

# 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  
**JOE KAUFMAN FOR CONGRESS**

ADDRESS (number and street) 2645 EXECUTIVE PARK DRIVE STE 512  
 Check if different than previously reported. (ACC) WESTON FL 33331

2. **FEC IDENTIFICATION NUMBER** ▼ C C00501205 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A) CITY ▲ WESTON STATE ▲ FL ZIP CODE ▲ STATE ▼ DISTRICT FL 20

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

5. Covering Period M M / D D / Y Y Y Y 04 / 01 / 2012 through M M / D D / Y Y Y Y 06 / 30 / 2012

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 JOE KAUFMAN  
Signature of Treasurer JOE KAUFMAN [Electronically Filed] Date M M / D D / Y Y Y Y 07 / 14 / 2012

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**JOE KAUFMAN FOR CONGRESS**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	189440.16	371230.05
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	189440.16	371230.05
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	147580.78	260178.59
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	147580.78	260178.59
8. Cash on Hand at Close of Reporting Period (from Line 27).....	124299.67	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	13248.21	

**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

**JOE KAUFMAN FOR CONGRESS**

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	43740.00	80742.33
(ii) Unitemized.....	145700.16	282987.72
(iii) TOTAL of contributions from individuals ▶	189440.16	363730.05
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	7500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	189440.16	371230.05
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	5000.00	13248.21
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	5000.00	13248.21
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	194440.16	384478.26

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	147580.78	260178.59
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	147580.78	260178.59

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	77440.29
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	194440.16
25. SUBTOTAL (add Line 23 and Line 24).....	271880.45
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	147580.78
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	124299.67

**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 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RONALD ADAMS**

Mailing Address 1002 EMERALD DR

City ALEXANDRIA State VA Zip Code 22308

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 23 / 2012

**Transaction ID : SA11AI.13110**

Amount of Each Receipt this Period  
 Campaign Contribution 250.00

**B.** Full Name (Last, First, Middle Initial)  
**MR JACK ATTAWAY**

Mailing Address 5710 OAKTREE AVE

City FORT LAUDERDALE State FL Zip Code 33312

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

Name of Employer Attaway Electric Occupation A/C Contractor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 11 / 2012

**Transaction ID : SA11AI.13325**

Amount of Each Receipt this Period  
 Campaign Contribution 200.00

**C.** Full Name (Last, First, Middle Initial)  
**RAY R BARRETT**

Mailing Address HC 34 BOX 3

City MIDKIFF State TX Zip Code 79755

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

Name of Employer SELF Occupation FARMER RANCHER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 24 / 2012

**Transaction ID : SA11AI.13439**

Amount of Each Receipt this Period  
 Campaign Contribution 250.00

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RAY R BARRETT**

Mailing Address **HC 34 BOX 3**

City **MIDKIFF** State **TX** Zip Code **79755**

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

Name of Employer **SELF** Occupation **FARMER RANCHER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 21 / 2012**

**Transaction ID : SA11AI.13441**

Amount of Each Receipt this Period  
**250.00**

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**RICHARD G BENNETT**

Mailing Address **1694 E HAYDEN AVE**

City **HAYDEN LAKE** State **ID** Zip Code **83835**

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

Name of Employer **SELF** Occupation **DIRECTOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 09 / 2012**

**Transaction ID : SA11AI.13554**

Amount of Each Receipt this Period  
**100.00**

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**STANLEY BERENZWEIG**

Mailing Address **500 S OCEAN BLVD**

City **BOCA RATON** State **FL** Zip Code **33432**

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

Name of Employer **Eastside Real Estate** Occupation **Condo Dev.**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2012**

**Transaction ID : SA11AI.13571**

Amount of Each Receipt this Period  
**250.00**

Campaign Contribution

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

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

**600.00**

**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 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR HANS BERGSTROM**

Mailing Address 2612 SW 15TH ST

City State Zip Code  
DEERFIELD BCH FL 33442

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

Name of Employer Self Occupation Prof-Writer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 12 / 2012**

**Transaction ID : SA11AI.13573**

Amount of Each Receipt this Period  
**250.00**  
 Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**JACK BODINE**

Mailing Address 50 CREEKWOOD LN

City State Zip Code  
SAINT LOUIS MO 63124

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

Name of Employer Self Occupation Writer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 09 / 2012**

**Transaction ID : SA11AI.13699**

Amount of Each Receipt this Period  
**250.00**  
 Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**GUY BOWERS**

Mailing Address PO BOX 8090

City State Zip Code  
RUIDOSO NM 88355

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

Name of Employer Retired Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 22 / 2012**

**Transaction ID : SA11AI.13763**

Amount of Each Receipt this Period  
**2500.00**  
 Campaign Contribution

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

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

**3000.00**

**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 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LYNDA R BRITTON**

Mailing Address 9913 LAKE SHORE BLVD

City State Zip Code  
CLEVELAND OH 44108

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

Name of Employer Occupation  
Britton Fund, Inc. President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
MM / DD / YYYY  
06 / 28 / 2012

**Transaction ID : SA11AI.13858**

Amount of Each Receipt this Period  
200.00

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**SUSAN BRUNOFF**

Mailing Address 334 W CEDAR ST

City State Zip Code  
NEW HOLLAND PA 17557

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

Name of Employer Occupation  
Retired RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
290.00

Date of Receipt  
MM / DD / YYYY  
04 / 09 / 2012

**Transaction ID : SA11AI.13937**

Amount of Each Receipt this Period  
100.00

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**SUSAN BRUNOFF**

Mailing Address 334 W CEDAR ST

City State Zip Code  
NEW HOLLAND PA 17557

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

Name of Employer Occupation  
Retired RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
340.00

Date of Receipt  
MM / DD / YYYY  
04 / 09 / 2012

**Transaction ID : SA11AI.13938**

Amount of Each Receipt this Period  
50.00

Campaign Contribution

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

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

350.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**SUSAN BRUNOFF**

Mailing Address 334 W CEDAR ST

City: NEW HOLLAND State: PA Zip Code: 17557

FEC ID number of contributing federal political committee: C

Name of Employer: Retired Occupation: RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 440.00

Date of Receipt: 04 / 24 / 2012

**Transaction ID : SA11AI.13939**

Amount of Each Receipt this Period: 100.00

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**SUSAN BRUNOFF**

Mailing Address 334 W CEDAR ST

City: NEW HOLLAND State: PA Zip Code: 17557

FEC ID number of contributing federal political committee: C

Name of Employer: Retired Occupation: RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 640.00

Date of Receipt: 05 / 17 / 2012

**Transaction ID : SA11AI.13940**

Amount of Each Receipt this Period: 200.00

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**SUSAN BRUNOFF**

Mailing Address 334 W CEDAR ST

City: NEW HOLLAND State: PA Zip Code: 17557

FEC ID number of contributing federal political committee: C

Name of Employer: Retired Occupation: RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 740.00

Date of Receipt: 06 / 05 / 2012

**Transaction ID : SA11AI.13941**

Amount of Each Receipt this Period: 100.00

Campaign Contribution

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

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

400.00

**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 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**FREDERICK BRYAN**

Mailing Address 8980 INDIAN RIDGE LN

City CINCINNATI State OH Zip Code 45243

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

Name of Employer Retired Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 13 / 2012

**Transaction ID : SA11AI.13943**

Amount of Each Receipt this Period  
 Campaign Contribution 250.00

**B.** Full Name (Last, First, Middle Initial)  
**JOSEPH BUTTIGIEG**

Mailing Address 15811 COLLINS AVE APT 1001

City NORTH MIAMI BEACH State FL Zip Code 33160

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

Name of Employer Retired Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2012

**Transaction ID : SA11AI.14030**

Amount of Each Receipt this Period  
 Campaign Contribution 250.00

**C.** Full Name (Last, First, Middle Initial)  
**MS SUE M CANNON**

Mailing Address 6420 W LAKERIDGE RD

City LAKEWOOD State CO Zip Code 80227

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2012

**Transaction ID : SA11AI.14109**

Amount of Each Receipt this Period  
 Campaign Contribution 200.00

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**FAUST E CAPOBIANCO**

Mailing Address 3500 CHIPMAN RD

City EASTON State PA Zip Code 18045

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

Name of Employer Capobianco Family Fund Occupation Principal

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 18 / 2012

**Transaction ID : SA11AI.14122**

Amount of Each Receipt this Period  
 Campaign Contribution 250.00

**B.** Full Name (Last, First, Middle Initial)  
**ELEANOR COBB**

Mailing Address 131 S VISTA ST

City LOS ANGELES State CA Zip Code 90036

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

**Transaction ID : SA11AI.14333**

Amount of Each Receipt this Period  
 Campaign Contribution 250.00

**C.** Full Name (Last, First, Middle Initial)  
**ELEANOR COBB**

Mailing Address 131 S VISTA ST

City LOS ANGELES State CA Zip Code 90036

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 22 / 2012

**Transaction ID : SA11AI.14335**

Amount of Each Receipt this Period  
 Campaign Contribution 250.00

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

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

750.00

**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 12 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CRAIGG CODY**

Mailing Address 101 STEEPLEWOOD DR

City State Zip Code  
EXTON PA 19341

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

Name of Employer Occupation  
WASTE CONNECTIONS INC BUSINESS OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 21 / 2012

**Transaction ID : SA11AI.14345**

Amount of Each Receipt this Period  
500.00

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**John R Cohagen**

Mailing Address 3939 95th Street

City State Zip Code  
Boulder CO 80301

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

Name of Employer Occupation  
Self SNG Prop companies Property Mgr.

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2012

**Transaction ID : SA11AI.14350**

Amount of Each Receipt this Period  
250.00

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**BETTY CRAWFORD**

Mailing Address 601 ASPEN TRL

City State Zip Code  
MUSCATINE IA 52761

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2012

**Transaction ID : SA11AI.14499**

Amount of Each Receipt this Period  
200.00

Campaign Contribution

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

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

950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>BETTY CRAWFORD</b>		Date of Receipt MM / DD / YYYY 06 / 21 / 2012
Mailing Address 601 ASPEN TRL		<b>Transaction ID : SA11AI.14502</b>
City MUSCATINE	State IA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer RETIRED	Occupation RETIRED	Campaign Contribution
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 650.00	

Full Name (Last, First, Middle Initial) <b>PAUL DECLEVA</b>		Date of Receipt MM / DD / YYYY 06 / 22 / 2012
Mailing Address 325 N SAINT PAUL ST STE 1625		<b>Transaction ID : SA11AI.14658</b>
City DALLAS	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer DP CONSULTANTS	Occupation CONSULTANT	Campaign Contribution
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>REBECCA DORNER</b>		Date of Receipt MM / DD / YYYY 04 / 09 / 2012
Mailing Address 18151 140TH AVE NE UNIT 3309		<b>Transaction ID : SA11AI.14826</b>
City WOODINVILLE	State WA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer RETIRED	Occupation RETIRED	Campaign Contribution
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 235.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	550.00
<b>TOTAL</b> 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 14 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JANE DOYLE**

Mailing Address 3172 HORSLEY MILL RD

City State Zip Code  
CARROLLTON GA 30116

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

Name of Employer Occupation  
AT&T RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
293.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2012

**Transaction ID : SA11AI.14850**

Amount of Each Receipt this Period  
 100.00

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Brenda K DuCray**

Mailing Address 2052 Ben Franklin Drive,  
Unit 1101C

City State Zip Code  
Sarasota FL 34236

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

Name of Employer Occupation  
Broker Real Estate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 01 / 2012

**Transaction ID : SA11AI.14872**

Amount of Each Receipt this Period  
 2500.00

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**DEAN T DUCRAY**

Mailing Address 2052 BENJAMIN FRANKLIN DR  
UNIT 110

City State Zip Code  
SARASOTA FL 34236

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

Name of Employer Occupation  
Medoc, Inc. Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 08 / 2012

**Transaction ID : SA11AI.14874**

Amount of Each Receipt this Period  
 2500.00

Campaign Contribution

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

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

5100.00

**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 15 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**SUSAN DULIN**

Mailing Address 2405 COUNTY ROAD 501

City BAYFIELD State CO Zip Code 81122

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2012

**Transaction ID : SA11AI.14882**

Amount of Each Receipt this Period  
250.00

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**MARTIN ELLBOGEN**

Mailing Address 93 FAIRWAY DR

City CASPER State WY Zip Code 82604

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2012

**Transaction ID : SA11AI.14975**

Amount of Each Receipt this Period  
100.00

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**AH FEIGE**

Mailing Address 1000 NW 134TH ST

City SEATTLE State WA Zip Code 98177

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

Name of Employer AH Feige Occupation Construction

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2012

**Transaction ID : SA11AI.15094**

Amount of Each Receipt this Period  
500.00

Campaign Contribution

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

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

850.00

**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 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR EDWARD FISHER**

Mailing Address 70 COUNTY ROAD 486

City MERIDIAN State MS Zip Code 39301

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

Name of Employer ReTIREd Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2012

**Transaction ID : SA11AI.15197**

Amount of Each Receipt this Period  
75.00

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**EDWARD FREDRICKSON**

Mailing Address 1217 WILLOWOOD LN

City GULF BREEZE State FL Zip Code 32563

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

Name of Employer ReTIREd Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2012

**Transaction ID : SA11AI.15330**

Amount of Each Receipt this Period  
35.00

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**MR THOMAS GALLAGHER**

Mailing Address 1250 CAVE ST UNIT 3  
Unit 3

City LA JOLLA State CA Zip Code 92037

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2012

**Transaction ID : SA11AI.15403**

Amount of Each Receipt this Period  
100.00

Campaign Contribution

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

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

210.00



**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 17 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR THOMAS GALLAGHER**

Mailing Address 1250 CAVE ST UNIT 3  
Unit 3

City LA JOLLA State CA Zip Code 92037

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2012

**Transaction ID : SA11AI.15404**

Amount of Each Receipt this Period  
100.00

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**MS JEANNE GEIGER**

Mailing Address 4814 HARBOUR HEIGHTS DR

City MUKILTEO State WA Zip Code 98275

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2012

**Transaction ID : SA11AI.15456**

Amount of Each Receipt this Period  
100.00

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**MS JEANNE GEIGER**

Mailing Address 4814 HARBOUR HEIGHTS DR

City MUKILTEO State WA Zip Code 98275

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2012

**Transaction ID : SA11AI.15459**

Amount of Each Receipt this Period  
100.00

Campaign Contribution

**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: (check only one)	PAGE 18 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BERNARD S GEWIRZ**

Mailing Address 1666 K ST NW

City WASHINGTON State DC Zip Code 20006

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

Name of Employer Mgmt & Dev Co. Occupation Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 17 / 2012**

**Transaction ID : SA11AI.15495**

Amount of Each Receipt this Period  
**100.00**

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**BERNARD S GEWIRZ**

Mailing Address 1666 K ST NW

City WASHINGTON State DC Zip Code 20006

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

Name of Employer Mgmt & Dev Co. Occupation Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 25 / 2012**

**Transaction ID : SA11AI.15496**

Amount of Each Receipt this Period  
**100.00**

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT GILES**

Mailing Address 730 GERMANTOWN CIR APT 211

City CHATTANOOGA State TN Zip Code 37412

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **320.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 20 / 2012**

**Transaction ID : SA11AI.15510**

Amount of Each Receipt this Period  
**100.00**

Campaign Contribution

**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: (check only one)	PAGE 19 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD GRIFFITH**

Mailing Address **PO BOX 91610**

City **LAFAYETTE** State **LA** Zip Code **70509**

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

Name of Employer **Self** Occupation **INVESTOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 01 / 2012**

**Transaction ID : SA11AI.15686**

Amount of Each Receipt this Period  
**100.00**

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**RICHARD GRIFFITH**

Mailing Address **PO BOX 91610**

City **LAFAYETTE** State **LA** Zip Code **70509**

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

Name of Employer **Self** Occupation **INVESTOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 15 / 2012**

**Transaction ID : SA11AI.15689**

Amount of Each Receipt this Period  
**250.00**

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**RICHARD GRIFFITH**

Mailing Address **PO BOX 91610**

City **LAFAYETTE** State **LA** Zip Code **70509**

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

Name of Employer **Self** Occupation **INVESTOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**800.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 17 / 2012**

**Transaction ID : SA11AI.15690**

Amount of Each Receipt this Period  
**100.00**

Campaign Contribution

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

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

**450.00**

**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 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR FRANK GROSS**

Mailing Address 150 TREMONT AVE

City State Zip Code  
FORT THOMAS KY 41075

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : SA11A1.15707**

Amount of Each Receipt this Period  
100.00

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**MR FRANK GROSS**

Mailing Address 150 TREMONT AVE

City State Zip Code  
FORT THOMAS KY 41075

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 05 / 2012

**Transaction ID : SA11A1.15708**

Amount of Each Receipt this Period  
100.00

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**ERIK GUNDERSON**

Mailing Address 15368 W GLENROSA AVE

City State Zip Code  
GOODYEAR AZ 85395

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

Name of Employer Occupation  
SELF PHYSICIAN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 16 / 2012

**Transaction ID : SA11A1.15741**

Amount of Each Receipt this Period  
1000.00

Campaign Contribution

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

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

1200.00

**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 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DOROTHY M HARKNESS**

Mailing Address 925 IRVING DR

City BURBANK State CA Zip Code 91504

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

Name of Employer RETIRED Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2012

**Transaction ID : SA11AI.15876**

Amount of Each Receipt this Period  
 Campaign Contribution 150.00

**B.** Full Name (Last, First, Middle Initial)  
**TSUKASA HATAKEYAMA**

Mailing Address 285 OXFORD ST APT 18

City ROCHESTER State NY Zip Code 14607

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

Name of Employer RETIRED Occupation Architect

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 10 / 2012

**Transaction ID : SA11AI.15949**

Amount of Each Receipt this Period  
 Campaign Contribution 250.00

**C.** Full Name (Last, First, Middle Initial)  
**MR CHARLES F HENDERSON**

Mailing Address 231 VIA LAS BRISAS

City PALM BEACH State FL Zip Code 33480

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2012

**Transaction ID : SA11AI.16010**

Amount of Each Receipt this Period  
 Campaign Contribution 50.00

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

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

450.00

**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 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KEITH G HERNKE**

Mailing Address 17055 BEVERLY DR

City: BROOKFIELD State: WI Zip Code: 53005

FEC ID number of contributing federal political committee: C

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 05 / 01 / 2012

**Transaction ID : SA11AI.16060**

Amount of Each Receipt this Period: 100.00

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**KEITH G HERNKE**

Mailing Address 17055 BEVERLY DR

City: BROOKFIELD State: WI Zip Code: 53005

FEC ID number of contributing federal political committee: C

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 06 / 01 / 2012

**Transaction ID : SA11AI.16061**

Amount of Each Receipt this Period: 200.00

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**KEITH G HERNKE**

Mailing Address 17055 BEVERLY DR

City: BROOKFIELD State: WI Zip Code: 53005

FEC ID number of contributing federal political committee: C

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 600.00

Date of Receipt: 06 / 21 / 2012

**Transaction ID : SA11AI.16062**

Amount of Each Receipt this Period: 100.00

Campaign Contribution

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

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

400.00

**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 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**FRANK S HERTZOG**

Mailing Address 7900 SHADOW BEND DR SE

City HUNTSVILLE	State AL	Zip Code 35802
--------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 10 / 2012

**Transaction ID : SA11Al.16071**

Amount of Each Receipt this Period  
 Campaign Contribution  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
**FRANK S HERTZOG**

Mailing Address 7900 SHADOW BEND DR SE

City HUNTSVILLE	State AL	Zip Code 35802
--------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 22 / 2012

**Transaction ID : SA11Al.16072**

Amount of Each Receipt this Period  
 Campaign Contribution  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
**FRANK S HERTZOG**

Mailing Address 7900 SHADOW BEND DR SE

City HUNTSVILLE	State AL	Zip Code 35802
--------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2012

**Transaction ID : SA11Al.16073**

Amount of Each Receipt this Period  
 Campaign Contribution  
 100.00

**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: (check only one)	PAGE 24 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Constance B Hofkin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 08 / 2012
Mailing Address 4100 Galt Ocean Dr #1101		<b>Transaction ID : SA11Al.16149</b>
City State Zip Code Fort Lauderdale FL 33308	Amount of Each Receipt this Period Campaign Contribution 25.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired Retired	Amount of Each Receipt this Period Campaign Contribution 225.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 225.00	

Full Name (Last, First, Middle Initial) <b>B. Constance B Hofkin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 01 / 2012
Mailing Address 4100 Galt Ocean Dr #1101		<b>Transaction ID : SA11Al.16150</b>
City State Zip Code Fort Lauderdale FL 33308	Amount of Each Receipt this Period Campaign Contribution 25.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired Retired	Amount of Each Receipt this Period Campaign Contribution 250.00
Receipt For: 2012 <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) <b>C. Constance B Hofkin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 08 / 2012
Mailing Address 4100 Galt Ocean Dr #1101		<b>Transaction ID : SA11Al.16151</b>
City State Zip Code Fort Lauderdale FL 33308	Amount of Each Receipt this Period Campaign Contribution 25.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired Retired	Amount of Each Receipt this Period Campaign Contribution 275.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> This Period (last page this line number only).....	75.00



**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 25 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Constance B Hofkin**

Mailing Address 4100 Galt Ocean Dr  
#1101

City Fort Lauderdale State FL Zip Code 33308

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 01 / 2012

**Transaction ID : SA11Al.16152**

Amount of Each Receipt this Period  
25.00

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Constance B Hofkin**

Mailing Address 4100 Galt Ocean Dr  
#1101

City Fort Lauderdale State FL Zip Code 33308

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
325.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 08 / 2012

**Transaction ID : SA11Al.16153**

Amount of Each Receipt this Period  
25.00

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**DOROTHY JUDD**

Mailing Address 8401 50 33RD ST APT 233

City LINCOLN State NE Zip Code 68516

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
235.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2012

**Transaction ID : SA11Al.16515**

Amount of Each Receipt this Period  
50.00

Campaign Contribution

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

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

100.00

**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 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LINDA KENDALL**

Mailing Address 50 CLUB HOUSE RD

City State Zip Code  
KEY LARGO FL 33037

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 06 / 2012

**Transaction ID : SA11Al.16618**

Amount of Each Receipt this Period  
1000.00

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**DAVID H KEYSTON**

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  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 23 / 2012

**Transaction ID : SA11Al.16646**

Amount of Each Receipt this Period  
250.00

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**DAVID H KEYSTON**

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  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 25 / 2012

**Transaction ID : SA11Al.16645**

Amount of Each Receipt this Period  
100.00

Campaign Contribution

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

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

1350.00

**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 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR ROBERT KITTREDGE**

Mailing Address 622 N DARTMOUTH RD

City State Zip Code  
SPOKANE VALLEY WA 99206

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
205.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 05 / 2012

**Transaction ID : SA11AI.16684**

Amount of Each Receipt this Period  
35.00

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**MR ROBERT KITTREDGE**

Mailing Address 622 N DARTMOUTH RD

City State Zip Code  
SPOKANE VALLEY WA 99206

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
255.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 21 / 2012

**Transaction ID : SA11AI.16685**

Amount of Each Receipt this Period  
50.00

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**MR ROBERT KITTREDGE**

Mailing Address 622 N DARTMOUTH RD

City State Zip Code  
SPOKANE VALLEY WA 99206

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
355.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 21 / 2012

**Transaction ID : SA11AI.16686**

Amount of Each Receipt this Period  
100.00

Campaign Contribution

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

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

185.00

**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 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR WALTER KLEINER**

Mailing Address 1725 89TH PL NE

City State Zip Code  
CLYDE HILL WA 98004

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1125.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 08 / 2012

**Transaction ID : SA11AI.16692**

Amount of Each Receipt this Period  
375.00

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**BARBARA KONO**

Mailing Address 87481 74TH AVE

City State Zip Code  
THERMAL CA 92274

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 22 / 2012

**Transaction ID : SA11AI.16781**

Amount of Each Receipt this Period  
200.00

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**DAVID KRETT**

Mailing Address 68 KNAPP ST

City State Zip Code  
EASTON CT 06612

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 25 / 2012

**Transaction ID : SA11AI.16817**

Amount of Each Receipt this Period  
250.00

Campaign Contribution

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

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

825.00

**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 29 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>Wilson G LAKE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 22 / 2012	
Mailing Address PO BOX 2248		<b>Transaction ID : SA11AI.16864</b>	
City BAKERSFIELD	State CA	Zip Code 93303	Amount of Each Receipt this Period Campaign Contribution 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Kern Steet	Occupation Owner		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) <b>MR MYRON C LEWIS</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 25 / 2012	
Mailing Address PO BOX 793		<b>Transaction ID : SA11AI.17045</b>	
City AUBURN	State WA	Zip Code 98071	Amount of Each Receipt this Period Campaign Contribution 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2012 <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) <b>ARTHUR C LICCHILLO</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 15 / 2012	
Mailing Address 258 HAMPTON PL		<b>Transaction ID : SA11AI.17049</b>	
City JUPITER	State FL	Zip Code 33458	Amount of Each Receipt this Period Campaign Contribution 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	650.00
<b>TOTAL</b> 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 30 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. HAROLD LIPPERT</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 21 / 2012
Mailing Address PO BOX 965 1012 20TH STREET City State Zip Code FORT BENTON MT 59442		<b>Transaction ID : SA11AI.17085</b>
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Campaign Contribution 150.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date Campaign Contribution 250.00	

Full Name (Last, First, Middle Initial) <b>B. HAROLD LIPPERT</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 08 / 2012
Mailing Address PO BOX 965 1012 20TH STREET City State Zip Code FORT BENTON MT 59442		<b>Transaction ID : SA11AI.17086</b>
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Campaign Contribution 50.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date Campaign Contribution 300.00	

Full Name (Last, First, Middle Initial) <b>C. LORRAINE LOVELACE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 08 / 2012
Mailing Address 4974 RIO VERDE DR City State Zip Code SAN JOSE CA 95118		<b>Transaction ID : SA11AI.17163</b>
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Campaign Contribution 100.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date Campaign Contribution 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	Campaign Contribution 300.00
<b>TOTAL</b> This Period (last page this line number only).....	Campaign Contribution

**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 31 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DONALD T LYNCH**

Mailing Address 1477 PATRIOT DR

City MELBOURNE State FL Zip Code 32940

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 09 / 2012

**Transaction ID : SA11AI.17213**

Amount of Each Receipt this Period  
250.00

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**FRANK LYNCH**

Mailing Address PO BOX 2176

City EDWARDS State CO Zip Code 81632

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2012

**Transaction ID : SA11AI.17211**

Amount of Each Receipt this Period  
100.00

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**FRANK LYNCH**

Mailing Address PO BOX 2176

City EDWARDS State CO Zip Code 81632

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2012

**Transaction ID : SA11AI.17214**

Amount of Each Receipt this Period  
100.00

Campaign Contribution

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

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

450.00

**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 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS LORNA MANSFIELD**

Mailing Address 1954 MAGNOLIA WAY

City State Zip Code  
WALNUT CREEK CA 94595

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 08 / 2012

**Transaction ID : SA11AI.17323**

Amount of Each Receipt this Period  
 Campaign Contribution 100.00

**B.** Full Name (Last, First, Middle Initial)  
**MS LORNA MANSFIELD**

Mailing Address 1954 MAGNOLIA WAY

City State Zip Code  
WALNUT CREEK CA 94595

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2012

**Transaction ID : SA11AI.17324**

Amount of Each Receipt this Period  
 Campaign Contribution 75.00

**C.** Full Name (Last, First, Middle Initial)  
**MS MARY K MANSFIELD**

Mailing Address 27 HILDA RD

City State Zip Code  
LYNN MA 01904

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2012

**Transaction ID : SA11AI.17325**

Amount of Each Receipt this Period  
 Campaign Contribution 100.00

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

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

275.00



**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 33 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>JAMES B MCCALL</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 01 / 2012
Mailing Address 3219 S TORREY PINES DR		<b>Transaction ID : SA11AI.17471</b>
City LAS VEGAS	State NV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer 4 Star Productions	Occupation Manager	Campaign Contribution
Receipt For: 2012 <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>WALTER MCDONALD</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 09 / 2012
Mailing Address 2101 STILLWATER RD		<b>Transaction ID : SA11AI.17522</b>
City NEWTON	State NJ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Retired	Occupation RETIRED	Campaign Contribution
Receipt For: 2012 <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>JOHN MCMAHON</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 20 / 2012
Mailing Address 11039 E DESERT VISTA DR		<b>Transaction ID : SA11AI.17585</b>
City SCOTTSDALE	State AZ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Retired	Occupation RETIRED	Campaign Contribution
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 210.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1025.00
<b>TOTAL</b> 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 34 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ALVIN E MCQUINN**

Mailing Address 1551 GULF SHORE BLVD S

City NAPLES State FL Zip Code 34102

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

Name of Employer Self Occupation INVESTMENT MGR & TRADER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 05 / 2012

**Transaction ID : SA11AI.17596**

Amount of Each Receipt this Period  
 1000.00

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**JOHN MENIG**

Mailing Address 435 30TH AVE W APT D302

City BRADENTON State FL Zip Code 34205

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2012

**Transaction ID : SA11AI.17644**

Amount of Each Receipt this Period  
 35.00

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**JOHN MENIG**

Mailing Address 435 30TH AVE W APT D302

City BRADENTON State FL Zip Code 34205

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
245.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2012

**Transaction ID : SA11AI.17645**

Amount of Each Receipt this Period  
 35.00

Campaign Contribution

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

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

1070.00

**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 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GLENN MEYERS**

Mailing Address 7519 NW 42ND CT

City State Zip Code  
CORAL SPRINGS FL 33065-2042

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

Name of Employer Self Occupation Doctor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**680.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 20 / 2012**

**Transaction ID : SA11AI.17705**

Amount of Each Receipt this Period  
**500.00**  
 Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Douglas Miller**

Mailing Address 7621 Arlen St

City State Zip Code  
Annandale VA 22003

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 15 / 2012**

**Transaction ID : SA11AI.17721**

Amount of Each Receipt this Period  
**250.00**  
 Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**THOMAS MIMS**

Mailing Address 1655 BANKS ST

City State Zip Code  
HOUSTON TX 77006

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

Name of Employer St. Lukes Med Twr Occupation Surgeon

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 02 / 2012**

**Transaction ID : SA11AI.17767**

Amount of Each Receipt this Period  
**250.00**  
 Campaign Contribution

**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 36 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DANIEL MONACO**

Mailing Address 533 ALLEGHENY AVE

City OAKMONT State PA Zip Code 15139

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

Name of Employer SELF Occupation RESTORATION

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
205.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 20 / 2012

**Transaction ID : SA11AI.17807**

Amount of Each Receipt this Period  
50.00

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**MR WILLIAM MORRISON**

Mailing Address 137 E FAIRMONT AVE

City NEW CASTLE State PA Zip Code 16105

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2012

**Transaction ID : SA11AI.17877**

Amount of Each Receipt this Period  
100.00

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Cherma Moskowitz**

Mailing Address 21520 Pioneer Blvd,  
Ste 205

City Hawaiian Gardens State CA Zip Code 90716

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

Name of Employer Self Occupation Doctor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 25 / 2012

**Transaction ID : SA11AI.17881**

Amount of Each Receipt this Period  
2500.00

Campaign Contribution

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

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

2650.00

**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 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Irving Moskowitz, MD**

Mailing Address 21520 Pioneer Blvd,  
Ste 205

City Hawaiian Gardens State CA Zip Code 90716

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

Name of Employer Self Occupation Doctor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 25 / 2012

**Transaction ID : SA11AI.17883**

Amount of Each Receipt this Period  
 Campaign Contribution  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**MR CLAIR J MURPHY**

Mailing Address 1626 RUTH ST N

City SAINT PAUL State MN Zip Code 55119

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
240.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2012

**Transaction ID : SA11AI.17948**

Amount of Each Receipt this Period  
 Campaign Contribution  
 50.00

**C.** Full Name (Last, First, Middle Initial)  
**JUDITH C NELSON**

Mailing Address 2025 LA PORTE DR

City PALM BCH GDNS State FL Zip Code 33410

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

Name of Employer Richard C Nelson Co Occupation Timeshares

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2012

**Transaction ID : SA11AI.18021**

Amount of Each Receipt this Period  
 Campaign Contribution  
 250.00

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

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

2800.00

**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 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN NIKKEL**

Mailing Address 6625 S JAMESTOWN PL

City State Zip Code  
TULSA OK 74136

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

Name of Employer Occupation  
Retired RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 27 / 2012

**Transaction ID : SA11A1.18068**

Amount of Each Receipt this Period  
250.00

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**MR FRANK NOONAN**

Mailing Address 241 LOCUST AVE

City State Zip Code  
SAN RAFAEL CA 94901

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

Name of Employer Occupation  
Trustees Condos

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 14 / 2012

**Transaction ID : SA11A1.18086**

Amount of Each Receipt this Period  
200.00

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**MR FRANK NOONAN**

Mailing Address 241 LOCUST AVE

City State Zip Code  
SAN RAFAEL CA 94901

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

Name of Employer Occupation  
Trustees Condos

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 12 / 2012

**Transaction ID : SA11A1.18087**

Amount of Each Receipt this Period  
200.00

Campaign Contribution

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

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

650.00

**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 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN O'LEARY**

Mailing Address 1258 WILSHIRE DR

City HERNDON State VA Zip Code 20170

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
230.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2012

**Transaction ID : SA11AI.18152**

Amount of Each Receipt this Period  
35.00

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**MARKHAM PALOMBO**

Mailing Address 10054 STRATMORE CIR

City SHREVEPORT State LA Zip Code 71115

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 17 / 2012

**Transaction ID : SA11AI.18213**

Amount of Each Receipt this Period  
100.00

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**MARKHAM PALOMBO**

Mailing Address 10054 STRATMORE CIR

City SHREVEPORT State LA Zip Code 71115

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 31 / 2012

**Transaction ID : SA11AI.18214**

Amount of Each Receipt this Period  
10.00

Campaign Contribution

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

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

145.00

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

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

FOR LINE NUMBER: PAGE 40 OF 87  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ROY Hampton PARK**

Mailing Address 1 HAMPTON HILL LN

City ITHACA State NY Zip Code 14850

FEC ID number of contributing federal political committee. C

Name of Employer Ithaca College Occupation Trustees

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 24 / 2012

**Transaction ID : SA11AI.18241**

Amount of Each Receipt this Period  
250.00

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**ROY Hampton PARK**

Mailing Address 1 HAMPTON HILL LN

City ITHACA State NY Zip Code 14850

FEC ID number of contributing federal political committee. C

Name of Employer Ithaca College Occupation Trustees

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 23 / 2012

**Transaction ID : SA11AI.18242**

Amount of Each Receipt this Period  
250.00

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**ROY Hampton PARK**

Mailing Address 1 HAMPTON HILL LN

City ITHACA State NY Zip Code 14850

FEC ID number of contributing federal political committee. C

Name of Employer Ithaca College Occupation Trustees

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2012

**Transaction ID : SA11AI.18243**

Amount of Each Receipt this Period  
250.00

Campaign Contribution

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

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

750.00



**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 41 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR JOHN PENSON**

Mailing Address **3756 ARMSTRONG AVE**

City **DALLAS** State **TX** Zip Code **75205**

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

Name of Employer **SELF EMPLOYED** Occupation **INVESTOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 02 / 2012**

**Transaction ID : SA11AI.18330**

Amount of Each Receipt this Period  
**250.00**

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**CATHERINE PERCY**

Mailing Address **757 HILLSIDE DR**

City **SOLVANG** State **CA** Zip Code **93463**

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

Name of Employer **Retired** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 09 / 2012**

**Transaction ID : SA11AI.18334**

Amount of Each Receipt this Period  
**100.00**

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Robert Pergament**

Mailing Address **17085 Whitehaven Dr**

City **Boca Raton** State **FL** Zip Code **33496**

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

Name of Employer **Pergament Enterprises, Inc.** Occupation **Owner**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 16 / 2012**

**Transaction ID : SA11AI.18338**

Amount of Each Receipt this Period  
**500.00**

Campaign Contribution

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

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

**850.00**

**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 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR LEON W POTTER**

Mailing Address 0-508 LEONARD ST NW

City GRAND RAPIDS State MI Zip Code 49504

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
209.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 17 / 2012

**Transaction ID : SA11AI.18488**

Amount of Each Receipt this Period  
 Campaign Contribution 50.00

**B.** Full Name (Last, First, Middle Initial)  
**MR LEON W POTTER**

Mailing Address 0-508 LEONARD ST NW

City GRAND RAPIDS State MI Zip Code 49504

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
244.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 08 / 2012

**Transaction ID : SA11AI.18489**

Amount of Each Receipt this Period  
 Campaign Contribution 35.00

**C.** Full Name (Last, First, Middle Initial)  
**MS CLAIRE RAINS**

Mailing Address 420 41ST AVE

City SAN FRANCISCO State CA Zip Code 94121

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
290.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 10 / 2012

**Transaction ID : SA11AI.18584**

Amount of Each Receipt this Period  
 Campaign Contribution 35.00

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

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

120.00

**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 43 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS CLAIRE RAINS**

Mailing Address 420 41ST AVE

City SAN FRANCISCO State CA Zip Code 94121

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **330.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 08 / 2012**

**Transaction ID : SA11AI.18585**

Amount of Each Receipt this Period  
**40.00**

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**MS CLAIRE RAINS**

Mailing Address 420 41ST AVE

City SAN FRANCISCO State CA Zip Code 94121

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **365.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 21 / 2012**

**Transaction ID : SA11AI.18586**

Amount of Each Receipt this Period  
**35.00**

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**JOAN B RAK**

Mailing Address 972 E CAMINO DIESTRO

City TUCSON State AZ Zip Code 85704

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 02 / 2012**

**Transaction ID : SA11AI.18590**

Amount of Each Receipt this Period  
**250.00**

Campaign Contribution

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

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

**325.00**

**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 87  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**REINHARD G REINHARD**

Mailing Address 75 HARVARD AVE

City PALMERTON State PA Zip Code 18071

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

Name of Employer SLBS Occupation Manager

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2012

**Transaction ID : SA11AI.18685**

Amount of Each Receipt this Period  
 Campaign Contribution 500.00

**B.** Full Name (Last, First, Middle Initial)  
**PHILIP RITCH**

Mailing Address 146 KALUAMOO ST

City KAILUA State HI Zip Code 96734

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2012

**Transaction ID : SA11AI.18764**

Amount of Each Receipt this Period  
 Campaign Contribution 10.00

**C.** Full Name (Last, First, Middle Initial)  
**PHILIP RITCH**

Mailing Address 146 KALUAMOO ST

City KAILUA State HI Zip Code 96734

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 22 / 2012

**Transaction ID : SA11AI.18765**

Amount of Each Receipt this Period  
 Campaign Contribution 10.00

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

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

520.00

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

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

FOR LINE NUMBER: PAGE 45 OF 87  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**PHILIP RITCH**

Mailing Address 146 KALUAMOO ST

City KAILUA State HI Zip Code 96734

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
245.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 08 / 2012

**Transaction ID : SA11AI.18766**

Amount of Each Receipt this Period  
25.00

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**PHILIP RITCH**

Mailing Address 146 KALUAMOO ST

City KAILUA State HI Zip Code 96734

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
255.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2012

**Transaction ID : SA11AI.18767**

Amount of Each Receipt this Period  
10.00

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT RUST**

Mailing Address 6670 RIVIERA DR

City CORAL GABLES State FL Zip Code 33146

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

Name of Employer Real Estate Occupation Sales

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2012

**Transaction ID : SA11AI.18954**

Amount of Each Receipt this Period  
1000.00

Campaign Contribution

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

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

1035.00

**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 46 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ANTHONY H RYAN**

Mailing Address 393 DORCHESTER RD

City LYME State NH Zip Code 03768

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

Name of Employer Retired Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

**Transaction ID : SA11AI.18960**

Amount of Each Receipt this Period  
 Campaign Contribution 250.00

**B.** Full Name (Last, First, Middle Initial)  
**NANCY SAMPSON**

Mailing Address 9614 PARKWOOD CT

City FORT MYERS State FL Zip Code 33908

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

Name of Employer Retired Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 18 / 2012

**Transaction ID : SA11AI.19001**

Amount of Each Receipt this Period  
 Campaign Contribution 200.00

**C.** Full Name (Last, First, Middle Initial)  
**EDWIN C SANDHAM**

Mailing Address 1964 SW SAINT ANDREWS DR

City PALM CITY State FL Zip Code 34990

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 09 / 2012

**Transaction ID : SA11AI.19016**

Amount of Each Receipt this Period  
 Campaign Contribution 250.00

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

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

700.00

**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 47 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**EDWIN C SANDHAM**

Mailing Address 1964 SW SAINT ANDREWS DR

City PALM CITY State FL Zip Code 34990

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 06 / 2012**

**Transaction ID : SA11AI.19017**

Amount of Each Receipt this Period  
**250.00**

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**GUS SANKERS**

Mailing Address 4091 TIMUQUANA RD

City JACKSONVILLE State FL Zip Code 32210

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 22 / 2012**

**Transaction ID : SA11AI.19022**

Amount of Each Receipt this Period  
**100.00**

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**BETTY SCHAEFER**

Mailing Address 4201 GULF SHORE BLVD N APT 601

City NAPLES State FL Zip Code 34103

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

Name of Employer Gulf Shore Playhouse Occupation Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 11 / 2012**

**Transaction ID : SA11AI.19056**

Amount of Each Receipt this Period  
**1000.00**

Campaign Contribution

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

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

**1350.00**

**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 48 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Jay SHAPIRO**

Mailing Address 1401 DIPLOMAT PKWY

City: HOLLYWOOD State: FL Zip Code: 33019

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

Name of Employer: Spa & Resort Occupation: Mangement

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 04 / 10 / 2012

**Transaction ID : SA11AI.19239**

Amount of Each Receipt this Period: 250.00

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Jay SHAPIRO**

Mailing Address 1401 DIPLOMAT PKWY

City: HOLLYWOOD State: FL Zip Code: 33019

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

Name of Employer: Spa & Resort Occupation: Mangement

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 05 / 22 / 2012

**Transaction ID : SA11AI.19240**

Amount of Each Receipt this Period: 250.00

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**RAMSAY SIMMONS**

Mailing Address PO BOX 760

City: BAINBRIDGE State: GA Zip Code: 39818

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

Name of Employer: Alberta Crate & Box Occupation: President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 04 / 30 / 2012

**Transaction ID : SA11AI.19336**

Amount of Each Receipt this Period: 500.00

Campaign Contribution

**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 49 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RAMSAY SIMMONS**

Mailing Address **PO BOX 760**

City **BAINBRIDGE** State **GA** Zip Code **39818**

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

Name of Employer **Alberta Crate & Box** Occupation **President**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 20 / 2012**

**Transaction ID : SA11AI.19344**

Amount of Each Receipt this Period  
**100.00**

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**BETTY M SMITH**

Mailing Address **1101 SMITHLAND BND**

City **ANDERSON** State **SC** Zip Code **29621**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 06 / 2012**

**Transaction ID : SA11AI.19464**

Amount of Each Receipt this Period  
**100.00**

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**BETTY M SMITH**

Mailing Address **1101 SMITHLAND BND**

City **ANDERSON** State **SC** Zip Code **29621**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 20 / 2012**

**Transaction ID : SA11AI.19473**

Amount of Each Receipt this Period  
**100.00**

Campaign Contribution

**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: (check only one)	PAGE 50 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KENNETH SOCHA**

Mailing Address 7010 ARMAT DR

City State Zip Code  
BETHESDA MD 20817

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 09 / 2012

**Transaction ID : SA11AI.19495**

Amount of Each Receipt this Period  
100.00

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**CATHY SPANO**

Mailing Address 711 SEAGATE DR

City State Zip Code  
DELRAY BEACH FL 33483

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

Name of Employer Occupation  
MERCATOR ASSET MGT HOMEMAKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 30 / 2012

**Transaction ID : SA11AI.19527**

Amount of Each Receipt this Period  
200.00

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**MR WILLIAM SPENCER**

Mailing Address 195 SURFSOUND DR

City State Zip Code  
SMITH RIVER CA 95567

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
210.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 06 / 2012

**Transaction ID : SA11AI.19543**

Amount of Each Receipt this Period  
35.00

Campaign Contribution

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

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

335.00

**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 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR WILLIAM SPENCER**

Mailing Address 195 SURFSOUND DR

City State Zip Code  
SMITH RIVER CA 95567

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
245.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 21 / 2012

**Transaction ID : SA11AI.19544**

Amount of Each Receipt this Period  
35.00

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**DELMER STUCKY**

Mailing Address 702 E SUNSET LN

City State Zip Code  
PRETTY PRAIRIE KS 67570

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 22 / 2012

**Transaction ID : SA11AI.19744**

Amount of Each Receipt this Period  
100.00

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**DELMER STUCKY**

Mailing Address 702 E SUNSET LN

City State Zip Code  
PRETTY PRAIRIE KS 67570

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 22 / 2012

**Transaction ID : SA11AI.19745**

Amount of Each Receipt this Period  
100.00

Campaign Contribution

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

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

235.00

**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 52 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Suzann M Suna**

Mailing Address 17267 Ventana Dr

City State Zip Code  
Boca Raton FL 33487

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

Name of Employer Occupation  
Charitable Unitrust Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 09 / 2012

**Transaction ID : SA11AI.19770**

Amount of Each Receipt this Period  
500.00

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**GARY L TEPAS**

Mailing Address 2022 CHEVIOT DR

City State Zip Code  
INVERNESS IL 60010

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 14 / 2012

**Transaction ID : SA11AI.19877**

Amount of Each Receipt this Period  
1000.00

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**GARY L TEPAS**

Mailing Address 2022 CHEVIOT DR

City State Zip Code  
INVERNESS IL 60010

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2012

**Transaction ID : SA11AI.19878**

Amount of Each Receipt this Period  
250.00

Campaign Contribution

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

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

1750.00

**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 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JEANNETTE THERRIAULT**

Mailing Address 2473 OLD RICHARDSON HWY

City NORTH POLE State AK Zip Code 99705

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **220.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 08 / 2012**

**Transaction ID : SA11AI.19898**

Amount of Each Receipt this Period  
**35.00**

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**JEANNETTE THERRIAULT**

Mailing Address 2473 OLD RICHARDSON HWY

City NORTH POLE State AK Zip Code 99705

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **245.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 26 / 2012**

**Transaction ID : SA11AI.19899**

Amount of Each Receipt this Period  
**25.00**

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**MR RAYMOND G TOBIN**

Mailing Address PO BOX 710218

City SAN DIEGO State CA Zip Code 92171

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 21 / 2012**

**Transaction ID : SA11AI.19946**

Amount of Each Receipt this Period  
**100.00**

Campaign Contribution

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

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

**160.00**

**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 54 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR RAYMOND G TOBIN**

Mailing Address **PO BOX 710218**

City **SAN DIEGO** State **CA** Zip Code **92171**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 26 / 2012**

**Transaction ID : SA11AI.19948**

Amount of Each Receipt this Period  
**100.00**

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**H JAMES TOFFEY**

Mailing Address **610 HERON POINT CT**

City **VERO BEACH** State **FL** Zip Code **32963**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 15 / 2012**

**Transaction ID : SA11AI.19954**

Amount of Each Receipt this Period  
**100.00**

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**JOHN VALERIUS**

Mailing Address **1909 CANTERBURY ST**

City **IRVING** State **TX** Zip Code **75062**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 01 / 2012**

**Transaction ID : SA11AI.20089**

Amount of Each Receipt this Period  
**50.00**

Campaign Contribution

**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 55 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN VALERIUS**

Mailing Address 1909 CANTERBURY ST

City IRVING State TX Zip Code 75062

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 01 / 2012**

**Transaction ID : SA11AI.20090**

Amount of Each Receipt this Period  
**50.00**

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**JOHN VALERIUS**

Mailing Address 1909 CANTERBURY ST

City IRVING State TX Zip Code 75062

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 21 / 2012**

**Transaction ID : SA11AI.20091**

Amount of Each Receipt this Period  
**100.00**

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**MRS BARBARA E VANAMBERG**

Mailing Address 101 NEWBERRY LN

City HOWELL State MI Zip Code 48843

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 10 / 2012**

**Transaction ID : SA11AI.20116**

Amount of Each Receipt this Period  
**100.00**

Campaign Contribution

**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 56 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MRS BARBARA E VANAMBERG**

Mailing Address 101 NEWBERRY LN

City State Zip Code  
HOWELL MI 48843

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 24 / 2012

**Transaction ID : SA11AI.20117**

Amount of Each Receipt this Period  
100.00

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**MRS BARBARA E VANAMBERG**

Mailing Address 101 NEWBERRY LN

City State Zip Code  
HOWELL MI 48843

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 22 / 2012

**Transaction ID : SA11AI.20118**

Amount of Each Receipt this Period  
200.00

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**MRS BARBARA E VANAMBERG**

Mailing Address 101 NEWBERRY LN

City State Zip Code  
HOWELL MI 48843

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 06 / 2012

**Transaction ID : SA11AI.20119**

Amount of Each Receipt this Period  
100.00

Campaign Contribution

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

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

400.00



**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 57 OF 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MRS BARBARA E VANAMBERG**

Mailing Address 101 NEWBERRY LN

City State Zip Code  
HOWELL MI 48843

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
900.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 20 / 2012

**Transaction ID : SA11AI.20120**

Amount of Each Receipt this Period  
200.00

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**MR EARL VENABLE**

Mailing Address PO BOX 81296

City State Zip Code  
LAFAYETTE LA 70598

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

Name of Employer Occupation  
SELF EMPLOYED INS BROKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 21 / 2012

**Transaction ID : SA11AI.20151**

Amount of Each Receipt this Period  
75.00

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**MILTON WALLACE**

Mailing Address 55 CASUARINA CONCOURSE

City State Zip Code  
CORAL GABLES FL 33143

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

Name of Employer Occupation  
Self Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 15 / 2012

**Transaction ID : SA11AI.20238**

Amount of Each Receipt this Period  
500.00

Campaign Contribution

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

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

775.00

**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 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KENNETH WEAVER**

Mailing Address **PO BOX 1371**

City **GALESBURG** State **IL** Zip Code **61402**

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

Name of Employer **Peterson Weaver & Assoc** Occupation **Mgr**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 17 / 2012**

**Transaction ID : SA11AI.20299**

Amount of Each Receipt this Period  
**250.00**

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**RUSSELL B WIGHT**

Mailing Address **2050 ROYAL PALM WAY**

City **BOCA RATON** State **FL** Zip Code **33432**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **625.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 25 / 2012**

**Transaction ID : SA11AI.20439**

Amount of Each Receipt this Period  
**375.00**

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT G WOLFE**

Mailing Address **670 OLD STATE RD**

City **FALLS** State **PA** Zip Code **18615**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 20 / 2012**

**Transaction ID : SA11AI.20538**

Amount of Each Receipt this Period  
**100.00**

Campaign Contribution

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

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

**725.00**

**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 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>ROBERT S WOOD</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 12 / 2012
Mailing Address 299 N TRINE ST		<b>Transaction ID : SA11AI.20561</b>
City CANAL WINCHESTER	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer RETIRED	Occupation RETIRED	Campaign Contribution
Receipt For: 2012 <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>Ellen Zyroff</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 11 / 2012
Mailing Address 7361 Rue Michael		<b>Transaction ID : SA11AI.20678</b>
City La Jolla	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	Campaign Contribution
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00	

Full Name (Last, First, Middle Initial) <b>Ellen Zyroff</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 28 / 2012
Mailing Address 7361 Rue Michael		<b>Transaction ID : SA11AI.20679</b>
City La Jolla	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Retired	Occupation Retired	Campaign Contribution
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 650.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	800.00
<b>TOTAL</b> This Period (last page this line number only).....	43740.00

**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 87
	<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)  
**JOE KAUFMAN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JOE KAUFMAN**

Mailing Address 2645 EXECUTIVE PARK DRIVE  
STE 512

City WESTON State FL Zip Code 33331

FEC ID number of contributing federal political committee. **C H2FL20043**

Name of Employer SELF Occupation CANDIDATE

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5005.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2012

**Transaction ID : SA13A.20680**

Amount of Each Receipt this Period  
5000.00

Personal Loan

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

5000.00

5000.00

**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 61 OF 87			
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. BASE CONNECT, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2012
Mailing Address 1155 15th St NW SUITE 410		Amount of Each Disbursement this Period 4709.41 <b>Transaction ID : SB17.20865</b>
City Washington State DC Zip Code 20005	Purpose of Disbursement Direct Mail Creative Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BASE CONNECT, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2012
Mailing Address 1155 15th St NW SUITE 410		Amount of Each Disbursement this Period 4362.07 <b>Transaction ID : SB17.20866</b>
City Washington State DC Zip Code 20005	Purpose of Disbursement Direct Mail Creative Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BASE CONNECT, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address 1155 15th St NW SUITE 410		Amount of Each Disbursement this Period 5103.04 <b>Transaction ID : SB17.20867</b>
City Washington State DC Zip Code 20005	Purpose of Disbursement Direct Mail Creative Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	14174.52
<b>TOTAL</b> 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 62 OF 87	
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. BEST BUY MHT 00005512 PLANTATION FL</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2012	
Mailing Address 12301 W Sunrise Blvd Flamingo Shop Ctr			Amount of Each Disbursement this Period 211.99	
City Plantation	State FL	Zip Code 33323	Transaction ID : SB17.20684	
Purpose of Disbursement Office Equipment		Category/ Type		
Candidate Name				
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Beth Torah</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012	
Mailing Address 20350 NE 26th Ave			Amount of Each Disbursement this Period 360.00	
City Miami	State FL	Zip Code 33180	Transaction ID : SB17.20692	
Purpose of Disbursement Donation		Category/ Type 007		
Candidate Name <b>JOE KAUFMAN FOR CONGRESS</b>				
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: FL	District: 20			

Full Name (Last, First, Middle Initial) <b>C. CENTURY DATA MAILING SERVICE</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2012	
Mailing Address 1155 15th St NW SUITE 410			Amount of Each Disbursement this Period 14636.09	
City Washington	State DC	Zip Code 20005	Transaction ID : SB17.20868	
Purpose of Disbursement Direct Mail Program:Postage		Category/ Type		
Candidate Name				
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	15208.08
<b>TOTAL</b> 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 63 OF 87	
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CENTURY DATA MAILING SERVICE</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address 1155 15th St NW SUITE 410		Amount of Each Disbursement this Period 12964.77
City Washington State DC Zip Code 20005	Purpose of Disbursement Direct Mail Program:Postage	
Candidate Name	Category/Type	Transaction ID : SB17.20869
Office Sought: House Senate President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. CENTURY DATA MAILING SERVICE</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2012
Mailing Address 1155 15th St NW SUITE 410		Amount of Each Disbursement this Period 2500.00
City Washington State DC Zip Code 20005	Purpose of Disbursement Direct Mail Program:Postage	
Candidate Name	Category/Type	Transaction ID : SB17.20870
Office Sought: House Senate President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. CENTURY DATA MAILING SERVICE</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2012
Mailing Address 1155 15th St NW SUITE 410		Amount of Each Disbursement this Period 15876.63
City Washington State DC Zip Code 20005	Purpose of Disbursement Direct Mail Program:Postage	
Candidate Name	Category/Type	Transaction ID : SB17.20871
Office Sought: House Senate President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	31341.40
<b>TOTAL</b> 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 64 OF 87			
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CENTURY DATA MAILING SERVICE</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address 1155 15th St NW SUITE 410			Amount of Each Disbursement this Period 6884.46
City Washington	State DC	Zip Code 20005	
Purpose of Disbursement Direct Mail Program:Postage		Candidate Name	Transaction ID : SB17.20872
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. CENTURY DATA MAILING SERVICE</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address 1155 15th St NW SUITE 410			Amount of Each Disbursement this Period 7000.00
City Washington	State DC	Zip Code 20005	
Purpose of Disbursement Direct Mail Program:Postage		Candidate Name	Transaction ID : SB17.20873
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) <b>C. CENTURY DATA MAILING SERVICE</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2012
Mailing Address 1155 15th St NW SUITE 410			Amount of Each Disbursement this Period 5740.16
City Washington	State DC	Zip Code 20005	
Purpose of Disbursement Direct Mail Program:Postage		Candidate Name	Transaction ID : SB17.20874
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	19624.62
<b>TOTAL</b> 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 65 OF 87	
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CENTURY DATA MAILING SERVICE</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address 1155 15th St NW SUITE 410		Amount of Each Disbursement this Period 5512.59 <b>Transaction ID : SB17.20875</b>
City Washington State DC Zip Code 20005	Purpose of Disbursement Direct Mail Program:Postage	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CENTURY DATA SYSTEMS CORP</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2012
Mailing Address 1155 - 15TH STREET, NW		Amount of Each Disbursement this Period 1110.54 <b>Transaction ID : SB17.20876</b>
City WASHINGTON State DC Zip Code 20005	Purpose of Disbursement Direct Mail :Data Processing	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CENTURY DATA SYSTEMS CORP</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address 1155 - 15TH STREET, NW		Amount of Each Disbursement this Period 1454.39 <b>Transaction ID : SB17.20877</b>
City WASHINGTON State DC Zip Code 20005	Purpose of Disbursement Direct Mail :Data Processing	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8077.52
<b>TOTAL</b> 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 66 OF 87	
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CENTURY DATA SYSTEMS CORP</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012	
Mailing Address 1155 - 15TH STREET, NW			Amount of Each Disbursement this Period 962.75	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SB17.20878	
Purpose of Disbursement Direct Mail :Data Processing		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. COMCAST CABLE COMMUNIC 800-COMCAST FL</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2012	
Mailing Address 11031 NW 55th St			Amount of Each Disbursement this Period 921.77	
City Plantation	State FL	Zip Code 33313	Transaction ID : SB17.20697	
Purpose of Disbursement Phones & Internet		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. CONSOLIDATED MAILING SERVICES</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2012	
Mailing Address 504 SHAW ROAD SUITE 206			Amount of Each Disbursement this Period 9325.93	
City STERLING	State VA	Zip Code 20166	Transaction ID : SB17.20879	
Purpose of Disbursement Direct Mail :Printing & Mailshop		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11210.45
<b>TOTAL</b> 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 67 OF 87	
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CONSOLIDATED MAILING SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address 504 SHAW ROAD SUITE 206		Amount of Each Disbursement this Period 364.62 <b>Transaction ID : SB17.20880</b>
City STERLING State VA Zip Code 20166	Purpose of Disbursement Direct Mail :Printing & Mailshop	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CONSOLIDATED MAILING SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address 504 SHAW ROAD SUITE 206		Amount of Each Disbursement this Period 6842.39 <b>Transaction ID : SB17.20881</b>
City STERLING State VA Zip Code 20166	Purpose of Disbursement Direct Mail :Printing & Mailshop	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CONSOLIDATED MAILING SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address 504 SHAW ROAD SUITE 206		Amount of Each Disbursement this Period 488.44 <b>Transaction ID : SB17.20882</b>
City STERLING State VA Zip Code 20166	Purpose of Disbursement Direct Mail :Printing & Mailshop	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7695.44
<b>TOTAL</b> 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 68 OF 87			
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Courtyard Office Plaza</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address 4577 Nob Hill Road, Ste 102 Ste 102		Amount of Each Disbursement this Period 636.00 <b>Transaction ID : SB17.20801</b>
City Sunrise Sunrise	State FL FL	
Purpose of Disbursement Campaign Office Rent	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Courtyard Office Plaza</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2012
Mailing Address 4577 Nob Hill Road, Ste 102 Ste 102		Amount of Each Disbursement this Period 636.00 <b>Transaction ID : SB17.20799</b>
City Sunrise Sunrise	State FL FL	
Purpose of Disbursement Campaign Office Rent	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Courtyard Office Plaza</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address 4577 Nob Hill Road, Ste 102 Ste 102		Amount of Each Disbursement this Period 636.00 <b>Transaction ID : SB17.20800</b>
City Sunrise Sunrise	State FL FL	
Purpose of Disbursement Campaign Office Rent	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1908.00
<b>TOTAL</b> 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 87	
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. DIRECT MAIL PROCESSORS, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address 1150 CONRAD COURT		Amount of Each Disbursement this Period 289.70 <b>Transaction ID : SB17.20884</b>
City HAGERSTOWN	State MD	
Zip Code 21740	Purpose of Disbursement Indirect Expenses:Caging & Escrow	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. DIRECT MAIL PROCESSORS, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2012
Mailing Address 1150 CONRAD COURT		Amount of Each Disbursement this Period 247.36 <b>Transaction ID : SB17.20885</b>
City HAGERSTOWN	State MD	
Zip Code 21740	Purpose of Disbursement Indirect Expenses:Caging & Escrow	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. DIRECT MAIL PROCESSORS, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address 1150 CONRAD COURT		Amount of Each Disbursement this Period 626.95 <b>Transaction ID : SB17.20886</b>
City HAGERSTOWN	State MD	
Zip Code 21740	Purpose of Disbursement Indirect Expenses:Caging & Escrow	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1164.01
<b>TOTAL</b> 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 87			
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. DONATIONPAGES COM .FUNDR</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address Internet Fundraising Website		Amount of Each Disbursement this Period 250.00
City Internet	State FL Zip Code 33351	
Purpose of Disbursement Fundraiser Website		<b>Transaction ID : SB17.20714</b>
Candidate Name		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Category/Type
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. DONOR PRECISION, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address 1900 N CULPEPER STREET		Amount of Each Disbursement this Period 1226.02
City ARLINGTON	State VA Zip Code 22007	
Purpose of Disbursement Direct Mail :Printing & Mailshop		<b>Transaction ID : SB17.20888</b>
Candidate Name		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Category/Type
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. FIRST VIRGINIA COMMUNITY BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2012
Mailing Address 1900 N CULPEPER STREET		Amount of Each Disbursement this Period 38.00
City ARLINGTON	State VA Zip Code 22007	
Purpose of Disbursement Indirect Expenses:Bank Charges		<b>Transaction ID : SB17.20892</b>
Candidate Name		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Category/Type
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1514.02
<b>TOTAL</b> 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 87	
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. FIRST VIRGINIA COMMUNITY BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2012
Mailing Address 1900 N CULPEPER STREET		Amount of Each Disbursement this Period 25.00 <b>Transaction ID : SB17.20893</b>
City ARLINGTON State VA Zip Code 22007	Purpose of Disbursement Indirect Expenses:Bank Charges	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. FIRST VIRGINIA COMMUNITY BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2012
Mailing Address 1900 N CULPEPER STREET		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : SB17.20894</b>
City ARLINGTON State VA Zip Code 22007	Purpose of Disbursement Indirect Expenses:Bank Charges	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. FIRST VIRGINIA COMMUNITY BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012
Mailing Address 1900 N CULPEPER STREET		Amount of Each Disbursement this Period 20.32 <b>Transaction ID : SB17.20895</b>
City ARLINGTON State VA Zip Code 22007	Purpose of Disbursement Indirect Expenses:Bank Charges	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	55.32
<b>TOTAL</b> 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 87	
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. FIRST VIRGINIA COMMUNITY BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 1900 N CULPEPER STREET		Amount of Each Disbursement this Period 286.42 <b>Transaction ID : SB17.20896</b>
City ARLINGTON State VA Zip Code 22007	Purpose of Disbursement Indirect Expenses:Bank Charges	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. FIRST VIRGINIA COMMUNITY BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 1900 N CULPEPER STREET		Amount of Each Disbursement this Period 20.00 <b>Transaction ID : SB17.20897</b>
City ARLINGTON State VA Zip Code 22007	Purpose of Disbursement Indirect Expenses:Bank Charges	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. FIRST VIRGINIA COMMUNITY BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address 1900 N CULPEPER STREET		Amount of Each Disbursement this Period 160.42 <b>Transaction ID : SB17.20898</b>
City ARLINGTON State VA Zip Code 22007	Purpose of Disbursement Indirect Expenses:Bank Charges	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	286.42
<b>TOTAL</b> 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 73 OF 87	
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. FIRST VIRGINIA COMMUNITY BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2012
Mailing Address 1900 N CULPEPER STREET		Amount of Each Disbursement this Period 48.50
City ARLINGTON	State VA Zip Code 22007	
Purpose of Disbursement Indirect Expenses:Bank Charges		<b>Transaction ID : SB17.20899</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) <b>B. FIRST VIRGINIA COMMUNITY BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2012
Mailing Address 1900 N CULPEPER STREET		Amount of Each Disbursement this Period 50.00
City ARLINGTON	State VA Zip Code 22007	
Purpose of Disbursement Indirect Expenses:Bank Charges		<b>Transaction ID : SB17.20900</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) <b>C. FIRST VIRGINIA COMMUNITY BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2012
Mailing Address 1900 N CULPEPER STREET		Amount of Each Disbursement this Period 50.00
City ARLINGTON	State VA Zip Code 22007	
Purpose of Disbursement Indirect Expenses:Bank Charges		<b>Transaction ID : SB17.20901</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	148.50
<b>TOTAL</b> 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 87			
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. FIRST VIRGINIA COMMUNITY BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2012		
Mailing Address 1900 N CULPEPER STREET			Amount of Each Disbursement this Period 35.00		
City ARLINGTON	State VA	Zip Code 22007	Transaction ID : SB17.20902		
Purpose of Disbursement Indirect Expenses:Bank Charges		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. FIRST VIRGINIA COMMUNITY BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012		
Mailing Address 1900 N CULPEPER STREET			Amount of Each Disbursement this Period 38.83		
City ARLINGTON	State VA	Zip Code 22007	Transaction ID : SB17.20903		
Purpose of Disbursement Indirect Expenses:Bank Charges		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. FIRST VIRGINIA COMMUNITY BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012		
Mailing Address 1900 N CULPEPER STREET			Amount of Each Disbursement this Period 158.58		
City ARLINGTON	State VA	Zip Code 22007	Transaction ID : SB17.20904		
Purpose of Disbursement Indirect Expenses:Bank Charges		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	232.41
<b>TOTAL</b> 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 87			
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. FIRST VIRGINIA COMMUNITY BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 1900 N CULPEPER STREET		Amount of Each Disbursement this Period 251.26 <b>Transaction ID : SB17.20905</b>
City ARLINGTON State VA Zip Code 22007	Purpose of Disbursement Indirect Expenses:Bank Charges	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. FIRST VIRGINIA COMMUNITY BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2012
Mailing Address 1900 N CULPEPER STREET		Amount of Each Disbursement this Period 63.75 <b>Transaction ID : SB17.20906</b>
City ARLINGTON State VA Zip Code 22007	Purpose of Disbursement Indirect Expenses:Bank Charges	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. FIRST VIRGINIA COMMUNITY BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2012
Mailing Address 1900 N CULPEPER STREET		Amount of Each Disbursement this Period 53.00 <b>Transaction ID : SB17.20907</b>
City ARLINGTON State VA Zip Code 22007	Purpose of Disbursement Indirect Expenses:Bank Charges	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	368.01
<b>TOTAL</b> 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 76 OF 87			
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. FIRST VIRGINIA COMMUNITY BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2012
Mailing Address 1900 N CULPEPER STREET		Amount of Each Disbursement this Period 20.00
City ARLINGTON State VA Zip Code 22007	Purpose of Disbursement Indirect Expenses:Bank Charges	
Candidate Name		Transaction ID : SB17.20908
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <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>B. FIRST VIRGINIA COMMUNITY BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2012
Mailing Address 1900 N CULPEPER STREET		Amount of Each Disbursement this Period 10.00
City ARLINGTON State VA Zip Code 22007	Purpose of Disbursement Indirect Expenses:Bank Charges	
Candidate Name		Transaction ID : SB17.20909
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <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>C. FIRST VIRGINIA COMMUNITY BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2012
Mailing Address 1900 N CULPEPER STREET		Amount of Each Disbursement this Period 106.42
City ARLINGTON State VA Zip Code 22007	Purpose of Disbursement Indirect Expenses:Bank Charges	
Candidate Name		Transaction ID : SB17.20910
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	136.42
<b>TOTAL</b> 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 87			
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
**A. GRAPHICS INNOVATIONS**

Mailing Address PO BOX 28930

City Richmond State VA Zip Code 23228

Purpose of Disbursement Direct Mail Printing & Mailshop

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 03 / 2012

Amount of Each Disbursement this Period: 7657.63

Transaction ID : SB17.20911

Full Name (Last, First, Middle Initial)  
**B. GRAPHICS INNOVATIONS**

Mailing Address PO BOX 28930

City Richmond State VA Zip Code 23228

Purpose of Disbursement Direct Mail Printing & Mailshop

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 31 / 2012

Amount of Each Disbursement this Period: 1038.67

Transaction ID : SB17.20912

Full Name (Last, First, Middle Initial)  
**c. Halsey & Griffith**

Mailing Address 11000 Park Centre Bldg #128

City Miami Gardens State FL Zip Code 33169

Purpose of Disbursement Office Equipment Maintenance

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 03 / 2012

Amount of Each Disbursement this Period: 112.20

Transaction ID : SB17.20693

**SUBTOTAL** of Disbursements This Page (optional)..... 8808.50

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 87			
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Halsey &amp; Griffith</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 11000 Park Centre Bldg #128		Amount of Each Disbursement this Period 168.30
City Miami Gardens State FL Zip Code 33169	Category/Type	
Purpose of Disbursement Office Equipment Maintenance		Transaction ID : SB17.20745
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. LEGACY LISTS, INC. - BROKERAGE</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2012
Mailing Address 1155 - 15TH STREET, NW SUITE 410		Amount of Each Disbursement this Period 535.00
City WASHINGTON State DC Zip Code 20005	Category/Type	
Purpose of Disbursement Direct Mail :List Rental Expense		Transaction ID : SB17.20914
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. LEGACY LISTS, INC. - BROKERAGE</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2012
Mailing Address 1155 - 15TH STREET, NW SUITE 410		Amount of Each Disbursement this Period 1710.51
City WASHINGTON State DC Zip Code 20005	Category/Type	
Purpose of Disbursement Direct Mail :List Rental Expense		Transaction ID : SB17.20915
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2413.81
<b>TOTAL</b> 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 87			
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. LEGACY LISTS, INC. - MANAGEMENT</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2012	
Mailing Address 1155 - 15TH STREET, NW SUITE 410			Amount of Each Disbursement this Period 3252.80	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SB17.20917	
Purpose of Disbursement Direct Mail :List Rental Expense		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. LEGACY LISTS, INC. - MANAGEMENT</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012	
Mailing Address 1155 - 15TH STREET, NW SUITE 410			Amount of Each Disbursement this Period 2114.03	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SB17.20918	
Purpose of Disbursement Direct Mail :List Rental Expense		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>c. Grant Liebel</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012	
Mailing Address 9970 Aloma Bend Lane			Amount of Each Disbursement this Period 800.00	
City Orlando	State FL	Zip Code 32765	Transaction ID : SB17.20763	
Purpose of Disbursement Campaign Field Director		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6166.83
<b>TOTAL</b> 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 87	
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Grant Liebel</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address 9970 Aloma Bend Lane		Amount of Each Disbursement this Period 954.00 <b>Transaction ID : SB17.20764</b>
City Orlando	State FL	
Zip Code 32765	Purpose of Disbursement Campaign Field Director	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Print with Budget</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2012
Mailing Address 4152 W Blue Heron Blvd		Amount of Each Disbursement this Period 323.00 <b>Transaction ID : SB17.20740</b>
City Riviera Beach	State FL	
Zip Code 33404	Purpose of Disbursement Printing Event Invitations	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. RENAISSANCE 9671 DC WASHINGTON DC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2012
Mailing Address 999inth St NW		Amount of Each Disbursement this Period 375.57 <b>Transaction ID : SB17.20797</b>
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Campaign Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1652.57
<b>TOTAL</b> 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 87			
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. RENAISSANCE 9671 DC WASHINGTON DC</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2012
Mailing Address 999inth St NW			Amount of Each Disbursement this Period 405.57 <b>Transaction ID : SB17.20798</b>
City Washington	State DC	Zip Code 20001	
Purpose of Disbursement Campaign Travel	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. SIMPKINS ESCROW LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address 29243 St Just Dr			Amount of Each Disbursement this Period 402.49 <b>Transaction ID : SB17.20920</b>
City UNIONVILLE	State VA	Zip Code 22567	
Purpose of Disbursement Indirect Expenses:Caging & Escrow	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Transmedia Public Relations</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2012
Mailing Address 240 W Palmetto Park Rd,			Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : SB17.20846</b>
City Boca Raton	State FL	Zip Code 33432	
Purpose of Disbursement Advertising	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5808.06
<b>TOTAL</b> 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 87			
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Transmedia Public Relations</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2012
Mailing Address 240 W Palmetto Park Rd,		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : SB17.20847</b>
City Boca Raton	State FL	
Zip Code 33432	Purpose of Disbursement Advertising	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. TROPHIES BY EDCO</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address 5434 Johnson Street		Amount of Each Disbursement this Period 709.44 <b>Transaction ID : SB17.20848</b>
City Hollywood	State FL	
Zip Code 33021	Purpose of Disbursement Advertising	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. USAIRWAYS</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2012
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 188.40 <b>Transaction ID : SB17.20852</b>
City Phoenix	State AZ	
Zip Code 85034	Purpose of Disbursement Airline Tickets	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5897.84
<b>TOTAL</b> 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 87	
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. USAIRWAYS</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2012
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 873.40 <b>Transaction ID : SB17.20853</b>
City Phoenix	State AZ Zip Code 85034	
Purpose of Disbursement Airline Tickets	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. USAIRWAYS</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2012
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 25.00 <b>Transaction ID : SB17.20850</b>
City Phoenix	State AZ Zip Code 85034	
Purpose of Disbursement Airline Tickets	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. USPS Postage Tamarac</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 7875 NW 57th St		Amount of Each Disbursement this Period 660.00 <b>Transaction ID : SB17.20686</b>
City Tamarac	State FL Zip Code 33351	
Purpose of Disbursement USPS Postage	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	873.40
<b>TOTAL</b> 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 87		
	<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)  
**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. USPS Postage Tamarac</b>		Date of Disbursement
Mailing Address 7875 NW 57th St		M M / D D / Y Y Y Y 05 / 31 / 2012
City Tamarac	State FL	Zip Code 33351
Purpose of Disbursement USPS Postage	Candidate Name	Amount of Each Disbursement this Period 130.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : SB17.20687

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	130.00
<b>TOTAL</b> This Period (last page this line number only).....	144896.14

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

NAME OF COMMITTEE (In Full) **JOE KAUFMAN FOR CONGRESS** Transaction ID : **SC/10.5512**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **JOE KAUFMAN** *[PERSONAL FUNDS]* Election: 2012  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
 2645 EXECUTIVE PARK DRIVE  
 STE 512

City	State	ZIP Code
WESTON	FL	33331

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3248.21	0.00	3248.21

**TERMS** Date Incurred: M 07 / D 01 / Y 2011 Date Due: M M / D D / Y Upon Demand Interest Rate: 0.00 % (apr) Secured:  Yes  No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	3248.21
<b>TOTALS</b> 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/10.9126**  
**JOE KAUFMAN FOR CONGRESS**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>JOE KAUFMAN</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 2645 EXECUTIVE PARK DRIVE STE 512		

City	State	ZIP Code
WESTON	FL	33331

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 12 / D 31 / Y 2011	M / D / Upon Demand	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width:150px" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width:150px" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width:150px" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width:150px" type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....	5000.00
<b>TOTALS</b> This Period (last page in this line only).....	<input style="width:150px" type="text"/>
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) **Transaction ID : SC/10.20680**  
**JOE KAUFMAN FOR CONGRESS**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>JOE KAUFMAN</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 2645 EXECUTIVE PARK DRIVE STE 512		

City	State	ZIP Code
WESTON	FL	33331

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

<b>TERMS</b>		Date Incurred	Date Due	Interest Rate	Secured:
M 06	D 20	Y 2012 Y	M / D / Y Upon Demand	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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	5000.00
<b>TOTALS</b> This Period (last page in this line only).....	13248.21

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