

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
MCGEE FOR CONGRESS

ADDRESS (number and street) C/O C EDWARD MCGEE JR
2850 N ANDRES AVE
 Check if different than previously reported. (ACC) FT LAUDERDALE FL 33311

2. **FEC IDENTIFICATION NUMBER** ▼ C C00553388 3. IS THIS REPORT NEW (N) **OR** AMENDED (A) CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT
FL 22

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 11 / 04 / 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 07 / 01 / 2014 through 08 / 06 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Andrea McGee
Signature of Treasurer Andrea McGee [Electronically Filed] Date 08 / 11 / 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
MCGEE 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))....	595.00	16412.83
(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)).....	595.00	16412.83
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	4619.13	9444.85
(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)).....	4619.13	9444.85
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1332.24	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	5942.70	

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

MCGEE FOR CONGRESS

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y 08 / 06 / 2014

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).....	0.00	11272.83
(ii) Unitemized.....	295.00	4840.00
(iii) TOTAL of contributions from individuals ▶	295.00	16112.83
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	300.00	300.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	595.00	16412.83
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	4157.13	5376.44
(b) All Other Loans.....	0.00	196.31
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	4157.13	5572.75
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)..... ▶	4752.13	21985.58

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	4619.13	9444.85
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	572.18
(b) Of All Other Loans	0.00	196.31
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	768.49
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	10440.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	4619.13	20653.34

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1199.24
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	4752.13
25. SUBTOTAL (add Line 23 and Line 24).....	5951.37
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	4619.13
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1332.24

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 19
	<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)
MCGEE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Andrea McGee

Mailing Address 961 NE 27th Ave

City Pompano Beach State FL Zip Code 33062

FEC ID number of contributing federal political committee. **C H4FL22086**

Name of Employer DeBianchi Real Estate Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.44

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 22 / 2014

Transaction ID : SA11D.4370

Amount of Each Receipt this Period
300.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

300.00

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 6 OF 19
	<input type="checkbox"/> 11a 12 <input checked="" 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)
MCGEE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Andrea McGee

Mailing Address 961 NE 27th Ave

City Pompano Beach State FL Zip Code 33062

FEC ID number of contributing federal political committee. **C H4FL22086**

Name of Employer DeBianchi Real Estate Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2014

Transaction ID : SA13A.4371

Amount of Each Receipt this Period
 6.36

B. Full Name (Last, First, Middle Initial)
Andrea McGee

Mailing Address 961 NE 27th Ave

City Pompano Beach State FL Zip Code 33062

FEC ID number of contributing federal political committee. **C H4FL22086**

Name of Employer DeBianchi Real Estate Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2014

Transaction ID : SA13A.4387

Amount of Each Receipt this Period
 60.42
 Sears

C. Full Name (Last, First, Middle Initial)
Andrea McGee

Mailing Address 961 NE 27th Ave

City Pompano Beach State FL Zip Code 33062

FEC ID number of contributing federal political committee. **C H4FL22086**

Name of Employer DeBianchi Real Estate Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 02 / 2014

Transaction ID : SA13A.4388

Amount of Each Receipt this Period
 65.56
 Party City

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

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

132.34

**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 19
	<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)
MCGEE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Andrea McGee

Mailing Address 961 NE 27th Ave

City Pompano Beach State FL Zip Code 33062

FEC ID number of contributing federal political committee. **C H4FL22086**

Name of Employer DeBianchi Real Estate Occupation Realtor

Receipt For: 2015
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 200.44

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 15 / 2014

Transaction ID : SA13A.4385

Amount of Each Receipt this Period
 _____ 68.10

B. Full Name (Last, First, Middle Initial)
Andrea McGee

Mailing Address 961 NE 27th Ave

City Pompano Beach State FL Zip Code 33062

FEC ID number of contributing federal political committee. **C H4FL22086**

Name of Employer DeBianchi Real Estate Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 4399.39

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 22 / 2014

Transaction ID : SA13A.4390

Amount of Each Receipt this Period
 _____ 3898.95

MasterMailer

C. Full Name (Last, First, Middle Initial)
Andrea McGee

Mailing Address 961 NE 27th Ave

City Pompano Beach State FL Zip Code 33062

FEC ID number of contributing federal political committee. **C H4FL22086**

Name of Employer DeBianchi Real Estate Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 4412.10

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 27 / 2014

Transaction ID : SA13A.4386

Amount of Each Receipt this Period
 _____ 12.71

FedEx

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

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

_____ 3979.76

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

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

(check only one)

<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)
MCGEE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Andrea McGee		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 06 / 2014
Mailing Address 961 NE 27th Ave		Transaction ID : SA13A.4389
City Pompano Beach	State FL	
FEC ID number of contributing federal political committee. C H4FL22086		Amount of Each Receipt this Period 45.03
Name of Employer DeBianchi Real Estate	Occupation Realtor	Marshalls
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4457.13	

Full Name (Last, First, Middle Initial) B.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	45.03
TOTAL This Period (last page this line number only).....	4157.13

**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 9 OF 19	
	<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)
MCGEE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MasterMailer		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 3700 N 29th Ave		Amount of Each Disbursement this Period 3898.95 Transaction ID : SB17.4383
City Hollywood	State FL	
Zip Code 33020	Purpose of Disbursement	Category/ Type 004
Candidate Name MCGEE FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL	District: 22	

Full Name (Last, First, Middle Initial) B. Sandview Inc.		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 1700 E Commercial Blvd.		Amount of Each Disbursement this Period 190.00 Transaction ID : SB17.4365
City Fort Lauderdale	State FL	
Zip Code 33334	Purpose of Disbursement Marketing	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C.		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	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	4088.95
TOTAL This Period (last page this line number only).....	4088.95

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4371**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) Andrea McGee	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 961 NE 27th Ave	

City	State	ZIP Code
Pompano Beach	FL	33062

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
6.36	0.00	6.36

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
07 / 01 / 2014	11/5/2014	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....	6.36
TOTALS This Period (last page in this line only).....	[]
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4387**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) Andrea McGee	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 961 NE 27th Ave	

City	State	ZIP Code
Pompano Beach	FL	33062

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
60.42	0.00	60.42

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 07 / D 01 / Y 2014	M / D / Y 11/5/2014	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....	▶	60.42
TOTALS This Period (last page in this line only).....	▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4388**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) Andrea McGee	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 961 NE 27th Ave	

City	State	ZIP Code
Pompano Beach	FL	33062

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
65.56	0.00	65.56

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
07 / 02 / 2014	11/5/2014	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....	▶	65.56
TOTALS This Period (last page in this line only).....	▶	[]
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.		

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4385**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) Andrea McGee	Election: 2015 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 961 NE 27th Ave	

City	State	ZIP Code
Pompano Beach	FL	33062

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
68.10	0.00	68.10

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
07 / 15 / 2014	11/5/2014	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....	▶	68.10
TOTALS This Period (last page in this line only).....	▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4390

MCGEE FOR CONGRESS

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

Andrea McGee

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
961 NE 27th Ave

City State ZIP Code
Pompano Beach FL 33062

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
3898.95 0.00 3898.95

TERMS

Date Incurred Date Due Interest Rate Secured:
07 / 22 / 2014 M M / D D / 11/5/2014 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... 3898.95
TOTALS This Period (last page in this line only).....

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4386**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) Andrea McGee	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 961 NE 27th Ave	

City	State	ZIP Code
Pompano Beach	FL	33062

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
12.71	0.00	12.71

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
07 / 27 / 2014	11/5/2014	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....	▶	12.71
TOTALS This Period (last page in this line only).....	▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4389**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) Andrea McGee	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 961 NE 27th Ave	

City	State	ZIP Code
Pompano Beach	FL	33062

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
45.03	0.00	45.03

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
08 / 06 / 2014	11/5/2014	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....	▶	45.03
TOTALS This Period (last page in this line only).....	▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4315**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2014
ANDREA LEIGH Leigh MCGEE
 Primary
 General
 Other (specify) ▼

Mailing Address
 961 NE 27TH AVENUE

City State ZIP Code
 POMPAN BEACH FL 33062

Original Amount of Loan 446.24	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 446.24
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TERMS

Date Incurred M 02 / D 17 / Y 2014	Date Due M M / D D / Y 11/4/14	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

SUBTOTALS This Period This Page (optional).....	▶	446.24
TOTALS This Period (last page in this line only).....	▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4206**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2014
ANDREA LEIGH Leigh MCGEE Primary
Mailing Address 961 NE 27TH AVENUE General
 Other (specify) ▼

City State ZIP Code
POMPANO BEACH FL 33062

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
200.89	0.00	200.89

TERMS Date Incurred Date Due Interest Rate Secured:
M 04 / D 15 / Y 2014 M M / D D / Y 11/4/14 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional).....	▶	200.89
TOTALS This Period (last page in this line only).....	▶	4804.26

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

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

NAME OF COMMITTEE (In Full)

MCGEE FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Trademark Graphics		Nature of Debt (Purpose): MasterMailer
Mailing Address 2030 NW 93 Avenue		
City	State	Zip Code
Pembroke Pines	FL	33024

Outstanding Balance Beginning This Period	Transaction ID : SD10.4392	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="979.44"/>	<input type="text" value="0.00"/>	<input type="text" value="979.44"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Trademark Graphics		Nature of Debt (Purpose): Envelopes
Mailing Address 2030 NW 93 Avenue		
City	State	Zip Code
Pembroke Pines	FL	33024

Outstanding Balance Beginning This Period	Transaction ID : SD10.4394	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="159.00"/>	<input type="text" value="0.00"/>	<input type="text" value="159.00"/>

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

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

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="1138.44"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="1138.44"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="4804.26"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="5942.70"/>