private Investment Banking

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 29 / 2016

Transaction ID : SA11AI.4458

Amount of Each Receipt this Period
 250.00

Memo Item
See Earmark Memo

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 15845.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 29 / 2016

Transaction ID : SA11AI.4458.0

Amount of Each Receipt this Period
 250.00

Memo Item
Earmark

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

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

250.00

**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 42 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Andy Lester

Mailing Address **PO Box 351**

City **Vandalia** State **IL** Zip Code **62471**

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

Name of Employer **Andy Lester Construction, Inc.** Occupation **General Contractor**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 29 / 2016

Transaction ID : SA11AI.4643

Amount of Each Receipt this Period
1500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Lanning Macfarland Jr.

Mailing Address **415 N State St Ste 1**

City **Chicago** State **IL** Zip Code **60654**

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

Name of Employer **None** Occupation **Retired**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 09 / 2016

Transaction ID : SA11AI.4862

Amount of Each Receipt this Period
500.00

Memo Item
See Earmark Memo

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address **2001 L ST NE STE 600**

City **WASHINGTON** State **DC** Zip Code **20036**

FEC ID number of contributing federal political committee. **C C90009945**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
37023.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 09 / 2016

Transaction ID : SA11AI.4862.0

Amount of Each Receipt this Period
500.00

Memo Item
Earmark

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 43 OF 95
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Allen D. Manteuffel

Mailing Address 1440 Champion Forest

City State Zip Code
Wheaton IL 60187

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2016

Transaction ID : SA11AI.5065

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Jonathan E. May

Mailing Address 7000 Lakepoint Dr

City State Zip Code
Oklahoma City OK 73116

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

Name of Employer Information Requested Occupation Information Requested
Self Employed Sales

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2016

Transaction ID : SA11AI.4587

Amount of Each Receipt this Period
500.00

Memo Item
See Earmark Memo

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Information Requested Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
13595.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2016

Transaction ID : SA11AI.4587.0

Amount of Each Receipt this Period
500.00

Memo Item
Earmark

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

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

1000.00

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

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

FOR LINE NUMBER: PAGE 44 OF 95
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Jerry McDaniel

Mailing Address **PO Box 327**

City **Newton** State **IL** Zip Code **62448**

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

Name of Employer Information Requested
Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 05 / 2016

Transaction ID : SA11AI.5254

Amount of Each Receipt this Period
2500.00

Memo Item

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

Mailing Address **116 South Charles**

City **Belleville** State **IL** Zip Code **62220**

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

Name of Employer Information Requested
Mike McGlynn Occupation Information Requested
Secretary

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 08 / 2016

Transaction ID : SA11AI.4715

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Michael L. McGlynn

Mailing Address **116 South Charles**

City **Belleville** State **IL** Zip Code **62220**

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

Name of Employer Information Requested
Self Employed Occupation Information Requested
Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 08 / 2016

Transaction ID : SA11AI.4713

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

7900.00

**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 45 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. Robert E. McGlynn | | Date of Receipt M M / D D / Y Y Y Y 02 / 08 / 2016 | |
| Mailing Address 70 Country Club Acres | | Transaction ID : SA11AI.4717 | |
| City Belleville | State IL | Zip Code 62223 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 | |
| Name of Employer None | Occupation Retired | | |
| Receipt For: 2016 <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. Greg McNece | | Date of Receipt M M / D D / Y Y Y Y 02 / 24 / 2016 | |
| Mailing Address P.O. Box 1830 | | Transaction ID : SA11AI.5291 | |
| City Davis | State CA | Zip Code 95617 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 | |
| Name of Employer Davisville Properties, Inc. | Occupation CEO | | |
| Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 250.00 | | |

| | | | |
|---|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. CLUB FOR GROWTH | | Date of Receipt M M / D D / Y Y Y Y 02 / 24 / 2016 | |
| Mailing Address 2001 L ST NE STE 600 | | Transaction ID : SA11AI.5291.0 | |
| City WASHINGTON | State DC | Zip Code 20036 | |
| FEC ID number of contributing federal political committee. C C90009945 | | Amount of Each Receipt this Period 250.00 | |
| Name of Employer | Occupation | | |
| Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 51253.00 | | |

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 750.00 |
| 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 46 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Greg McNece | | Date of Receipt MM / DD / YYYY 02 / 24 / 2016 |
| Mailing Address P.O. Box 1830 | | Transaction ID : SA11AI.5307 |
| City Davis | State CA | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Davisville Properties, Inc. | Occupation CEO | <input type="checkbox"/> Memo Item See Earmark Memo |
| Receipt For: 2016 <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. CLUB FOR GROWTH | | Date of Receipt MM / DD / YYYY 02 / 24 / 2016 |
| Mailing Address 2001 L ST NE STE 600 | | Transaction ID : SA11AI.5307.0 |
| City WASHINGTON | State DC | |
| FEC ID number of contributing federal political committee. C C90009945 | | Amount of Each Receipt this Period 250.00 |
| Name of Employer | Occupation | <input checked="" type="checkbox"/> Memo Item Earmark |
| Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 54978.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Randy Mears | | Date of Receipt MM / DD / YYYY 02 / 17 / 2016 |
| Mailing Address PO Bo 1175 | | Transaction ID : SA11AI.5098 |
| City Oldsmar | State FL | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Ranmar Development, Inc. | Occupation General Contractor | <input type="checkbox"/> Memo Item See Earmark Memo |
| Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 500.00 | |

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 750.00 |
| 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: PAGE 47 OF 95
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
48848.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2016

Transaction ID : SA11AI.5098.0

Amount of Each Receipt this Period
500.00

Memo Item
Earmark

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

Mailing Address PO Box 1507

City State Zip Code
Stony Brook NY 11790

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

Name of Employer Occupation

Information Requested Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2016

Transaction ID : SA11AI.4986

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address PO Box 1507

City State Zip Code
Stony Brook NY 11790

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

Name of Employer Occupation

Information Requested Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2016

Transaction ID : SA11AI.4988

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

5400.00

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

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

FOR LINE NUMBER: PAGE 48 OF 95
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

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

Mailing Address **PO Box 1507**

City **Stony Brook** State **NY** Zip Code **11790**

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

Name of Employer Information Requested
Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 22 / 2016

Transaction ID : SA11AI.4989

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address **PO Box 1507**

City **Stony Brook** State **NY** Zip Code **11790**

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

Name of Employer Information Requested
Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 22 / 2016

Transaction ID : SA11AI.4991

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Ellis F. Naegele

Mailing Address **7993 Via Vecchia**

City **Naples** State **FL** Zip Code **34108**

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

Name of Employer Information Requested
Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 17 / 2016

Transaction ID : SA11AI.5066

Amount of Each Receipt this Period
250.00

Memo Item

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

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

5650.00

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

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

FOR LINE NUMBER: PAGE 49 OF 95
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

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

Mailing Address 7993 Via Vacchia

City Naples State FL Zip Code 34108

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2016

Transaction ID : SA11AI.5068

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Lathrop B. Nelson Jr.

Mailing Address 13 Courtney Circle

City Bryn Mawr State PA Zip Code 19010

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 29 / 2016

Transaction ID : SA11AI.4884

Amount of Each Receipt this Period
250.00

Memo Item
See Earmark Memo

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Information Requested Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
19348.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 29 / 2016

Transaction ID : SA11AI.4884.0

Amount of Each Receipt this Period
250.00

Memo Item
Earmark

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

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

500.00

**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 50 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Edward Nowokunski

Mailing Address 9207 Whistling Straits Dr

City Indian land State SC Zip Code 29707

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.5251

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 3 Buckingham Dr

City Sugar Grove State IL Zip Code 60554

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 29 / 2016

Transaction ID : SA11AI.4635

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Richard E. Offerdahl

Mailing Address 593 Lariat Circle

City Incline Willage State NV Zip Code 89451

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

Name of Employer Information Requested Occupation Information Requested
Maxi Corp Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11AI.4701

Amount of Each Receipt this Period
2700.00

Memo Item
See Earmark Memo

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

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

3950.00

**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 51 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
36473.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 08 / 2016

Transaction ID : SA11AI.4701.0

Amount of Each Receipt this Period
2700.00

Memo Item
Earmark

B. Full Name (Last, First, Middle Initial)
John F Popp

Mailing Address 12316 Aboite Center Road

City State Zip Code
Fort Wayne IN 48814

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

Name of Employer Occupation
Perfection Bakeries Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 17 / 2016

Transaction ID : SA11AI.5108

Amount of Each Receipt this Period
300.00

Memo Item
See Earmark Memo

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
50898.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 17 / 2016

Transaction ID : SA11AI.5108.0

Amount of Each Receipt this Period
300.00

Memo Item
Earmark

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 52 OF 95
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Lenora Pusta
Mailing Address 138 W Sunflower Dr
City Payson State AZ Zip Code 85541
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Information Requested
Receipt For: 2016
 Primary General
 Other (specify)
Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 01 / 2016
Transaction ID : SA11AI.5238
Amount of Each Receipt this Period
2500.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Lenora Pusta
Mailing Address 138 W Sunflower Dr
City Payson State AZ Zip Code 85541
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Information Requested
Receipt For: 2016
 Primary General
 Other (specify)
Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 01 / 2016
Transaction ID : SA11AI.5239
Amount of Each Receipt this Period
200.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Howard S. Rich
Mailing Address 1420 Walnut St Ste 1011
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Information Requested
ALG Real Estate
Receipt For: 2016
 Primary General
 Other (specify)
Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 12 / 2016
Transaction ID : SA11AI.5007
Amount of Each Receipt this Period
2700.00
 Memo Item
See Earmark Memo

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

5400.00

**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 53 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 45123.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2016

Transaction ID : SA11AI.5007.0

Amount of Each Receipt this Period
 2700.00

Memo Item
Earmark

B. Full Name (Last, First, Middle Initial)
Edward N Robinson

Mailing Address PO Box 1120

City Park City State UT Zip Code 84060

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2016

Transaction ID : SA11AI.5128

Amount of Each Receipt this Period
 250.00

Memo Item
See Earmark Memo

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 46848.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2016

Transaction ID : SA11AI.5128.0

Amount of Each Receipt this Period
 250.00

Memo Item
Earmark

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

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

250.00

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

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

FOR LINE NUMBER: PAGE 54 OF 95
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Norman L. Rogers

Mailing Address 3750 Las Vegas Blvd South Unit
3507

City Las Vegas State NV Zip Code 89158

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2016

Transaction ID : SA11AI.4905

Amount of Each Receipt this Period
250.00

Memo Item
See Earmark Memo

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
20773.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2016

Transaction ID : SA11AI.4905.0

Amount of Each Receipt this Period
250.00

Memo Item
Earmark

C. Full Name (Last, First, Middle Initial)
Norman L. Rogers

Mailing Address 3750 Las Vegas Blvd South Unit
3507

City Las Vegas State NV Zip Code 89158

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2016

Transaction ID : SA11AI.5310

Amount of Each Receipt this Period
1000.00

Memo Item
See Earmark Memo

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

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

1250.00

**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 55 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 56078.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2016

Transaction ID : SA11AI.5310.0

Amount of Each Receipt this Period
 1000.00

Memo Item
Earmark

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

Mailing Address 330 S. Ocean Blvd Apt 3B

City Palm Beach State FL Zip Code 33480

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2016

Transaction ID : SA11AI.4583

Amount of Each Receipt this Period
 1000.00

Memo Item
See Earmark Memo

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 14595.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2016

Transaction ID : SA11AI.4583.0

Amount of Each Receipt this Period
 1000.00

Memo Item
Earmark

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

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

1000.00

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

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

FOR LINE NUMBER: PAGE 56 OF 95
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Sandschafer Electric, Inc.

Mailing Address 15421 IL-33

City Teutopolis State IL Zip Code 62467

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11AI.4572

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address 1200 Harwood Drive South
Apt 172

City Fargo State ND Zip Code 58104

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2016

Transaction ID : SA11AI.5295

Amount of Each Receipt this Period
 300.00

Memo Item
See Earmark Memo

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2016

Transaction ID : SA11AI.5295.0

Amount of Each Receipt this Period
 300.00

Memo Item
Earmark

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

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

550.00

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

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

FOR LINE NUMBER: PAGE 57 OF 95
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Paul J. Schierl

Mailing Address 111 N Washington St
Ste 450

City Green Bay State WI Zip Code 54301

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2016

Transaction ID : SA11AI.5069

Amount of Each Receipt this Period
1000.00

Memo Item
See Earmark Memo

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
50098.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2016

Transaction ID : SA11AI.5069.0

Amount of Each Receipt this Period
1000.00

Memo Item
Earmark

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

Mailing Address 7448 Glenview E Dr

City Indianapolis State IN Zip Code 46250

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2016

Transaction ID : SA11AI.5266

Amount of Each Receipt this Period
500.00

Memo Item

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

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

1500.00

**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 58 OF 95 | | | |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| | 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
William S. Stambaugh

Mailing Address 511 N Manchester St

City State Zip Code
Arlington VA 22203

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 08 / 2016

Transaction ID : SA11AI.4671

Amount of Each Receipt this Period
500.00

Memo Item
See Earmark Memo

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
33773.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 08 / 2016

Transaction ID : SA11AI.4671.0

Amount of Each Receipt this Period
500.00

Memo Item
Earmark

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

Mailing Address 34 Edgehill Rd

City State Zip Code
Little Rock AR 72207

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 22 / 2016

Transaction ID : SA11AI.4924

Amount of Each Receipt this Period
2700.00

Memo Item
See Earmark Memo

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

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

3200.00

**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 59 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 9775.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2016

Transaction ID : SA11AI.4924.0

Amount of Each Receipt this Period
 2700.00

Memo Item
Earmark

B. Full Name (Last, First, Middle Initial)
Jackson T. Stephens Jr.

Mailing Address 111 Center St, Ste 1616
Stephens Bldg

City Little Rock State AR Zip Code 72201

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

Name of Employer Occupation
Exoxemis, Inc. Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2016

Transaction ID : SA11AI.4926

Amount of Each Receipt this Period
 2700.00

Memo Item
See Earmark Memo

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 12475.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2016

Transaction ID : SA11AI.4926.0

Amount of Each Receipt this Period
 2700.00

Memo Item
Earmark

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

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

2700.00

**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 60 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Hubert Stiles Jr.

Mailing Address 915 Rolandvue Rd

City State Zip Code
Towson MD 21204

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
203.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 29 / 2016

Transaction ID : SA11AI.4865

Amount of Each Receipt this Period
203.00

Memo Item
See Earmark Memo

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
18723.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 29 / 2016

Transaction ID : SA11AI.4865.0

Amount of Each Receipt this Period
203.00

Memo Item
Earmark

C. Full Name (Last, First, Middle Initial)
James W Strzalka

Mailing Address 3756 N Leavill St

City State Zip Code
Chicago IL 60618

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 17 / 2016

Transaction ID : SA11AI.5116

Amount of Each Receipt this Period
250.00

Memo Item

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

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

453.00

**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 61 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Richard Sugden M.D.

Mailing Address **PO Box 2468**
557 E Broadway

City **Jackson** State **WY** Zip Code **83001**

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

Name of Employer Information Requested
Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
02 / 17 / 2016

Transaction ID : SA11AI.5280

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Kenneth R. Taylor

Mailing Address **5574 N Sugar Creek Rd**

City **Olney** State **IL** Zip Code **62450**

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

Name of Employer Information Requested
Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
01 / 13 / 2016

Transaction ID : SA11AI.4749

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Elizabeth A. Uihlein

Mailing Address **1396 N. Waukegan Rd**

City **Lake Forest** State **IL** Zip Code **60045**

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

Name of Employer Information Requested
Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
02 / 02 / 2016

Transaction ID : SA11AI.4740

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

6400.00

**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 62 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Elizabeth A. Uihlein

Mailing Address 1396 N. Waukegan Rd

City State Zip Code
Lake Forest IL 60045

FEC ID number of contributing federal political committee.

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.4741

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
Richard E. Uihlein

Mailing Address 1396 N. Waukegan Rd.

City State Zip Code
Lake Forest IL 60045

FEC ID number of contributing federal political committee.

Name of Employer Information Requested Occupation Information Requested
Uline CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.4738

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 11514 E 1050th Ave

City State Zip Code
Watson IL 62473

FEC ID number of contributing federal political committee.

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.4753

Amount of Each Receipt this Period

Memo Item

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

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 63 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Maura J. Voyles

Mailing Address 11514 E 1050th Ave

City Watson State IL Zip Code 62473

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 13 / 2016

Transaction ID : SA11AI.4755

Amount of Each Receipt this Period
300.00

Memo Item

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

Mailing Address 1 Waterman Way

City Queenstown State MD Zip Code 21658

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

Name of Employer None Occupation Real Estate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 17 / 2016

Transaction ID : SA11AI.5358

Amount of Each Receipt this Period
250.00

Memo Item
See Earmark Memo

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C90009945**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **46598.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 17 / 2016

Transaction ID : SA11AI.5358.0

Amount of Each Receipt this Period
250.00

Memo Item
Earmark

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

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

550.00

**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 64 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | | |
|---|---|--|--|
| Full Name (Last, First, Middle Initial) A. Larry Weis | | Date of Receipt M M / D D / Y Y Y Y 01 / 27 / 2016 | |
| Mailing Address 2101 S Banker | | Transaction ID : SA11AI.5230 | |
| City Effingham | State IL | Zip Code 62401 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 | |
| Name of Employer Information Requested Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Information Requested Election Cycle-to-Date 1000.00 | | |

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) B. Peter J. Weldon | | Date of Receipt M M / D D / Y Y Y Y 02 / 08 / 2016 | |
| Mailing Address 700 Via Lombardy | | Transaction ID : SA11AI.4830 | |
| City Winter Park | State FL | Zip Code 32789 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2700.00 | |
| Name of Employer None Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Retired Election Cycle-to-Date 2700.00 | | |

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) C. CLUB FOR GROWTH | | Date of Receipt M M / D D / Y Y Y Y 02 / 08 / 2016 | |
| Mailing Address 2001 L ST NE STE 600 | | Transaction ID : SA11AI.4830.0 | |
| City WASHINGTON | State DC | Zip Code 20036 | |
| FEC ID number of contributing federal political committee. C C90009945 | | Amount of Each Receipt this Period 2700.00 | |
| Name of Employer Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Occupation Election Cycle-to-Date 30173.00 | | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 3700.00 |
| TOTAL This Period (last page this line number only)..... | 3700.00 |

**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 65 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Edgar Williams

Mailing Address 2900 Cove Cay Drive
#3G

City Clearwater State FL Zip Code 33760

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

Name of Employer Legacy Capital Group, Inc. Occupation Commodity Pool Operator

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2016

Transaction ID : SA11AI.5301

Amount of Each Receipt this Period
2700.00

Memo Item
See Earmark Memo

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
54578.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2016

Transaction ID : SA11AI.5301.0

Amount of Each Receipt this Period
2700.00

Memo Item
Earmark

C. Full Name (Last, First, Middle Initial)
Fred W. Woller III

Mailing Address 3712 24th Ave

City Rock Island State IL Zip Code 61201

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

Name of Employer Self Employed Occupation Landlord

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 07 / 2016

Transaction ID : SA11AI.4763

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

3700.00

147030.24

**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 66 OF 95 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
ASSOCIATED BUILDERS AND CONTRACTORS POLITICAL ACTION COMMITTEE (ABC PAC)

Mailing Address 440 FIRST STREET NW
SUITE 200

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00010421

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2016

Transaction ID : SA11C.5508

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
FREE MARKET FEDERAL

Mailing Address 603 SOUTH JOHNSON STREET

City NEW ATHENS State IL Zip Code 62264

FEC ID number of contributing federal political committee. **C** C00516088

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
975.96

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2016

Transaction ID : SA11C.5510

Amount of Each Receipt this Period
975.96

Memo Item

C. Full Name (Last, First, Middle Initial)
Friends of Jim Oberweis

Mailing Address 951 Ice Cream Dr

City North Aurora State IL Zip Code 60542

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 13 / 2016

Transaction ID : SA11C.4559

Amount of Each Receipt this Period
1000.00

Memo Item
Permissible Funds

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

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

6975.96

6975.96

**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 67 OF 95 |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
KYLE MCCARTER

Mailing Address 1359 IVEY BROOK LANE

City State Zip Code
LEBANON IL 62264

FEC ID number of contributing federal political committee. **C** H6IL15084

Name of Employer Occupation
Self Employed Manufacturing

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
100000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 09 / 2016

Transaction ID : SA13A.4537

Amount of Each Receipt this Period
40000.00

Memo Item
 Loan from Candidate

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

Memo Item

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

Memo Item

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

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

40000.00

40000.00

**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 68 OF 95 | | | |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Ad Works | | Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2016 |
| Mailing Address 5335 Wisconsin Ave NW Ste 440 | | Amount of Each Disbursement this Period 1427.63 |
| City Washington | State DC | |
| Zip Code 20015 | Purpose of Disbursement Advertising | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : SB17.4376 |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Authorize.net | | Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2016 |
| Mailing Address PO Box 8999 | | Amount of Each Disbursement this Period 469.22 |
| City San Francisco | State CA | |
| Zip Code 94128 | Purpose of Disbursement CC Transaction Fees | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : SB17.5211 |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Charles Barenfanger | | Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2016 |
| Mailing Address PO Box 190 | | Amount of Each Disbursement this Period 602.24 |
| City Vandalia | State IL | |
| Zip Code 62471 | Purpose of Disbursement In-kind - Food and Drinks for Event | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : SB17.5523 |
| State: District: | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 2499.09 |
| 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 69 OF 95 | | | |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | | | | |
|---|--|-----------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) A. Gregory M. Berning | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016 | | |
| Mailing Address 5068 E. Westpoint Ln | | | Amount of Each Disbursement this Period 3754.82 | | |
| City Olney | State IL | Zip Code 62450 | Memo Item <input type="checkbox"/> | | |
| Purpose of Disbursement Salary | | Category/ Type | | | |
| Candidate Name | | Transaction ID : SB17.4371 | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| State: _____ | District: _____ | | | | |

| | | | | | |
|---|--|-----------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) B. Gregory M. Berning | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2016 | | |
| Mailing Address 5068 E. Westpoint Ln | | | Amount of Each Disbursement this Period 3754.82 | | |
| City Olney | State IL | Zip Code 62450 | Memo Item <input type="checkbox"/> | | |
| Purpose of Disbursement Salary | | Category/ Type | | | |
| Candidate Name | | Transaction ID : SB17.4490 | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| State: _____ | District: _____ | | | | |

| | | | | | |
|---|--|-----------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) c. Campaign Grid | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2016 | | |
| Mailing Address 414 Commerce Dr Ste 100 | | | Amount of Each Disbursement this Period 10000.00 | | |
| City Fort Washington | State PA | Zip Code 19034 | Memo Item <input type="checkbox"/> | | |
| Purpose of Disbursement Media Consulting | | Category/ Type | | | |
| Candidate Name | | Transaction ID : SB17.4535 | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| State: _____ | District: _____ | | | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 17509.64 |
| 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 70 OF 95 | | | |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. CLUB FOR GROWTH | | Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2016 |
| Mailing Address 2001 L ST NE STE 600 | | Amount of Each Disbursement this Period 150.50 |
| City WASHINGTON State DC Zip Code 20036 | Purpose of Disbursement CC Transaction Fees | |
| Candidate Name | Category/Type | <input type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : SB17.4941 |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. CLUB FOR GROWTH | | Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2016 |
| Mailing Address 2001 L ST NE STE 600 | | Amount of Each Disbursement this Period 73.12 |
| City WASHINGTON State DC Zip Code 20036 | Purpose of Disbursement CC Transaction Fees | |
| Candidate Name | Category/Type | <input type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : SB17.4776 |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. CLUB FOR GROWTH | | Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2016 |
| Mailing Address 2001 L ST NE STE 600 | | Amount of Each Disbursement this Period 21.32 |
| City WASHINGTON State DC Zip Code 20036 | Purpose of Disbursement CC Transaction Fees | |
| Candidate Name | Category/Type | <input type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : SB17.4779 |
| State: District: | | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 244.94 |
| 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 71 OF 95 | | | |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | | |
|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial) A. CLUB FOR GROWTH | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2016 |
| Mailing Address 2001 L ST NE STE 600 | | | Amount of Each Disbursement this Period 6.87 |
| City WASHINGTON | State DC | Zip Code 20036 | |
| Purpose of Disbursement CC Transaction Fees | | Category/ Type | <input type="checkbox"/> Memo Item |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Transaction ID : SB17.4803 |
| State: District: | | | |

| | | | |
|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial) B. CLUB FOR GROWTH | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2016 |
| Mailing Address 2001 L ST NE STE 600 | | | Amount of Each Disbursement this Period 47.75 |
| City WASHINGTON | State DC | Zip Code 20036 | |
| Purpose of Disbursement CC Transaction Fees | | Category/ Type | <input type="checkbox"/> Memo Item |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Transaction ID : SB17.4920 |
| State: District: | | | |

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|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial) C. CLUB FOR GROWTH | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2016 |
| Mailing Address 2001 L ST NE STE 600 | | | Amount of Each Disbursement this Period 13.75 |
| City WASHINGTON | State DC | Zip Code 20036 | |
| Purpose of Disbursement CC Transaction Fees | | Category/ Type | <input type="checkbox"/> Memo Item |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Transaction ID : SB17.5051 |
| State: District: | | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 68.37 |
| 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 72 OF 95 | | | |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | | |
|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial) A. CLUB FOR GROWTH | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2016 |
| Mailing Address 2001 L ST NE STE 600 | | | Amount of Each Disbursement this Period 13.75 |
| City WASHINGTON | State DC | Zip Code 20036 | |
| Purpose of Disbursement CC Transaction Fees | | Category/ Type | <input type="checkbox"/> Memo Item |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Transaction ID : SB17.4943 |
| State: District: | | | |

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|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial) B. CLUB FOR GROWTH | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2016 |
| Mailing Address 2001 L ST NE STE 600 | | | Amount of Each Disbursement this Period 72.87 |
| City WASHINGTON | State DC | Zip Code 20036 | |
| Purpose of Disbursement CC Transaction Fees | | Category/ Type | <input type="checkbox"/> Memo Item |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Transaction ID : SB17.4834 |
| State: District: | | | |

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|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial) C. CLUB FOR GROWTH | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016 |
| Mailing Address 2001 L ST NE STE 600 | | | Amount of Each Disbursement this Period 42.37 |
| City WASHINGTON | State DC | Zip Code 20036 | |
| Purpose of Disbursement CC Transaction Fees | | Category/ Type | <input type="checkbox"/> Memo Item |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Transaction ID : SB17.5366 |
| State: District: | | | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 128.99 |
| TOTAL This Period (last page this line number only)..... | |

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

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|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 73 OF 95 | | | |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | | |
|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial) A. CLUB FOR GROWTH | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016 |
| Mailing Address 2001 L ST NE STE 600 | | | Amount of Each Disbursement this Period 16.75 |
| City WASHINGTON | State DC | Zip Code 20036 | |
| Purpose of Disbursement CC Transaction Fees | | Category/ Type | <input type="checkbox"/> Memo Item |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Transaction ID : SB17.5367 |
| State: District: | | | |

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|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial) B. CLUB FOR GROWTH | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2016 |
| Mailing Address 2001 L ST NE STE 600 | | | Amount of Each Disbursement this Period 399.87 |
| City WASHINGTON | State DC | Zip Code 20036 | |
| Purpose of Disbursement CC Transaction Fees | | Category/ Type | <input type="checkbox"/> Memo Item |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Transaction ID : SB17.5365 |
| State: District: | | | |

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|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial) c. Ted Deets | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016 |
| Mailing Address 6021 Midway Circle | | | Amount of Each Disbursement this Period 2332.20 |
| City Belleville | State IL | Zip Code 62223 | |
| Purpose of Disbursement Salary | | Category/ Type | <input type="checkbox"/> Memo Item |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Transaction ID : SB17.4554 |
| State: District: | | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 2748.82 |
| 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 74 OF 95 | | | |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Ted Deets | | Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2016 |
| Mailing Address 6021 Midway Circle | | Amount of Each Disbursement this Period 2332.20 |
| City Belleville | State IL | |
| Zip Code 62223 | Purpose of Disbursement Salary | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type | Transaction ID : SB17.4556 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Direct Match Media | | Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016 |
| Mailing Address 105 Moffett Ave | | Amount of Each Disbursement this Period 2250.00 |
| City Collinsville | State IL | |
| Zip Code 62234 | Purpose of Disbursement Media Consulting | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type | Transaction ID : SB17.4783 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Kimberly D. Farkas | | Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2016 |
| Mailing Address 718 Pleasant Valley Dr | | Amount of Each Disbursement this Period 544.31 |
| City Godfrey | State IL | |
| Zip Code 62035 | Purpose of Disbursement Salary | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type | Transaction ID : SB17.5502 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 5126.51 |
| 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 75 OF 95 | | | |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Front Range Enterprises and Comm | | Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2016 |
| Mailing Address 1111 Diamond Valley Dr Ste 105 | | Amount of Each Disbursement this Period 1477.84 |
| City Windsor State CO Zip Code 80550 | Purpose of Disbursement Postage for Mailers | |
| Candidate Name | Category/Type | <input type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : SB17.4548 |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Front Range Enterprises and Comm | | Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2016 |
| Mailing Address 1111 Diamond Valley Dr Ste 105 | | Amount of Each Disbursement this Period 1583.18 |
| City Windsor State CO Zip Code 80550 | Purpose of Disbursement Printing and Postage | |
| Candidate Name | Category/Type | <input type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : SB17.4796 |
| State: District: | | |

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|--|--|---|
| Full Name (Last, First, Middle Initial) c. Isaiah Consulting Group | | Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2016 |
| Mailing Address 806 80th St | | Amount of Each Disbursement this Period 2479.00 |
| City Downers Grove State IL Zip Code 60516 | Purpose of Disbursement Funraising Consulting | |
| Candidate Name | Category/Type | <input type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : SB17.4550 |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 5540.02 |
| TOTAL This Period (last page this line number only)..... | |

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

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|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 76 OF 95 | | | |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | | | | |
|---|--|-----------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) A. Kharis Media | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2016 | | |
| Mailing Address 6504 Crawley Dr | | | Amount of Each Disbursement this Period 8875.00 | | |
| City Plano | State TX | Zip Code 75093 | Memo Item <input type="checkbox"/> | | |
| Purpose of Disbursement Media Consulting | | Category/ Type | | | |
| Candidate Name | | Transaction ID : SB17.4173 | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| State: District: | | | | | |

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|---|--|-----------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) B. Kharis Media | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016 | | |
| Mailing Address 6504 Crawley Dr | | | Amount of Each Disbursement this Period 6000.00 | | |
| City Plano | State TX | Zip Code 75093 | Memo Item <input type="checkbox"/> | | |
| Purpose of Disbursement Media Consulting | | Category/ Type | | | |
| Candidate Name | | Transaction ID : SB17.4785 | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| State: District: | | | | | |

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|---|--|-----------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) c. Magellan Strategies | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2016 | | |
| Mailing Address 1685 Boxelder St Ste 300 | | | Amount of Each Disbursement this Period 15000.00 | | |
| City Louisville | State CO | Zip Code 80027 | Memo Item <input type="checkbox"/> | | |
| Purpose of Disbursement Polling | | Category/ Type | | | |
| Candidate Name | | Transaction ID : SB17.4174 | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| State: District: | | | | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 29875.00 |
| 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 77 OF 95 | | | |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. MOW Printing | | Date of Disbursement MM / DD / YYYY 02 / 10 / 2016 |
| Mailing Address 526 Vandalia St | | Amount of Each Disbursement this Period 12162.47 |
| City Collinsville | State IL | |
| Zip Code 62234 | Purpose of Disbursement Printing | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | Transaction ID : SB17.4540 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. MOW Printing | | Date of Disbursement MM / DD / YYYY 02 / 18 / 2016 |
| Mailing Address 526 Vandalia St | | Amount of Each Disbursement this Period 567.19 |
| City Collinsville | State IL | |
| Zip Code 62234 | Purpose of Disbursement Printing | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | Transaction ID : SB17.4781 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. Payroll Central | | Date of Disbursement MM / DD / YYYY 01 / 04 / 2016 |
| Mailing Address 1107 Frontage Rd | | Amount of Each Disbursement this Period 4471.24 |
| City O'Fallon | State IL | |
| Zip Code 62269 | Purpose of Disbursement Payroll Taxes | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | Transaction ID : SB17.4466 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 17200.90 |
| 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 78 OF 95 | | | |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | |
|--|-------------------------|--|
| Full Name (Last, First, Middle Initial) A. Payroll Central | | Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2016 |
| Mailing Address 1107 Frontage Rd | | Amount of Each Disbursement this Period 4901.24 |
| City O'Fallon | State IL Zip Code 62269 | |
| Purpose of Disbursement Payroll Taxes | Candidate Name | <input type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |
| State: District: | Category/Type | Transaction ID : SB17.4485 |

| | | |
|--|-------------------------|--|
| Full Name (Last, First, Middle Initial) B. Payroll Central | | Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2016 |
| Mailing Address 1107 Frontage Rd | | Amount of Each Disbursement this Period 2967.05 |
| City O'Fallon | State IL Zip Code 62269 | |
| Purpose of Disbursement Payroll Taxes | Candidate Name | <input type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |
| State: District: | Category/Type | Transaction ID : SB17.4794 |

| | | |
|--|-------------------------|--|
| Full Name (Last, First, Middle Initial) c. Susan Petty | | Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016 |
| Mailing Address 11679 Wabash River Hills | | Amount of Each Disbursement this Period 2392.17 |
| City Effingham | State IL Zip Code 62401 | |
| Purpose of Disbursement Salary | Candidate Name | <input type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |
| State: District: | Category/Type | Transaction ID : SB17.4553 |

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|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 10260.46 |
| 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 79 OF 95 | | | |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | | | | |
|---|--|-----------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) A. Susan Petty | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2016 | | |
| Mailing Address 11679 Wabash River Hills | | | Amount of Each Disbursement this Period 2392.17 | | |
| City Effingham | State IL | Zip Code 62401 | Memo Item <input type="checkbox"/> | | |
| Purpose of Disbursement Salary | | Category/ Type | | | |
| Candidate Name | | Transaction ID : SB17.4555 | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| State: | District: | | | | |

| | | | | | |
|---|--|-----------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) B. Susan Petty | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2016 | | |
| Mailing Address 11679 Wabash River Hills | | | Amount of Each Disbursement this Period 1250.25 | | |
| City Effingham | State IL | Zip Code 62401 | Memo Item <input type="checkbox"/> | | |
| Purpose of Disbursement Salary | | Category/ Type | | | |
| Candidate Name | | Transaction ID : SB17.5504 | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| State: | District: | | | | |

| | | | | | |
|---|--|-----------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) C. Susan Petty | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2016 | | |
| Mailing Address 11679 Wabash River Hills | | | Amount of Each Disbursement this Period 52.81 | | |
| City Effingham | State IL | Zip Code 62401 | Memo Item <input type="checkbox"/> | | |
| Purpose of Disbursement Travel Expense - No Itemization Necessary | | Category/ Type | | | |
| Candidate Name | | Transaction ID : SB17.4780 | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| State: | District: | | | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 3695.23 |
| 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 80 OF 95 | | | |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | | | |
|---|--|-------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Susan Petty | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2016 | |
| Mailing Address 11679 Wabash River Hills | | | Amount of Each Disbursement this Period 1439.77 | |
| City Effingham | State IL | Zip Code 62401 | Memo Item <input type="checkbox"/> | |
| Purpose of Disbursement Mileage | | Category/ Type | | |
| Candidate Name | | | Transaction ID : SB17.4793 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: _____ | District: _____ | | | |

| | | | | |
|---|--|-------------------|---|--|
| Full Name (Last, First, Middle Initial) B. Precision Signz | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2016 | |
| Mailing Address 6125 Valley Dr | | | Amount of Each Disbursement this Period 5694.30 | |
| City Bettendorf | State IA | Zip Code 52722 | Memo Item <input type="checkbox"/> | |
| Purpose of Disbursement Signs | | Category/ Type | | |
| Candidate Name | | | Transaction ID : SB17.4374 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: _____ | District: _____ | | | |

| | | | | |
|---|--|-------------------|---|--|
| Full Name (Last, First, Middle Initial) C. Professional Data Services | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2016 | |
| Mailing Address 824 S. Milledge Ave Ste 101 | | | Amount of Each Disbursement this Period 4624.46 | |
| City Athens | State GA | Zip Code 30605 | Memo Item <input type="checkbox"/> | |
| Purpose of Disbursement Compliance Consulting | | Category/ Type | | |
| Candidate Name | | | Transaction ID : SB17.4179 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: _____ | District: _____ | | | |

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|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 11758.53 |
| 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 81 OF 95 | | | |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Professional Data Services | | Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016 |
| Mailing Address 824 S. Milledge Ave Ste 101 | | Amount of Each Disbursement this Period 1505.82 |
| City Athens | State GA | Zip Code 30605 |
| Purpose of Disbursement Compliance Consulting | Category/Type | |
| Candidate Name | Memo Item <input type="checkbox"/> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | Transaction ID : SB17.4786 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Regions Bank | | Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016 |
| Mailing Address 400 E US 50 | | Amount of Each Disbursement this Period 3807.13 |
| City O'Fallon | State IL | Zip Code 62269 |
| Purpose of Disbursement See Memo Entries | Category/Type | |
| Candidate Name | Memo Item <input type="checkbox"/> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | Transaction ID : SB17.4467 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Amazon | | Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016 |
| Mailing Address 440 Terry Ave N | | Amount of Each Disbursement this Period 89.99 |
| City Seattle | State WA | Zip Code 98109 |
| Purpose of Disbursement Office Supplies | Category/Type | |
| Candidate Name | Memo Item <input checked="" type="checkbox"/> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | Transaction ID : SB17.4467.0 | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 5312.95 |
| 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 82 OF 95 | | | |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | | | | |
|--|-------------|---|---|--|--|
| Full Name (Last, First, Middle Initial) A. McGonigal's Pub | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016 | | |
| Mailing Address 105 S Cook St | | | Amount of Each Disbursement this Period 465.92 | | |
| City Barrington | State IL | Zip Code 60010 | Category/ Type | | |
| Purpose of Disbursement Event Catering | | | | | |
| Candidate Name | | <input checked="" type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | | | | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Transaction ID : SB17.4467.2 | | | |
| State: | District: | | | | |

| | | | | | |
|--|-------------|---|---|--|--|
| Full Name (Last, First, Middle Initial) B. Park Lanes | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016 | | |
| Mailing Address 5318 N 2nd St | | | Amount of Each Disbursement this Period 200.27 | | |
| City Loves Park | State IL | Zip Code 61111 | Category/ Type | | |
| Purpose of Disbursement Event Facility Rental | | | | | |
| Candidate Name | | <input checked="" type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | | | | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Transaction ID : SB17.4467.4 | | | |
| State: | District: | | | | |

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|--|-------------|---|---|--|--|
| Full Name (Last, First, Middle Initial) c. Callfire | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016 | | |
| Mailing Address 1410 2nd St #200 | | | Amount of Each Disbursement this Period 301.00 | | |
| City Santa Monica | State CA | Zip Code 90401 | Category/ Type | | |
| Purpose of Disbursement Telephone | | | | | |
| Candidate Name | | <input checked="" type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | | | | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Transaction ID : SB17.4467.7 | | | |
| State: | District: | | | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| 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 83 OF 95 | | | |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Regions Bank | | Date of Disbursement MM / DD / YYYY 02 / 09 / 2016 |
| Mailing Address 400 E US 50 | | Amount of Each Disbursement this Period 5372.79 |
| City O'Fallon | State IL | |
| Zip Code 62269 | Purpose of Disbursement See Memo Entries | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | Transaction ID : SB17.4491 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Amazon | | Date of Disbursement MM / DD / YYYY 02 / 09 / 2016 |
| Mailing Address 440 Terry Ave N | | Amount of Each Disbursement this Period 11.98 |
| City Seattle | State WA | |
| Zip Code 98109 | Purpose of Disbursement Office Supplies | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | Transaction ID : SB17.4491.1 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Hotels.com | | Date of Disbursement MM / DD / YYYY 02 / 09 / 2016 |
| Mailing Address 5400 LBJ Freeway Ste 500 | | Amount of Each Disbursement this Period 271.39 |
| City Dallas | State TX | |
| Zip Code 72540 | Purpose of Disbursement Lodging | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | Transaction ID : SB17.4491.11 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 5372.79 |
| 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 84 OF 95 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | |
|--|-------------------------|---|
| Full Name (Last, First, Middle Initial) A. Lickenbrock & Sons, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2016 |
| Mailing Address 328 W State St | | Amount of Each Disbursement this Period 347.82 |
| City O'Fallon | State IL Zip Code 62269 | |
| Purpose of Disbursement Office Repairs | Candidate Name | <input checked="" type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | Category/Type | Transaction ID : SB17.4491.13 |

| | | |
|--|-------------------------|---|
| Full Name (Last, First, Middle Initial) B. Nationbuilder | | Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2016 |
| Mailing Address 520 S Grand Ave | | Amount of Each Disbursement this Period 399.00 |
| City Los Angeles | State CA Zip Code 90071 | |
| Purpose of Disbursement Software | Candidate Name | <input checked="" type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | Category/Type | Transaction ID : SB17.4491.15 |

| | | |
|--|-------------------------|---|
| Full Name (Last, First, Middle Initial) C. Robinson Daily News | | Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2016 |
| Mailing Address 302 S Cross St | | Amount of Each Disbursement this Period 267.75 |
| City Robinson | State IL Zip Code 62454 | |
| Purpose of Disbursement Advertising | Candidate Name | <input checked="" type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | Category/Type | Transaction ID : SB17.4491.17 |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| 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 85 OF 95 | |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Southwest | | Date of Disbursement MM / DD / YYYY 02 / 09 / 2016 |
| Mailing Address PO Box 36647-1CR | | Amount of Each Disbursement this Period 1187.92 |
| City Dallas | State TX | |
| Zip Code 75235 | Purpose of Disbursement Airfare | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : SB17.4491.19 |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Twitter | | Date of Disbursement MM / DD / YYYY 02 / 09 / 2016 |
| Mailing Address 1355 Market St | | Amount of Each Disbursement this Period 366.55 |
| City San Francisco | State CA | |
| Zip Code 94103 | Purpose of Disbursement Advertising | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : SB17.4491.20 |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. Rural King Distributing | | Date of Disbursement MM / DD / YYYY 02 / 09 / 2016 |
| Mailing Address 4216 DeWitt Ave | | Amount of Each Disbursement this Period 739.78 |
| City Mattoon | State IL | |
| Zip Code 61938 | Purpose of Disbursement Sign Posts | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : SB17.4491.22 |
| State: District: | | |

| | |
|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| 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 86 OF 95 | | | |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Callfire | | Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2016 |
| Mailing Address 1410 2nd St #200 | | Amount of Each Disbursement this Period 300.87 |
| City Santa Monica | State CA | |
| Zip Code 90401 | | |
| Purpose of Disbursement Telephone | | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Rural King Distributing | | Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2016 |
| Mailing Address 4216 DeWitt Ave | | Amount of Each Disbursement this Period 723.77 |
| City Mattoon | State IL | |
| Zip Code 61938 | | |
| Purpose of Disbursement Sign Posts | | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. Rural King Distributing | | Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2016 |
| Mailing Address 4216 DeWitt Ave | | Amount of Each Disbursement this Period 492.55 |
| City Mattoon | State IL | |
| Zip Code 61938 | | |
| Purpose of Disbursement Sign Posts | | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1216.32 |
| 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 87 OF 95 | | |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | |
|---|-------------------------|---|
| Full Name (Last, First, Middle Initial) A. Abby Shull | | Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016 |
| Mailing Address 117 N. Grant | | Amount of Each Disbursement this Period 2281.57 |
| City Olney | State IL Zip Code 62450 | |
| Purpose of Disbursement Salary | Candidate Name | <input type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | Category/Type | Transaction ID : SB17.4363 |

| | | |
|---|-------------------------|---|
| Full Name (Last, First, Middle Initial) B. Abby Shull | | Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2016 |
| Mailing Address 117 N. Grant | | Amount of Each Disbursement this Period 2281.57 |
| City Olney | State IL Zip Code 62450 | |
| Purpose of Disbursement Salary | Candidate Name | <input type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | Category/Type | Transaction ID : SB17.4795 |

| | | |
|---|-------------------------|---|
| Full Name (Last, First, Middle Initial) c. Abby Shull | | Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2016 |
| Mailing Address 117 N. Grant | | Amount of Each Disbursement this Period 2632.07 |
| City Olney | State IL Zip Code 62450 | |
| Purpose of Disbursement Salary | Candidate Name | <input type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | Category/Type | Transaction ID : SB17.5052 |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 7195.21 |
| 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 88 OF 95 | |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Sharon Steele | | Date of Disbursement MM / DD / YYYY 02 / 16 / 2016 |
| Mailing Address 420 Park Dr | | Amount of Each Disbursement this Period 767.41 |
| City Bethalto | State IL | |
| Zip Code 62010 | Purpose of Disbursement Salary | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | Transaction ID : SB17.5053 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Tele-Town Hall Services | | Date of Disbursement MM / DD / YYYY 02 / 18 / 2016 |
| Mailing Address 4600 North Fairfax Dr Ste 802 | | Amount of Each Disbursement this Period 2464.70 |
| City Arlington | State VA | |
| Zip Code 22203 | Purpose of Disbursement Teleconference Services | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | Transaction ID : SB17.4791 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. The Rainmakers | | Date of Disbursement MM / DD / YYYY 01 / 14 / 2016 |
| Mailing Address PO Box 1082 | | Amount of Each Disbursement this Period 5000.00 |
| City Springfield | State VA | |
| Zip Code 22151 | Purpose of Disbursement Fundraising Consulting | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | Transaction ID : SB17.4170 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 8232.11 |
| 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 89 OF 95 | | | |
| | <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)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | | | | |
|---|--|-----------------------------------|--|--|--|
| Full Name (Last, First, Middle Initial) A. Nate Wheeler | | | Date of Disbursement MM / DD / YYYY 02 / 10 / 2016 | | |
| Mailing Address RR1 Box 128b | | | Amount of Each Disbursement this Period 481.85 | | |
| City Ramsey | State IL | Zip Code 62080 | Memo Item <input type="checkbox"/> | | |
| Purpose of Disbursement Mileage | | Category/ Type | | | |
| Candidate Name | | Transaction ID : SB17.4546 | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| State: _____ | District: _____ | | | | |

| | | | | | |
|---|--|-----------------------------------|--|--|--|
| Full Name (Last, First, Middle Initial) B. Nate Wheeler | | | Date of Disbursement MM / DD / YYYY 02 / 16 / 2016 | | |
| Mailing Address RR1 Box 128b | | | Amount of Each Disbursement this Period 2284.52 | | |
| City Ramsey | State IL | Zip Code 62080 | Memo Item <input type="checkbox"/> | | |
| Purpose of Disbursement Salary | | Category/ Type | | | |
| Candidate Name | | Transaction ID : SB17.5505 | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| State: _____ | District: _____ | | | | |

| | | | | | |
|---|--|-----------------------------------|--|--|--|
| Full Name (Last, First, Middle Initial) C. Nate Wheeler | | | Date of Disbursement MM / DD / YYYY 02 / 17 / 2016 | | |
| Mailing Address RR1 Box 128b | | | Amount of Each Disbursement this Period 127.44 | | |
| City Ramsey | State IL | Zip Code 62080 | Memo Item <input type="checkbox"/> | | |
| Purpose of Disbursement Travel Expense - No Itemization Needed | | Category/ Type | | | |
| Candidate Name | | Transaction ID : SB17.4983 | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| State: _____ | District: _____ | | | | |

| | |
|---|-----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 2893.81 |
| TOTAL This Period (last page this line number only)..... | 136879.69 |

**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 90 OF 95 | | | |
| | <input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21 | | | | |

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | | | | |
|---|-------------|-------------------|--|--|--|
| Full Name (Last, First, Middle Initial) A. James W. Best | | | Date of Disbursement MM / DD / YYYY 01 / 28 / 2016 | | |
| Mailing Address 32 Knollwood Dr | | | Amount of Each Disbursement this Period 37300.00 | | |
| City Chester | State IL | Zip Code 62233 | Memo Item <input type="checkbox"/> | | |
| Purpose of Disbursement Refund | | Candidate Name | Transaction ID : SB20A.4484 | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | | Disbursement For: 2016 <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. James W. Best | | | Date of Disbursement MM / DD / YYYY 01 / 28 / 2016 | | |
| Mailing Address 32 Knollwood Dr | | | Amount of Each Disbursement this Period 2700.00 | | |
| City Chester | State IL | Zip Code 62233 | Memo Item <input type="checkbox"/> | | |
| Purpose of Disbursement Refund | | Candidate Name | Transaction ID : SB20A.5401 | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | | Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| State: District: | | Category/Type | | | |

| | | | | | |
|---|-------------|-------------------|--|--|--|
| Full Name (Last, First, Middle Initial) c. Burgdorf and Associated Wealth Managers Inc. | | | Date of Disbursement MM / DD / YYYY 01 / 28 / 2016 | | |
| Mailing Address 6001 Old Collinsville Rd Building 2, Ste A | | | Amount of Each Disbursement this Period 250.00 | | |
| City Fairview Heights | State IL | Zip Code 62208 | Memo Item <input type="checkbox"/> | | |
| Purpose of Disbursement Refund | | Candidate Name | Transaction ID : SB20A.4438 | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| State: District: | | Category/Type | | | |

| | |
|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 40250.00 |
| 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 91 OF 95 | | | |
| | <input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21 | | | | |

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | | | | |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) A. Rural King Distributing | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2016 | | |
| Mailing Address 4216 DeWitt Ave | | | Amount of Each Disbursement this Period 2700.00 | | |
| City Mattoon | State IL | Zip Code 61938 | Memo Item <input type="checkbox"/> | | |
| Purpose of Disbursement Refund | | Category/ Type | | | |
| Candidate Name | | Transaction ID : SB20A.4552 | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| State: District: | | | | | |

| | | | | | |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) B. Sandschafer Electric, Inc. | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016 | | |
| Mailing Address 15421 IL-33 | | | Amount of Each Disbursement this Period 250.00 | | |
| City Teutopolis | State IL | Zip Code 62467 | Memo Item <input type="checkbox"/> | | |
| Purpose of Disbursement Refund | | Category/ Type | | | |
| Candidate Name | | Transaction ID : SB20A.4790 | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| State: District: | | | | | |

| | | | | | |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) c. Total Grain Marketing, LLC | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2016 | | |
| Mailing Address 403 S Central Ave | | | Amount of Each Disbursement this Period 10008.69 | | |
| City Casey | State IL | Zip Code 62420 | Memo Item <input type="checkbox"/> | | |
| Purpose of Disbursement Refund | | Category/ Type | | | |
| Candidate Name | | Transaction ID : SB20A.4542 | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| State: District: | | | | | |

| | |
|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 12958.69 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | | |
|---|--|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 92 OF 95 | | | |
| | <input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21 | | | | |

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NAME OF COMMITTEE (In Full)
KYLE MCCARTER FOR CONGRESS COMMITTEE

| | | | | | |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) A. Tri Ford | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2016 | | |
| Mailing Address 12610 State Rt 143 | | | Amount of Each Disbursement this Period 305.00 | | |
| City Highland | State IL | Zip Code 62249 | Memo Item <input type="checkbox"/> | | |
| Purpose of Disbursement Refund | | Category/ Type | | | |
| Candidate Name | | Transaction ID : SB20A.4488 | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| State: _____ | District: _____ | | | | |

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

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

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional) | 305.00 |
| TOTAL This Period (last page this line number only) | 53513.69 |

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **KYLE MCCARTER FOR CONGRESS COMMITTEE** Transaction ID : **SC/10.4176**

| | |
|--|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) KYLE MCCARTER <i>PERSONAL FUNDS</i> <input type="checkbox"/> Memo Item | Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 1359 IVEY BROOK LANE | |

| | | |
|---------|-------|----------|
| City | State | ZIP Code |
| LEBANON | IL | 62264 |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 10000.00 | 0.00 | 10000.00 |

TERMS

| | | | |
|----------------|------------|---------------|---|
| Date Incurred | Date Due | Interest Rate | Secured: |
| 10 / 08 / 2015 | 12/31/2016 | 0.00 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

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

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

| | | |
|---|---|----------|
| SUBTOTALS This Period This Page (optional)..... | ▶ | 10000.00 |
| 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/10.4178

KYLE MCCARTER FOR CONGRESS COMMITTEE

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** Memo Item
KYLE MCCARTER

Election: 2016

Primary
 General
 Other (specify) ▼

Mailing Address
1359 IVEY BROOK LANE

City State ZIP Code
LEBANON IL 62264

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
50000.00 0.00 50000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
10 / 22 / 2015 M M / D D / 12/31/2016 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: <input type="text"/> |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |

SUBTOTALS This Period This Page (optional).....
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

NAME OF COMMITTEE (In Full) **KYLE MCCARTER FOR CONGRESS COMMITTEE** Transaction ID : **SC/10.4537**

| | |
|--|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) KYLE MCCARTER <i>PERSONAL FUNDS</i> <input type="checkbox"/> Memo Item | Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 1359 IVEY BROOK LANE | |

| | | |
|---------|-------|----------|
| City | State | ZIP Code |
| LEBANON | IL | 62264 |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 40000.00 | 0.00 | 40000.00 |

TERMS

| | | | |
|----------------|------------|---------------|---|
| Date Incurred | Date Due | Interest Rate | Secured: |
| 02 / 09 / 2016 | 12/31/2016 | 0.00 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

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

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

| | |
|--|-----------|
| SUBTOTALS This Period This Page (optional)..... | 40000.00 |
| TOTALS This Period (last page in this line only)..... | 100000.00 |

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