

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 Bircher for Congress

ADDRESS (number and street) 11125 Park Blvd., #104-173 Check if different than previously reported. (ACC) Seminole FL 33772

2. FEC IDENTIFICATION NUMBER C C00552570 3. IS THIS REPORT NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT FL 13

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 01 / 14 / 2014 in the State of FL (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on / / in the State of

5. Covering Period 10 / 01 / 2013 through 12 / 25 / 2013

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 Michael Millner

Signature of Treasurer Michael Millner [Electronically Filed] Date 01 / 02 / 2014

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Bircher 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))....	35443.92	35443.92
(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)).....	35443.92	35443.92
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	46425.41	46425.41
(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)).....	46425.41	46425.41
8. Cash on Hand at Close of Reporting Period (from Line 27).....	12018.51	
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).....	23000.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Bircher for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	10050.00	10050.00
(ii) Unitemized .....	4393.92	4393.92
(iii) TOTAL of contributions from individuals .....	14443.92	14443.92
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate .....	21000.00	21000.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	35443.92	35443.92
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	23000.00	23000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	23000.00	23000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....</b>	58443.92	58443.92

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	46425.41	46425.41
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) ▶	46425.41	46425.41

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	58443.92
25. SUBTOTAL (add Line 23 and Line 24).....	58443.92
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	46425.41
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	12018.51

**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 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Bircher for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lisa Bircher**

Mailing Address 1819 Sycamore Valley Dr.  
Apr. 204

City Reston State VA Zip Code 20190

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

Name of Employer Lenkersdorfer Fine Jewelers Occupation Sales Associate

Receipt For: 2014  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 03 / 2013

**Transaction ID : SA11AI.4120**

Amount of Each Receipt this Period  
250.00  
Contribution

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

Mailing Address 2381 Lansing Dr.

City Pensacola State FL Zip Code 32504

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

Name of Employer Self Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 11 / 2013

**Transaction ID : SA11AI.4139**

Amount of Each Receipt this Period  
250.00  
Contribution

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

Mailing Address 1507 Stargaze St.

City San Marcos State CA Zip Code 92078

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

Name of Employer Johnson Capital Occupation Finance

Receipt For: 2014  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 02 / 2013

**Transaction ID : SA11AI.4102**

Amount of Each Receipt this Period  
1000.00  
Contribution

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Bircher for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cliff Carnes</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 19 / 2013	
Mailing Address 1507 Stargaze St.		<b>Transaction ID : SA11AI.4242</b>	
City San Marcos	State CA	Zip Code 92078	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Contribution 500.00	
Name of Employer Johnson Capital	Occupation Finance		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	Election Cycle-to-Date Contribution 1500.00		

Full Name (Last, First, Middle Initial) <b>B. Wayne Chambless</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 24 / 2013	
Mailing Address 53 Hegemans Lane		<b>Transaction ID : SA11AI.4268</b>	
City Old Brookville	State NY	Zip Code 11545	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Contribution 250.00	
Name of Employer Chambless Management, LLC	Occupation Investor		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	Election Cycle-to-Date Contribution 250.00		

Full Name (Last, First, Middle Initial) <b>C. Al Cisneros</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 22 / 2013	
Mailing Address 1215 N Shore		<b>Transaction ID : SA11AI.4258</b>	
City Kemah	State TX	Zip Code 77565	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Contribution 250.00	
Name of Employer Dyno Oil Co., LLC	Occupation CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	Election Cycle-to-Date Contribution 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	Contribution 1000.00
<b>TOTAL</b> This Period (last page this line number only).....	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 7 OF 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Bircher for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas Cuba**

Mailing Address 3760 1st Ave N

City State Zip Code  
St. Petersburg FL 33713

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

Name of Employer Occupation  
Delta Seven Inc. Consulting Ecologist

Receipt For: 2014  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 12 / 2013

**Transaction ID : SA11AI.4149**

Amount of Each Receipt this Period  
400.00

Contribution

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

Mailing Address 1179 La Tortuga Dr.

City State Zip Code  
Vista CA 92081

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

Name of Employer Occupation  
Lytix, Inc. Business Manager

Receipt For: 2014  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 18 / 2013

**Transaction ID : SA11AI.4172**

Amount of Each Receipt this Period  
250.00

Contribution

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

Mailing Address 1600 Gulf Port Blvd.  
#811

City State Zip Code  
Clearwater Beach FL 33767

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

Name of Employer Occupation  
Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 16 / 2013

**Transaction ID : SA11AI.4292**

Amount of Each Receipt this Period  
500.00

Contribution

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

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

1150.00

**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 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Bircher for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Andrew Hunsicker**

Mailing Address 12073 101st Ave.

City Seminole State FL Zip Code 33772

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

Name of Employer Self Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : SA11AI.4247**

Amount of Each Receipt this Period  
 Contribution 500.00

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

Mailing Address 151 Countri Lane

City Cantonment State FL Zip Code 32533

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

Name of Employer Lee Mechanical & Plumbing Occupation Secretary/Treasurer

Receipt For: 2014  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 12 / 2013

**Transaction ID : SA11AI.4147**

Amount of Each Receipt this Period  
 Contribution 1000.00

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

Mailing Address 5694 Oakhurst Dr.

City Seminole State FL Zip Code 33772

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

Name of Employer Self Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 25 / 2013

**Transaction ID : SA11AI.4272**

Amount of Each Receipt this Period  
 Contribution 250.00

**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 9 OF 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Bircher for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dana McCleelan**

Mailing Address 407 Jefferson Dr.

City State Zip Code  
Charlotte NC 28270

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

Name of Employer Occupation  
TD Bank, NA Chief of Staff

Receipt For: 2014  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 16 / 2013

**Transaction ID : SA11AI.4167**

Amount of Each Receipt this Period  
250.00  
Contribution

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

Mailing Address 540 4th Street N

City State Zip Code  
St. Petersburg FL 33701

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

Name of Employer Occupation  
Self Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 24 / 2013

**Transaction ID : SA11AI.4266**

Amount of Each Receipt this Period  
250.00  
Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Grady L. Peeler Jr.**

Mailing Address 1823 Kinsmere Dr.

City State Zip Code  
Trinity FL 34655

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

Name of Employer Occupation  
Self CPA

Receipt For: 2014  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 08 / 2013

**Transaction ID : SA11AI.4128**

Amount of Each Receipt this Period  
250.00  
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 10 OF 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Bircher for Congress**

Full Name (Last, First, Middle Initial) <b>A. Joseph Ring</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 19 / 2013	
Mailing Address 1035 E. Thornwood Dr.		<b>Transaction ID : SA11AI.4238</b>	
City State Zip Code Globe AZ 85501	Amount of Each Receipt this Period Contribution 500.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Red Rock Healthcare, LLC Physician		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>B. Carol Sjolund</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013	
Mailing Address 6202 Fairway Bay Blvd. S		<b>Transaction ID : SA11AI.4298</b>	
City State Zip Code Gulfport FL 33707	Amount of Each Receipt this Period Contribution 500.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>C. Angelo Spoto</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 13 / 2013	
Mailing Address 2515 Hollingsworth Hill		<b>Transaction ID : SA11AI.4290</b>	
City State Zip Code Lakeland FL 33303	Amount of Each Receipt this Period Contribution 250.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Bircher for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dan Tucker**

Mailing Address 11433 69th Ave. N

City Seminole State FL Zip Code 33772

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

Name of Employer Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 17 / 2013

**Transaction ID : SA11AI.4276**

Amount of Each Receipt this Period  
 400.00

In-kind - Campaign Signs

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

Mailing Address 7230 128th St.

City Seminole State FL Zip Code 33776

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

Name of Employer Occupation Attorney

City of St. Petersburg

Receipt For: 2014  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2013

**Transaction ID : SA11AI.4126**

Amount of Each Receipt this Period  
 500.00

Contribution

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

Mailing Address 1890 Hill Chase

City Alpharetta State GA Zip Code 30022

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

Name of Employer Occupation Pilot

Delta Airlines

Receipt For: 2014  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 09 / 2013

**Transaction ID : SA11AI.4131**

Amount of Each Receipt this Period  
 1000.00

Contribution

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

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

1900.00

**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 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Bircher for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bradley Werrell**

Mailing Address 8720 S. Sharps Rd.

City State Zip Code  
Globe AZ 85501

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

Name of Employer Occupation  
Self Physician

Receipt For: 2014  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 20 / 2013

**Transaction ID : SA11AI.4256**

Amount of Each Receipt this Period  
Contribution 500.00

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

Mailing Address 905 W Riviera Dr.

City State Zip Code  
Santa Ana CA 92706-1527

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

Name of Employer Occupation  
Johnson Capital Mortgage Banker

Receipt For: 2014  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 10 / 2013

**Transaction ID : SA11AI.4137**

Amount of Each Receipt this Period  
Contribution 250.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period  
Contribution

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

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

750.00

10050.00

**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 20
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Bircher for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark William Bircher**

Mailing Address 11125 Park Blvd., #104-173

City Seminole State FL Zip Code 33772

FEC ID number of contributing federal political committee. **C H4FL13125**

Name of Employer Delta Airlines Occupation Pilot

Receipt For: 2014  
 Primary     General  
 Other (specify)    Special-Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 18 / 2013

**Transaction ID : SA11D.4286**

Amount of Each Receipt this Period  
 11000.00

Contribution from Candidate

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

Mailing Address 11125 Park Blvd., #104-173

City Seminole State FL Zip Code 33772

FEC ID number of contributing federal political committee. **C H4FL13125**

Name of Employer Delta Airlines Occupation Pilot

Receipt For: 2014  
 Primary     General  
 Other (specify)    Special-Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 26 / 2013

**Transaction ID : SA11D.4287**

Amount of Each Receipt this Period  
 10000.00

Contribution from Candidate

**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).....

21000.00

21000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 20
	<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	

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)  
**Bircher for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark William Bircher**

Mailing Address 11125 Park Blvd., #104-173

City Seminole State FL Zip Code 33772

FEC ID number of contributing federal political committee. **C H4FL13125**

Name of Employer Delta Airlines Occupation Pilot

Receipt For: 2014  
 Primary     General  
 Other (specify)    Special-Primary

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA13A.4284**

Amount of Each Receipt this Period

Loan from Candidate

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

Mailing Address 11125 Park Blvd., #104-173

City Seminole State FL Zip Code 33772

FEC ID number of contributing federal political committee. **C H4FL13125**

Name of Employer Delta Airlines Occupation Pilot

Receipt For: 2014  
 Primary     General  
 Other (specify)    Special-Primary

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA13A.4285**

Amount of Each Receipt this Period

Loan from Candidate

**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  
 /  /

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 20	
	<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)  
**Bircher for Congress**

Full Name (Last, First, Middle Initial) <b>A. David Millner Group, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 726 Hibiscus Lane		Amount of Each Disbursement this Period 10202.00 <b>Transaction ID : SB17.4308</b>
City Vero Beach	State FL	
Zip Code 32963	Purpose of Disbursement Media Buy	Category/ Type 004
Candidate Name <b>Bircher for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	State: FL District: 13	

Full Name (Last, First, Middle Initial) <b>B. David Millner Group, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address 726 Hibiscus Lane		Amount of Each Disbursement this Period 7500.00 <b>Transaction ID : SB17.4310</b>
City Vero Beach	State FL	
Zip Code 32963	Purpose of Disbursement Media Production	Category/ Type 004
Candidate Name <b>Bircher for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	State: FL District: 13	

Full Name (Last, First, Middle Initial) <b>c. David Millner Group, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address 726 Hibiscus Lane		Amount of Each Disbursement this Period 16950.00 <b>Transaction ID : SB17.4311</b>
City Vero Beach	State FL	
Zip Code 32963	Purpose of Disbursement Printing and Website Design	Category/ Type 003
Candidate Name <b>Bircher for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	State: FL District: 13	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	34652.00
<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 16 OF 20			
	<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)  
**Bircher for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 60.38 <b>Transaction ID : SB17.4322</b>
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Credit card service fees 003 Category/Type	
Candidate Name <b>Bircher for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 13	
Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary		

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 17.26 <b>Transaction ID : SB17.4323</b>
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Credit card service fees 003 Category/Type	
Candidate Name <b>Bircher for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 13	
Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary		

Full Name (Last, First, Middle Initial) <b>c. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 31.63 <b>Transaction ID : SB17.4324</b>
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Credit card service fees 003 Category/Type	
Candidate Name <b>Bircher for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 13	
Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	109.27
<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 17 OF 20			
	<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)  
**Bircher for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2013
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 96.32 <b>Transaction ID : SB17.4325</b>
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Credit card service fees 003 Category/Type	
Candidate Name <b>Bircher for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	
State: FL District: 13		

Full Name (Last, First, Middle Initial) <b>B. Political Accounting Group, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address 2055 NW Diamond Creek Way		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.4312</b>
City Jensen Beach State FL Zip Code 34957	Purpose of Disbursement Accounting Services 001 Category/Type	
Candidate Name <b>Bircher for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	
State: FL District: 13		

Full Name (Last, First, Middle Initial) <b>c. Secretary of State</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 500 South Bronough Street		Amount of Each Disbursement this Period 10440.00 <b>Transaction ID : SB17.4304</b>
City Tallahassee State FL Zip Code 32399	Purpose of Disbursement Qualifying Fee 001 Category/Type	
Candidate Name <b>Bircher for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	
State: FL District: 13		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11036.32
<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 18 OF 20			
	<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)  
**Bircher for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dan Tucker</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address 11433 69th Ave. N		Amount of Each Disbursement this Period 400.00
City Seminole State FL Zip Code 33772	Purpose of Disbursement In-kind - Campaign Signs	
Candidate Name	Category/Type	<b>Transaction ID : SB17.4278</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	46197.59

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

NAME OF COMMITTEE (In Full) **Bircher for Congress** Transaction ID : **SC/10.4284**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Mark William Bircher</b>	<b>[PERSONAL FUNDS]</b>	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 11125 Park Blvd., #104-173		

City	State	ZIP Code
Seminole	FL	33772

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
15000.00	0.00	15000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 12 / D 16 / Y 2013	M / D / Y On 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).....	▶	15000.00
<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**

NAME OF COMMITTEE (In Full) **Bircher for Congress** Transaction ID : **SC/10.4285**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Mark William Bircher</b>	<b>[PERSONAL FUNDS]</b>	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 11125 Park Blvd., #104-173		

City	State	ZIP Code
Seminole	FL	33772

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
8000.00	0.00	8000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 12 / D 18 / Y 2013	M / D / On 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).....	8000.00
<b>TOTALS</b> This Period (last page in this line only).....	23000.00

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