

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

Jason Smith for Congress

ADDRESS (number and street)

PO Box 1324

Check if different than previously reported. (ACC)

Cape Girardeau

MO

63702-1324

2. FEC IDENTIFICATION NUMBER ▼

C C00541862

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

MO

08

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

through

M M /

D D /

Y Y Y Y

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 Reg Swan

Signature of Treasurer Reg Swan

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Jason Smith 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))....	223363.03	750516.23
(b) Total Contribution Refunds (from Line 20(d))	1	5001
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	223362.03	745515.23
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	126454.2	593681.14
(b) Total Offsets to Operating Expenditures (from Line 14).....	529.81	529.81
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	125924.39	593151.33
8. Cash on Hand at Close of Reporting Period (from Line 27).....	218984.79	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0	

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

Jason Smith for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2014 To: M M / D D / Y Y Y Y 06 / 30 / 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).....	134545	364105
(ii) Unitemized	13068.03	16698.03
(iii) TOTAL of contributions from individuals	147613.03	380803.03
(b) Political Party Committees.....	1750	2749
(c) Other Political Committees (such as PACs).....	74000	366964.2
(d) The Candidate	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	223363.03	750516.23
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	3840
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	3840
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	529.81	529.81
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.05	215.17
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	223892.89	755101.21

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	126454.2	593681.14
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	3840
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	3840
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0	5000
(b) Political Party Committees.....	1	1
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1	5001
21. OTHER DISBURSEMENTS	1200	8470
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	127655.2	610992.14

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	122747.1
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	223892.89
25. SUBTOTAL (add Line 23 and Line 24).....	346639.99
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	127655.2
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	218984.79

**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 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Jim Anderson

Mailing Address **PO Box 94**

City **Eminence** State **MO** Zip Code **65466-0094**

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

Name of Employer **Shady Lane Cabins & Motel** Occupation **Sole Propreiter**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 18 / 2014

Transaction ID : A-CF36819

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Jesse D Appleton

Mailing Address **300 New Jersey Avenue NW**
Floor 9

City **Washington** State **DC** Zip Code **20001-2030**

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

Name of Employer **Banner Public Affairs** Occupation **Partner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 19 / 2014

Transaction ID : A-CF36426

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
David O. Barbe

Mailing Address **120 W 16th Street**

City **Mountain Grove** State **MO** Zip Code **65711-1039**

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

Name of Employer **Mercy Clinic** Occupation **Physician**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 01 / 2014

Transaction ID : A-CF36463

Amount of Each Receipt this Period
1000

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 6 OF 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Carl B Barnes

Mailing Address 44 Ridgemoor Drive

City Saint Louis State MO Zip Code 63105-3038

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

Name of Employer Reed Lumber Co, LLC Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 06 / 2014

Transaction ID : A-CF36716

Amount of Each Receipt this Period
 1000

B. Full Name (Last, First, Middle Initial)
W. James Barnett Jr.

Mailing Address 740 Four Mile Road

City Cuba State MO Zip Code 65453-9364

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

Name of Employer People's Bank Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1750**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 07 / 2014

Transaction ID : A-CF36494

Amount of Each Receipt this Period
 1000

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

Mailing Address 740 Four Mile Road

City Cuba State MO Zip Code 65453-9364

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

Name of Employer People's Bank Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1750**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 11 / 2014

Transaction ID : A-CF36755

Amount of Each Receipt this Period
 250

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

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

2250.00

**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 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Julie A Bass

Mailing Address PO Box Bb

City State Zip Code
Steelville MO 65565-0700

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

Name of Employer Occupation
Indian Springs Resort Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750

Date of Receipt
M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF36672

Amount of Each Receipt this Period
500

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

Mailing Address 200 Ozark Outdoor Lane

City State Zip Code
Leasburg MO 65535-9139

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

Name of Employer Occupation
Ozark Outdoors Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF36705

Amount of Each Receipt this Period
500

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

Mailing Address 25397 State Highway 153

City State Zip Code
Holcomb MO 63852-9127

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

Name of Employer Occupation
Self-employed Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2250

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : A-CF36891

Amount of Each Receipt this Period
250

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
John R Beck

Mailing Address 800 Craig Forest Lane

City State Zip Code
Kirkwood MO 63122-5567

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

Name of Employer Occupation
Emmis Radio Senior Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
04 / 14 / 2014

Transaction ID : A-CF36415

Amount of Each Receipt this Period
250

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

Mailing Address 800 Craig Forest Lane

City State Zip Code
Kirkwood MO 63122-5567

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

Name of Employer Occupation
Emmis Radio Senior Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
06 / 06 / 2014

Transaction ID : A-CF36713

Amount of Each Receipt this Period
250

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

Mailing Address PO Box 919

City State Zip Code
Steelville MO 65565-0919

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

Name of Employer Occupation
Steelville Mfg Co. Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000

Date of Receipt
 M M / D D / Y Y Y Y
06 / 26 / 2014

Transaction ID : A-CF36878

Amount of Each Receipt this Period
600

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

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

1100.00

**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 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Dennis Bell

Mailing Address **PO Box 919**

City **Steelville** State **MO** Zip Code **65565-0919**

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

Name of Employer **Steelville Mfg Co.** Occupation **Manager**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 26 / 2014

Transaction ID : A-CF36959

Amount of Each Receipt this Period
400

B. Full Name (Last, First, Middle Initial)
William H Bess II

Mailing Address **944 ROYCE DRIVE**

City **JACKSON** State **MO** Zip Code **63755**

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

Name of Employer **BLUFF CITY BEER CO.** Occupation **WHOLESALER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 24 / 2014

Transaction ID : A-CF36867

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Gerald E. Black

Mailing Address **502 E 10th Street**

City **Salem** State **MO** Zip Code **65560-1121**

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

Name of Employer **Century 21** Occupation **Realtor**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 14 / 2014

Transaction ID : A-CF36411

Amount of Each Receipt this Period
100

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 10 OF 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Gerald E. Black

Mailing Address 502 E 10th Street

City Salem State MO Zip Code 65560-1121

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

Name of Employer Century 21 Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 05 / 2014

Transaction ID : A-CF36708

Amount of Each Receipt this Period
 200

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

Mailing Address PO Box 98

City Campbell State MO Zip Code 63933-0098

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

Name of Employer Self Employed Occupation Cotton Ginner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2250**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : A-CF36894

Amount of Each Receipt this Period
 250

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

Mailing Address PO Box 367

City Holcomb State MO Zip Code 63852-0367

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

Name of Employer NA Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : A-CF36896

Amount of Each Receipt this Period
 250

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 149
	<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)
Jason Smith for Congress

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

Mailing Address 710 Lake Street

City State Zip Code
Sikeston MO 63801-2165

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

Name of Employer Occupation
Self Employed Dentist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450

Date of Receipt
 M M / D D / Y Y Y Y
05 / 22 / 2014

Transaction ID : A-CF36559

Amount of Each Receipt this Period
150

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

Mailing Address PO Box 220

City State Zip Code
Ellington MO 63638-0220

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

Name of Employer Occupation
Brawley Farms Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
05 / 07 / 2014

Transaction ID : A-CF36493

Amount of Each Receipt this Period
500

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

Mailing Address 17101 County Road 8440

City State Zip Code
Rolla MO 65401-5721

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

Name of Employer Occupation
Brewer Science CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500

Date of Receipt
 M M / D D / Y Y Y Y
04 / 22 / 2014

Transaction ID : A-CF36429

Amount of Each Receipt this Period
1000

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

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

1650.00

**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 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Terry Brewer

Mailing Address 17101 County Road 8440

City Rolla State MO Zip Code 65401-5721

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

Name of Employer Brewer Science Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 27 / 2014

Transaction ID : A-CF36581

Amount of Each Receipt this Period
1600

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

Mailing Address 17101 County Road 8440

City Rolla State MO Zip Code 65401-5721

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

Name of Employer Brewer Science Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 27 / 2014

Transaction ID : A-CF36960

Amount of Each Receipt this Period
900

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

Mailing Address 809 W 3rd Street

City Dell Rapids State SD Zip Code 57022-1814

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

Name of Employer POET Energy Occupation Executive Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 28 / 2014

Transaction ID : A-CF36626

Amount of Each Receipt this Period
2600

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 13 OF 149
	<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)
Jason Smith for Congress

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

Mailing Address 18608 Maries Road 531

City Rolla State MO Zip Code 65401-6469

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

Name of Employer Self Employed Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 08 / 2014

Transaction ID : A-CF36501

Amount of Each Receipt this Period
1000

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

Mailing Address 459 Pcr 917

City Perryville State MO Zip Code 63775-8349

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

Name of Employer Self Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **345**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 29 / 2014

Transaction ID : A-CF36643

Amount of Each Receipt this Period
195

C. Full Name (Last, First, Middle Initial)
Tom R Burcham

Mailing Address 5103 Westmeyer Road

City Farmington State MO Zip Code 63640-7502

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

Name of Employer Burcham Law Firm Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 06 / 2014

Transaction ID : A-CF36734

Amount of Each Receipt this Period
350

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

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

1545.00

**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 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Joe T Burden

Mailing Address 1618 Sunset Terrace

City West Plains State MO Zip Code 65775-4124

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

Name of Employer West Plains Veterinary Clinic Occupation Veterinarian

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 27 / 2014

Transaction ID : A-CF36589

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Bret P Burgess

Mailing Address 6433 Highway F

City Farmington State MO Zip Code 63640-7340

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

Name of Employer Brugess Contractors Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 06 / 2014

Transaction ID : A-CF36726

Amount of Each Receipt this Period
250

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

Mailing Address 15695 S Highway 77

City East Prairie State MO Zip Code 63845-8734

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

Name of Employer Self Employed Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 13 / 2014

Transaction ID : A-CF36517

Amount of Each Receipt this Period
1000

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 15 OF 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Karen Cleve

Mailing Address 1385 Springbrook Park Drive

City Farmington State MO Zip Code 63640-1109

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

Name of Employer Botkin Lumber Co Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1100**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 27 / 2014

Transaction ID : A-CF36576

Amount of Each Receipt this Period
 1000

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

Mailing Address 2005 N Westwood Boulevard

City Poplar Bluff State MO Zip Code 63901-2809

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

Name of Employer Self Employed Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 09 / 2014

Transaction ID : A-CF36508

Amount of Each Receipt this Period
 1000

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

Mailing Address 29 Ponce Court

City Lake Saint Louis State MO Zip Code 63367-1611

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

Name of Employer National Rent to Own Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : A-CF36691

Amount of Each Receipt this Period
 500

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

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

2500.00

**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 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Ron Coleman

Mailing Address 1310 Riverwoods Trail

City State Zip Code
Sainte Genevieve MO 63670-2001

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

Name of Employer Occupation
Eric Scott President & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
06 / 27 / 2014

Transaction ID : A-CF36879

Amount of Each Receipt this Period
300

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

Mailing Address 7810 State Route Zz

City State Zip Code
West Plains MO 65775-6025

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

Name of Employer Occupation
Presiding Commissioner Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF36668

Amount of Each Receipt this Period
100

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

Mailing Address 823 Valley Brook Drive

City State Zip Code
Farmington MO 63640-1112

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

Name of Employer Occupation
Danco Pizza Inc Restaurant Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
05 / 27 / 2014

Transaction ID : A-CF36577

Amount of Each Receipt this Period
250

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 17 OF 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Charles Cozean

Mailing Address 639 Beechwood Lane

City State Zip Code
Cape Girardeau MO 63701-9020

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

Name of Employer Occupation
Self Employed Ophthalmologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1750

Date of Receipt
 M M / D D / Y Y Y Y
05 / 09 / 2014

Transaction ID : A-CF36507

Amount of Each Receipt this Period
250

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

Mailing Address 175 Lakeview Lane

City State Zip Code
Jackson MO 63755-6922

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

Name of Employer Occupation
CraderDistributing Exec

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200

Date of Receipt
 M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : A-CF36480

Amount of Each Receipt this Period
2200

C. Full Name (Last, First, Middle Initial)
Meredith M Craig

Mailing Address 1307 Iron Mountain Road

City State Zip Code
Salem MO 65560-2600

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

Name of Employer Occupation
NA Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250

Date of Receipt
 M M / D D / Y Y Y Y
05 / 08 / 2014

Transaction ID : A-CF36504

Amount of Each Receipt this Period
500

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

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

2950.00

**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 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
John Crouch

Mailing Address **PO Box 599**

City **Farmington** State **MO** Zip Code **63640-0599**

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

Name of Employer **Crouch, Farly & Heuring** Occupation **CPA**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 27 / 2014

Transaction ID : A-CF36575

Amount of Each Receipt this Period
500

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

Mailing Address **107 Mooreland Drive**

City **Caruthersville** State **MO** Zip Code **63830-2336**

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

Name of Employer **Legacy Equipment** Occupation **Ag Sales**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 22 / 2014

Transaction ID : A-CF36439

Amount of Each Receipt this Period
250

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

Mailing Address **106 Redbud Circle**

City **Portageville** State **MO** Zip Code **63873-1103**

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

Name of Employer **Legacy Equipment** Occupation **Management**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 13 / 2014

Transaction ID : A-CF36521

Amount of Each Receipt this Period
1000

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 19 OF 149
	<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)
Jason Smith for Congress

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

Mailing Address **PO Box 127**

City **Braggadocio** State **MO** Zip Code **63826-0127**

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

Name of Employer **Self Employed** Occupation **Farmer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : A-CF36888

Amount of Each Receipt this Period
250

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

Mailing Address **6048 Dalhousie**

City **Cape Girardeau** State **MO** Zip Code **63701-7406**

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

Name of Employer **Self Employed** Occupation **Ag Business**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 13 / 2014

Transaction ID : A-CF36961

Amount of Each Receipt this Period
2600

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

Mailing Address **6048 Dalhousie**

City **Cape Girardeau** State **MO** Zip Code **63701-7406**

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

Name of Employer **Self-employed** Occupation **Farmer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 13 / 2014

Transaction ID : A-CF36520

Amount of Each Receipt this Period
1600

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

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

4450.00

**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 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Mike Decola

Mailing Address 8110 Westmoreland Avenue

City Clayton State MO Zip Code 63105-3731

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

Name of Employer Mississippi Lime Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 13 / 2014

Transaction ID : A-CF36515

Amount of Each Receipt this Period
1000

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

Mailing Address 14225 County Road 612

City Hornersville State MO Zip Code 63855-9805

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

Name of Employer Droke Farms Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : A-CF36890

Amount of Each Receipt this Period
250

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

Mailing Address 15 Squires Lane

City Saint Louis State MO Zip Code 63131-4811

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

Name of Employer Self Employed Occupation Real Estate Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 17 / 2014

Transaction ID : A-CF36933

Amount of Each Receipt this Period
100

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 21 OF 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Timothy Drury

Mailing Address 15 Squires Lane

City Saint Louis State MO Zip Code 63131-4811

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

Name of Employer Self Employed Occupation Real Estate Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 17 / 2014

Transaction ID : A-CF36975

Amount of Each Receipt this Period
900

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

Mailing Address 307 Homecrest Street

City Kennett State MO Zip Code 63857-1507

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

Name of Employer Self-employed Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : A-CF36895

Amount of Each Receipt this Period
250

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

Mailing Address 1303 Jennifer Street

City Salem State MO Zip Code 65560-9600

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

Name of Employer Town and Country Bank Occupation Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 20 / 2014

Transaction ID : A-CF36836

Amount of Each Receipt this Period
2600

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

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

3750.00

**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 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Carl Eichenberger

Mailing Address 1303 Jennifer Street

City Salem State MO Zip Code 65560-9600

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

Name of Employer Town and Country Bank Occupation Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 20 / 2014

Transaction ID : A-CF36962

Amount of Each Receipt this Period
400

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

Mailing Address 120 Zieba Court

City Farmington State MO Zip Code 63640-7720

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

Name of Employer Edward Jones Occupation Financial Advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 06 / 2014

Transaction ID : A-CF36733

Amount of Each Receipt this Period
500

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

Mailing Address 423 Pine Street

City Caruthersville State MO Zip Code 63830-9227

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

Name of Employer Faulkner Auto Sales Occupation Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 22 / 2014

Transaction ID : A-CF36436

Amount of Each Receipt this Period
300

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 23 OF 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Floyd Ferrell

Mailing Address 12680 Cinnamon Court

City Rolla State MO Zip Code 65401-8702

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

Name of Employer Self Employed Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 23 / 2014

Transaction ID : A-CF36844

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Russell W Fish

Mailing Address RR 1 Box 204

City Puxico State MO Zip Code 63960-9605

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **240**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 11 / 2014

Transaction ID : A-CF36764

Amount of Each Receipt this Period
100

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

Mailing Address PO Box 955

City Farmington State MO Zip Code 63640-0955

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

Name of Employer Precision Eye Care Inc Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 06 / 2014

Transaction ID : A-CF36728

Amount of Each Receipt this Period
250

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 24 OF 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Donald J Fuchs

Mailing Address 525 Highway Dd

City State Zip Code
Cuba MO 65453-8004

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

Name of Employer Self Occupation DDS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 19 / 2014

Transaction ID : A-CF36827

Amount of Each Receipt this Period
100

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

Mailing Address 11754 County Road 8530

City State Zip Code
West Plains MO 65775-6788

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

Name of Employer Self Occupation Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 13 / 2014

Transaction ID : A-CF36514

Amount of Each Receipt this Period
2600

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

Mailing Address PO Box 748

City State Zip Code
Salem MO 65560-0748

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

Name of Employer Town and County Bank Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 02 / 2014

Transaction ID : A-CF36665

Amount of Each Receipt this Period
2600

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

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

5300.00

**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 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Stephen Green

Mailing Address 106 Wildhorse Road

City Farmington State MO Zip Code 63640-9775

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

Name of Employer New Era Bank Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 06 / 2014

Transaction ID : A-CF36727

Amount of Each Receipt this Period
500

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

Mailing Address 5938 N Highway 51

City Perryville State MO Zip Code 63775-8359

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

Name of Employer Self-employed Occupation Agri-Business

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2014

Transaction ID : A-CF36771

Amount of Each Receipt this Period
2000

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

Mailing Address 403 Hawthorne Avenue

City Saint Louis State MO Zip Code 63119-2513

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

Name of Employer Grossman Iron & Steel Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2014

Transaction ID : A-CF36695

Amount of Each Receipt this Period
1000

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

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

3500.00

**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 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Marla P Grossman

Mailing Address 7546 Hampden Lane

City State Zip Code
Bethesda MD 20814-1332

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

Name of Employer Occupation
American Continental Group Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
06 / 03 / 2014

Transaction ID : A-CF36685

Amount of Each Receipt this Period
1000

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

Mailing Address 300 W Washington Street

City State Zip Code
Kennett MO 63857-1942

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

Name of Employer Occupation
Self-employed Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2250

Date of Receipt
 M M / D D / Y Y Y Y
06 / 26 / 2014

Transaction ID : A-CF36930

Amount of Each Receipt this Period
250

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

Mailing Address PO Box 68

City State Zip Code
Gainesville MO 65655-0068

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

Name of Employer Occupation
Century Bank of the Ozarks President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1600

Date of Receipt
 M M / D D / Y Y Y Y
06 / 16 / 2014

Transaction ID : A-CF36802

Amount of Each Receipt this Period
600

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

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

1850.00

**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 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
John Harlin

Mailing Address **PO Box 68**

City **Gainesville** State **MO** Zip Code **65655-0068**

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

Name of Employer **Century Bank of the Ozarks** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 16 / 2014

Transaction ID : A-CF36801

Amount of Each Receipt this Period
600

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

Mailing Address **2201 Walton Drive Suite A**

City **Jackson** State **MO** Zip Code **63755-3711**

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

Name of Employer **RCH Development, INC.** Occupation **Real Estate Developer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 21 / 2014

Transaction ID : A-CF36548

Amount of Each Receipt this Period
500

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

Mailing Address **538 Oak Bluff Road**

City **Branson** State **MO** Zip Code **65616-9110**

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

Name of Employer **Herschend Family Entertainment** Occupation **Owner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 08 / 2014

Transaction ID : A-CF36503

Amount of Each Receipt this Period
1600

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

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

2700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Peter Herschend

Mailing Address 538 Oak Bluff Road

City Branson State MO Zip Code 65616-9110

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

Name of Employer Herschend Family Entertainment Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 08 / 2014

Transaction ID : A-CF36963

Amount of Each Receipt this Period
900

B. Full Name (Last, First, Middle Initial)
John W Hewkin

Mailing Address 1402 Highway Af

City Sullivan State MO Zip Code 63080-1159

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

Name of Employer Self-employed Occupation Pharmacist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 27 / 2014

Transaction ID : A-CF36880

Amount of Each Receipt this Period
250

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

Mailing Address 2514 Saddle Ridge Lane

City Cape Girardeau State MO Zip Code 63701-1503

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

Name of Employer Bluff City Beer Co. Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 30 / 2014

Transaction ID : A-CF36652

Amount of Each Receipt this Period
2000

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

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

3150.00

**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 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Bill Honeycutt

Mailing Address **PO Box 650**

City **Cabool** State **MO** Zip Code **65689-0650**

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

Name of Employer **Cabool Lease Inc.** Occupation **President**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1450**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 09 / 2014

Transaction ID : A-CF36506

Amount of Each Receipt this Period
1000

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

Mailing Address **2508 Madison 504**

City **Fredericktown** State **MO** Zip Code **63645-7742**

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

Name of Employer **Self Employed** Occupation **Business Owner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1200**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 14 / 2014

Transaction ID : A-CF36410

Amount of Each Receipt this Period
1200

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

Mailing Address **1911 Windsor Road**

City **Alexandria** State **VA** Zip Code **22301**

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

Name of Employer **American Continental Group** Occupation **Lobbyist**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF36690

Amount of Each Receipt this Period
1000

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

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

3200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 149
	<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)
Jason Smith for Congress

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

Mailing Address **PO BOX 248**

City **New Madrid** State **MO** Zip Code **63869**

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

Name of Employer **A. C. Riley Cotton Co. LLC** Occupation **Operation Manager**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 12 / 2014

Transaction ID : A-CF36769

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Mary Beth Kapp

Mailing Address **543 Deer Creek Road**

City **Cape Girardeau** State **MO** Zip Code **63701-9254**

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

Name of Employer **self** Occupation **Physician**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 28 / 2014

Transaction ID : A-CF36964

Amount of Each Receipt this Period
2600

C. Full Name (Last, First, Middle Initial)
Mary Beth Kapp

Mailing Address **543 Deer Creek Road**

City **Cape Girardeau** State **MO** Zip Code **63701-9254**

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

Name of Employer **self** Occupation **Physician**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 28 / 2014

Transaction ID : A-CF36965

Amount of Each Receipt this Period
2600

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

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

6200.00

**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 31 OF 149
	<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)
Jason Smith for Congress

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

Mailing Address 543 Deer Creek Road

City State Zip Code
Cape Girardeau MO 63701-9254

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

Name of Employer Occupation
Orthopedic Associates Surgeon

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200

Date of Receipt
 M M / D D / Y Y Y Y
04 / 28 / 2014

Transaction ID : A-CF36450

Amount of Each Receipt this Period
2600

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

Mailing Address PO Box 10

City State Zip Code
Norwood MO 65717-0010

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

Name of Employer Occupation
Self Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y
06 / 17 / 2014

Transaction ID : A-CF36810

Amount of Each Receipt this Period
2500

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

Mailing Address RR 2 Box 518

City State Zip Code
Norwood MO 65717-9456

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

Name of Employer Occupation
State of MO State Representative

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : A-CF36481

Amount of Each Receipt this Period
500

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

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

5600.00

**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 149
	<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)
Jason Smith for Congress

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

Mailing Address 773 River Hills Drive

City Fenton State MO Zip Code 63026

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

Name of Employer Madison County Wood Products Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 06 / 2014

Transaction ID : A-CF36715

Amount of Each Receipt this Period
250

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

Mailing Address 8 Woodbridge Manor Road

City Saint Louis State MO Zip Code 63141-8236

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 27 / 2014

Transaction ID : A-CF36614

Amount of Each Receipt this Period
200

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

Mailing Address HC 1 Box 800

City Fairdealing State MO Zip Code 63939-9739

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

Name of Employer Mid Continent Steel & Wire Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 27 / 2014

Transaction ID : A-CF36582

Amount of Each Receipt this Period
1000

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

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

1450.00

**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 149
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) Charolette M Lucas		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 28 / 2014
Mailing Address 3199 Harrison Way NW		Transaction ID : A-CF36451
City Corydon	State IN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer Lucas Oil Racing	Occupation Secretary	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200	

Full Name (Last, First, Middle Initial) Forrest Lucas		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 25 / 2014
Mailing Address 3199 Harrison Way NW		Transaction ID : A-CF36446
City Corydon	State IN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer Lucas Oil	Occupation Business Owner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200	

Full Name (Last, First, Middle Initial) Kevin P Mainord		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 09 / 2014
Mailing Address PO Box 123		Transaction ID : A-CF36505
City East Prairie	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Self/Mid-South Agri Services	Occupation Farmer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500	

SUBTOTAL of Receipts This Page (optional).....	6200.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 34 OF 149
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Patricia A Maledy

Mailing Address 1400 S Mildred Avenue

City Salem State MO Zip Code 65560-9663

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

Name of Employer NA Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF36674

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
W. Stephen Maritz

Mailing Address 10 Sunningdale Drive

City Saint Louis State MO Zip Code 63124-1624

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

Name of Employer Maritz Holdings Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF36694

Amount of Each Receipt this Period
500

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

Mailing Address 12110 State Route Cc

City Rolla State MO Zip Code 65401-5959

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

Name of Employer Mercy Occupation State of Missouri

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 16 / 2014

Transaction ID : A-CF36790

Amount of Each Receipt this Period
500

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

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

1100.00

**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 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Donald R Mason

Mailing Address **PO Box 383**

City **Jackson** State **MO** Zip Code **63755-0383**

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

Name of Employer **NA** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 29 / 2014

Transaction ID : A-CF36629

Amount of Each Receipt this Period
100

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

Mailing Address **PO Box 548**

City **Ellington** State **MO** Zip Code **63638-0548**

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

Name of Employer **Ellington Telephone Company** Occupation **General Manager**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 17 / 2014

Transaction ID : A-CF36811

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
James McDonnell III

Mailing Address **40 Glen Eagles Drive**

City **Saint Louis** State **MO** Zip Code **63124-1653**

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

Name of Employer **NA** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3600**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF36696

Amount of Each Receipt this Period
1000

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

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

1600.00

**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 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Leroy McGinnis

Mailing Address 5426 Highway 19

City Cuba State MO Zip Code 65453-7193

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

Name of Employer McGinnis Wood Products Occupation Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 16 / 2014

Transaction ID : A-CF36791

Amount of Each Receipt this Period
600

B. Full Name (Last, First, Middle Initial)
Ovia Marie McGinnis

Mailing Address 5426 Highway 19

City Cuba State MO Zip Code 65453-7193

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

Name of Employer McGinnis Wood Products Occupation Secretary

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1850**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 16 / 2014

Transaction ID : A-CF36966

Amount of Each Receipt this Period
400

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

Mailing Address 612 E Cleveland Street

City Hayti State MO Zip Code 63851-1267

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

Name of Employer First State Bank & Trust Co. Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : A-CF36938

Amount of Each Receipt this Period
500

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 37 OF 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Warren K Miller

Mailing Address 2169 State Highway Bb

City Millersville State MO Zip Code 63766-6143

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

Name of Employer Cape Radiology Occupation Radiologist/Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 16 / 2014

Transaction ID : A-CF36799

Amount of Each Receipt this Period
2600

B. Full Name (Last, First, Middle Initial)
Warren K Miller

Mailing Address 2169 State Highway Bb

City Millersville State MO Zip Code 63766-6143

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

Name of Employer Cape Radiology Occupation Radiologist/Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 16 / 2014

Transaction ID : A-CF36967

Amount of Each Receipt this Period
2400

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

Mailing Address PO Box 595

City Sikeston State MO Zip Code 63801-0595

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

Name of Employer Americare Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 27 / 2014

Transaction ID : A-CF36615

Amount of Each Receipt this Period
500

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

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

5500.00

**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 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
J. T. Moody

Mailing Address 20264 State Highway 25

City Kennett State MO Zip Code 63857-7232

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

Name of Employer Self Employed Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : A-CF36889

Amount of Each Receipt this Period
250

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

Mailing Address 15691 State Highway 164

City Hornersville State MO Zip Code 63855-9702

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

Name of Employer Self Employed Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 21 / 2014

Transaction ID : A-CF36549

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Sarah Jo Morgan

Mailing Address 19740 County Road 408

City Holcomb State MO Zip Code 63852-6144

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

Name of Employer Self Employed Occupation Accountant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : A-CF36887

Amount of Each Receipt this Period
250

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 39 OF 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
William J Moriconi

Mailing Address 800 Cella Road

City Saint Louis State MO Zip Code 63124-1614

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

Name of Employer Self Employed Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : A-CF36692

Amount of Each Receipt this Period
500

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

Mailing Address PO Box 151

City Ellington State MO Zip Code 63638-0151

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

Name of Employer Blazer Boat Mfg Occupation Manufacturing

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 06 / 2014

Transaction ID : A-CF36717

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Joseph B Palmer

Mailing Address 1203 Fairfield

City Sikeston State MO Zip Code 63801-5018

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

Name of Employer Self Employed Occupation Real Estate Appraiser

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 23 / 2014

Transaction ID : A-CF36859

Amount of Each Receipt this Period
600

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 40 OF 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Joseph B Palmer

Mailing Address 1203 Fairfield

City State Zip Code
Sikeston MO 63801-5018

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

Name of Employer Occupation
Self Employed Real Estate Appraiser

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 23 / 2014

Transaction ID : A-CF36860

Amount of Each Receipt this Period
1000

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

Mailing Address 1203 Fairfield

City State Zip Code
Sikeston MO 63801-5018

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

Name of Employer Occupation
Self Employed Real Estate Appraiser

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 23 / 2014

Transaction ID : A-CF36861

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Joseph B Palmer

Mailing Address 1203 Fairfield

City State Zip Code
Sikeston MO 63801-5018

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

Name of Employer Occupation
Self Employed Real Estate Appraiser

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 23 / 2014

Transaction ID : A-CF36968

Amount of Each Receipt this Period
400

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

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

2400.00

**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 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
William F Palmer

Mailing Address 110 Greenbriar Drive

City State Zip Code
Sikeston MO 63801-4825

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

Name of Employer Occupation
NA Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 13 / 2014

Transaction ID : A-CF36518

Amount of Each Receipt this Period
1000

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

Mailing Address 5777 S Brightwater Trail

City State Zip Code
Springfield MO 65810-2777

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

Name of Employer Occupation
Parmele Law Firm Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 13 / 2014

Transaction ID : A-CF36516

Amount of Each Receipt this Period
500

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

Mailing Address 413 Eli Drive

City State Zip Code
Jackson MO 63755-8488

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

Name of Employer Occupation
East Perry Timber Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 23 / 2014

Transaction ID : A-CF36976

Amount of Each Receipt this Period
500

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Todd L Petzoldt

Mailing Address 919 Pcr 414

City Frohna State MO Zip Code 63748-9135

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

Name of Employer East Perry Timber Occupation Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 23 / 2014

Transaction ID : A-CF36858

Amount of Each Receipt this Period
500

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

Mailing Address 52 Portland Place

City Saint Louis State MO Zip Code 63108-1242

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

Name of Employer Civic Service, Inc. Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 14 / 2014

Transaction ID : A-CF36409

Amount of Each Receipt this Period
2600

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

Mailing Address 52 Portland Place

City Saint Louis State MO Zip Code 63108-1242

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

Name of Employer Civic Service, Inc. Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 14 / 2014

Transaction ID : A-CF36969

Amount of Each Receipt this Period
2600

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

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

5700.00

**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 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Mick W Plummer

Mailing Address RR 2 Box 224

City Mountain Grove State MO Zip Code 65711-9305

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

Name of Employer Self Employed Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 14 / 2014

Transaction ID : A-CF36408

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Mick W Plummer

Mailing Address RR 2 Box 224

City Mountain Grove State MO Zip Code 65711-9305

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

Name of Employer Self Employed Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 23 / 2014

Transaction ID : A-CF36856

Amount of Each Receipt this Period
600

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

Mailing Address RR 2 Box 224

City Mountain Grove State MO Zip Code 65711-9305

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

Name of Employer Self Employed Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 23 / 2014

Transaction ID : A-CF36970

Amount of Each Receipt this Period
400

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 149
	<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)
Jason Smith for Congress

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

Mailing Address 102 Walnut Hill Drive

City Salem State MO Zip Code 65560-9268

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

Name of Employer Self Employed Occupation Doctor of Chiropractic

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 13 / 2014

Transaction ID : A-CF36777

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
W.F. Provance

Mailing Address PO Box 281

City Malden State MO Zip Code 63863-0281

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

Name of Employer BPS Tel. Co. Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 07 / 2014

Transaction ID : A-CF36495

Amount of Each Receipt this Period
1000

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

Mailing Address 234 Rock Valley Lane

City Perryville State MO Zip Code 63775-7753

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

Name of Employer Rustic Wood Prod, Inc. Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1300**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 17 / 2014

Transaction ID : A-CF36809

Amount of Each Receipt this Period
1000

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 45 OF 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Barry Richardson

Mailing Address 112 W Main St

City Marston State MO Zip Code 63866-1000

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

Name of Employer Self Employed Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 22 / 2014

Transaction ID : A-CF36566

Amount of Each Receipt this Period
250

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

Mailing Address 1909 S Westwood Boulevard

City Poplar Bluff State MO Zip Code 63901-6121

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

Name of Employer NA Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 01 / 2014

Transaction ID : A-CF36465

Amount of Each Receipt this Period
2600

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

Mailing Address 1909 S Westwood Boulevard

City Poplar Bluff State MO Zip Code 63901-6121

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

Name of Employer NA Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 01 / 2014

Transaction ID : A-CF36971

Amount of Each Receipt this Period
2600

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

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

5450.00

**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 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Frank Robinson

Mailing Address 407 E Cinque Hommes Drive

City Perryville State MO Zip Code 63775-3229

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

Name of Employer Robinson Construction Occupation Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 01 / 2014

Transaction ID : A-CF36464

Amount of Each Receipt this Period
1100

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

Mailing Address 407 E Cinque Hommes Drive

City Perryville State MO Zip Code 63775-3229

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

Name of Employer Robinson Construction Occupation Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 01 / 2014

Transaction ID : A-CF36974

Amount of Each Receipt this Period
400

C. Full Name (Last, First, Middle Initial)
Vallie J Rogers Hoerning

Mailing Address PO Box 702

City Mountain Grove State MO Zip Code 65711-0702

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

Name of Employer Physical Therapy Specialists Occupation Physical Therapist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 19 / 2014

Transaction ID : A-CF36831

Amount of Each Receipt this Period
250

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 47 OF 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Gary Romine

Mailing Address 19557 State Route Ee

City Farmington State MO Zip Code 63640-7495

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

Name of Employer Show-Me Rent-to-Own Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 06 / 2014

Transaction ID : A-CF36732

Amount of Each Receipt this Period
500

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

Mailing Address 503 W 5th Street

City Portageville State MO Zip Code 63873-1109

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

Name of Employer FMC Occupation Sales Representative

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2014

Transaction ID : A-CF36813

Amount of Each Receipt this Period
500

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

Mailing Address 656 State Highway K

City Portageville State MO Zip Code 63873-8349

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

Name of Employer Self Employed Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 19 / 2014

Transaction ID : A-CF36539

Amount of Each Receipt this Period
500

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 48 OF 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Gary Rust

Mailing Address 250 Birdsong Lane

City Cape Girardeau State MO Zip Code 63701-8143

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

Name of Employer NA Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 05 / 2014

Transaction ID : A-CF36482

Amount of Each Receipt this Period
 1000

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

Mailing Address PO Box 516

City Vichy State MO Zip Code 65580-0516

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

Name of Employer Baron Aviation Occupation Pilot

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 23 / 2014

Transaction ID : A-CF36841

Amount of Each Receipt this Period
 500

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

Mailing Address 9752 Litzinger Road

City Saint Louis State MO Zip Code 63124-1058

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

Name of Employer Schnuck's Markets, Inc. Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 22 / 2014

Transaction ID : A-CF36932

Amount of Each Receipt this Period
 1000

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 49 OF 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Charles R Scott Sr.

Mailing Address 3 Cotton Trace Street

City State Zip Code
Sikeston MO 63801-1925

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350

Date of Receipt
 M M / D D / Y Y Y Y
05 / 21 / 2014

Transaction ID : A-CF36543

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
L.V. Sexton

Mailing Address PO Box 27

City State Zip Code
Rolla MO 65402-0027

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

Name of Employer Occupation
Partner Sellers-Sexton, Inc.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
06 / 23 / 2014

Transaction ID : A-CF36857

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Joyce D. Smith

Mailing Address 39336 Jason Drive

City State Zip Code
Malden MO 63863-5273

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

Name of Employer Occupation
Joyce's Kiddie Club Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : A-CF36893

Amount of Each Receipt this Period
250

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 50 OF 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Menlo F Smith

Mailing Address **14 Ballantrae Court**

City **Saint Louis** State **MO** Zip Code **63131-2833**

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

Name of Employer **Sun Mark Capital** Occupation **Chairman**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF36693

Amount of Each Receipt this Period
1000

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

Mailing Address **7733 Forsyth Boulevard Suite 1375**

City **Saint Louis** State **MO** Zip Code **63105-1834**

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

Name of Employer **Legacy Packaging** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3600**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 06 / 2014

Transaction ID : A-CF36714

Amount of Each Receipt this Period
1600

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

Mailing Address **7733 Forsyth Boulevard Suite 1375**

City **Saint Louis** State **MO** Zip Code **63105-1834**

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

Name of Employer **Legacy Packaging** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3600**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 06 / 2014

Transaction ID : A-CF36972

Amount of Each Receipt this Period
1000

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

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

3600.00

**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 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Maxine Steelman

Mailing Address 38 County Road 3220

City Salem State MO Zip Code 65560-8093

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

Name of Employer NA Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 23 / 2014

Transaction ID : A-CF36853

Amount of Each Receipt this Period
 2000

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

Mailing Address 2122 Massachusetts Ave, NW Apt 614

City Washington State DC Zip Code 20008

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

Name of Employer Blank Rome Government Relations Occupation Lobbyist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 19 / 2014

Transaction ID : A-CF36835

Amount of Each Receipt this Period
 250

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

Mailing Address HC 1 Box 156B

City Eminence State MO Zip Code 65466-9713

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

Name of Employer Self Employed Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 09 / 2014

Transaction ID : A-CF36746

Amount of Each Receipt this Period
 300

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

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

2550.00

**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 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Melinda Stubblefield

Mailing Address 75 Evans Road

City State Zip Code
Cuba MO 65453-8044

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

Name of Employer Occupation
Self Employed Health Service

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
06 / 23 / 2014

Transaction ID : A-CF36852

Amount of Each Receipt this Period
1000

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

Mailing Address 140 Farr View Drive

City State Zip Code
Steelville MO 65565-8121

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

Name of Employer Occupation
NA Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350

Date of Receipt
 M M / D D / Y Y Y Y
06 / 18 / 2014

Transaction ID : A-CF36822

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Gregory L Temple D.D.S.

Mailing Address 8986 County Road 9190

City State Zip Code
West Plains MO 65775-6156

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

Name of Employer Occupation
Self Employed Dentist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
04 / 28 / 2014

Transaction ID : A-CF36452

Amount of Each Receipt this Period
1000

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

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

2100.00

**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 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Harvey Tettlebaum

Mailing Address **PO Box 1251**
235 E High St

City **Jefferson City** State **MO** Zip Code **65102-1251**

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

Name of Employer **Husch Blackwell Sanders LLP** Occupation **Partner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 19 / 2014

Transaction ID : A-CF36538

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Joyce A Thomas

Mailing Address **10553 Pine Lake Drive**

City **Rolla** State **MO** Zip Code **65401-5421**

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

Name of Employer **ReMax** Occupation **Realtor**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 23 / 2014

Transaction ID : A-CF36848

Amount of Each Receipt this Period
250

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

Mailing Address **1206 Old Cadet Road**

City **Bonne Terre** State **MO** Zip Code **63628-4392**

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

Name of Employer **Allen Street Apothecary** Occupation **Manager**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 29 / 2014

Transaction ID : A-CF36645

Amount of Each Receipt this Period
500

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Bruce Vancil

Mailing Address **PO Box 566**

City **Dexter** State **MO** Zip Code **63841-0566**

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

Name of Employer **Dexter BBQ** Occupation **Owner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : A-CF36883

Amount of Each Receipt this Period
2000

B. Full Name (Last, First, Middle Initial)
Christopher D Wade

Mailing Address **PO Box 212**

City **Ava** State **MO** Zip Code **65608-0212**

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

Name of Employer **Wade Law Firm** Occupation **Attorney**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 17 / 2014

Transaction ID : A-CF36812

Amount of Each Receipt this Period
500

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

Mailing Address **3299 W 520th Road**

City **East Prairie** State **MO** Zip Code **63845-8764**

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

Name of Employer **Self-employed** Occupation **Farmer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 21 / 2014

Transaction ID : A-CF36547

Amount of Each Receipt this Period
1000

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

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

3500.00

**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 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Lynn Wallis

Mailing Address 106 E Washington Street

City Cuba State MO Zip Code 65453-1827

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

Name of Employer Wallis Oil Co. Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 30 / 2014

Transaction ID : A-CF36653

Amount of Each Receipt this Period
200

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

Mailing Address 106 E Washington Street

City Cuba State MO Zip Code 65453-1827

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

Name of Employer Wallis Oil Co. Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 24 / 2014

Transaction ID : A-CF36931

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Laury A West Sr.

Mailing Address 705 Forest Drive

City Sullivan State MO Zip Code 63080-2914

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

Name of Employer West Bros Chrysler, Inc Occupation Auto Dealer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 23 / 2014

Transaction ID : A-CF36866

Amount of Each Receipt this Period
350

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

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

800.00

**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 149
	<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)
Jason Smith for Congress

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

Mailing Address 2000 Progress Drive

City Farmington State MO Zip Code 63640-9158

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

Name of Employer US Tool Grinding Occupation VP, Operations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 06 / 2014

Transaction ID : A-CF36731

Amount of Each Receipt this Period
1000

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

Mailing Address 2000 Progress Drive

City Farmington State MO Zip Code 63640-9158

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

Name of Employer US Tool Grinding Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 06 / 2014

Transaction ID : A-CF36735

Amount of Each Receipt this Period
1500

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

Mailing Address 2784 Brune Road

City Farmington State MO Zip Code 63640-7153

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

Name of Employer Self-employed Occupation Optometrist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 06 / 2014

Transaction ID : A-CF36736

Amount of Each Receipt this Period
500

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 57 OF 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Robbie Winston

Mailing Address 2300 Northaven Drive

City Kennett State MO Zip Code 63857-4048

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

Name of Employer White Oak Gin Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : A-CF36884

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
A. R. Wishon

Mailing Address 186 E Highway 8

City Steelville State MO Zip Code 65565-4505

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

Name of Employer Self Employed Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 13 / 2014

Transaction ID : A-CF36519

Amount of Each Receipt this Period
1000

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

Mailing Address 203 NE Main Street

City Bonne Terre State MO Zip Code 63628-1775

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

Name of Employer Wood, Land, & Cattle Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 27 / 2014

Transaction ID : A-CF36578

Amount of Each Receipt this Period
1000

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

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

2250.00

134545.00

**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 149
	<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)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Texas County Federated Women's Club

Mailing Address 10949 Prescott Road

City Licking State MO Zip Code 65542-8192

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 27 / 2014

Transaction ID : A-CF36580

Amount of Each Receipt this Period
750

B. Full Name (Last, First, Middle Initial)
Texas County Republican Central Committee

Mailing Address 8707 Highway E

City Houston State MO Zip Code 65483-1371

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **999**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 22 / 2014

Transaction ID : A-CF36428

Amount of Each Receipt this Period
1000

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).....

1750.00

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 59 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Ameren Federal PAC

Mailing Address 1331 Pennsylvania Avenue NW
Suite 550 S

City Washington State DC Zip Code 20004-1776

FEC ID number of contributing federal political committee. **C** C00206136

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : A-CF36686

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
American Bankers Association PAC

Mailing Address 1120 Connecticut Avenue NW

City Washington State DC Zip Code 20036-3902

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 02 / 2014

Transaction ID : A-CF36924

Amount of Each Receipt this Period
2000

C. Full Name (Last, First, Middle Initial)
American Dental Association PAC

Mailing Address 1111 14th Street NW
Suite 1100

City Washington State DC Zip Code 20005-5627

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 17 / 2014

Transaction ID : A-CF36817

Amount of Each Receipt this Period
2000

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

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

5000.00

**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 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
American Institute of Certified Public Accountants PAC

Mailing Address 220 Leigh Farm Road

City State Zip Code
Durham NC 27707-8110

FEC ID number of contributing federal political committee. **C C00077321**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 26 / 2014

Transaction ID : A-CF36876

Amount of Each Receipt this Period
1500

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

Mailing Address 1504 Robinhood Trail
Apró

City State Zip Code
Austin TX 78703-2624

FEC ID number of contributing federal political committee. **C C00166223**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 06 / 2014

Transaction ID : A-CF36721

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Arch Coal, Inc. PAC

Mailing Address 1 City Center
Suite 300

City State Zip Code
Saint Louis MO 63101-1883

FEC ID number of contributing federal political committee. **C C00167668**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 27 / 2014

Transaction ID : A-CF36583

Amount of Each Receipt this Period
1000

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 61 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Ash Grove Cement Company PAC

Mailing Address PO Box 25900

City State Zip Code
Shawnee Mission KS 66225-5900

FEC ID number of contributing federal political committee. **C C00102517**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
06 / 20 / 2014

Transaction ID : A-CF36925

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
AT&T PAC

Mailing Address 208 S Akard Street Suite 2701

City State Zip Code
Dallas TX 75202-4206

FEC ID number of contributing federal political committee. **C C00109017**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000

Date of Receipt
 M M / D D / Y Y Y Y
06 / 25 / 2014

Transaction ID : A-CF36872

Amount of Each Receipt this Period
2000

C. Full Name (Last, First, Middle Initial)
Automotive Free International Trade PAC

Mailing Address 1625 Prince Street Suite 225

City State Zip Code
Alexandria VA 22314-2882

FEC ID number of contributing federal political committee. **C C00250399**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y
06 / 17 / 2014

Transaction ID : A-CF36815

Amount of Each Receipt this Period
2500

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Best Buy Co., Inc Employee Political Forum

Mailing Address 7601 Penn Avenue S

City Richfield State MN Zip Code 55423-3645

FEC ID number of contributing federal political committee. **C** C00405076

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 25 / 2014

Transaction ID : A-CF36927

Amount of Each Receipt this Period
 1000

B. Full Name (Last, First, Middle Initial)
CenturyLink Inc Employees PAC

Mailing Address 1099 New York Avenue NW Suite 250

City Washington State DC Zip Code 20001-4836

FEC ID number of contributing federal political committee. **C** C00419911

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 4000

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 23 / 2014

Transaction ID : A-CF36865

Amount of Each Receipt this Period
 2000

C. Full Name (Last, First, Middle Initial)
Charter Communications, Inc. PAC

Mailing Address 1919 Pennsylvania Avenue NW

City Washington State DC Zip Code 20006-3400

FEC ID number of contributing federal political committee. **C** C00426775

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 20 / 2014

Transaction ID : A-CF36926

Amount of Each Receipt this Period
 2500

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

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

5500.00

**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 63 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jason Smith for Congress

A. Commerce Bancs PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 419248
 City Kansas City State MO Zip Code 64141-6248
 FEC ID number of contributing federal political committee. **C C00072967**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014
Transaction ID : A-CF36699
 Amount of Each Receipt this Period
 1000

B. CULAC the PAC of Credit Union National Association
 Full Name (Last, First, Middle Initial)
 Mailing Address 601 Pennsylvania Avenue NW
 South Building, Suite 600
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C C00007880**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 25 / 2014
Transaction ID : A-CF36913
 Amount of Each Receipt this Period
 1000

C. DIRECTV GROUP, INC. FUND - FEDERAL (DIRECTV PAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 901 F Street NW
 Suite 600
 City Washington State DC Zip Code 20004-1429
 FEC ID number of contributing federal political committee. **C C00331991**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 25 / 2014
Transaction ID : A-CF36914
 Amount of Each Receipt this Period
 2500

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jason Smith for Congress

A. Doe Run Political Action Committee

Full Name (Last, First, Middle Initial)
Doe Run Political Action Committee

Mailing Address 1801 Park 270 Drive
Suite 300

City Saint Louis State MO Zip Code 63146-4023

FEC ID number of contributing federal political committee. **C** C00552109

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 17 / 2014

Transaction ID : A-CF36816

Amount of Each Receipt this Period
2500

B. DRS Technologies - Good Government Fund

Full Name (Last, First, Middle Initial)
DRS Technologies - Good Government Fund

Mailing Address 2345 Crystal Drive
Suite 915

City Arlington State VA Zip Code 22202-4802

FEC ID number of contributing federal political committee. **C** C00275123

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 26 / 2014

Transaction ID : A-CF36915

Amount of Each Receipt this Period
1000

C. Edward Jones PAC

Full Name (Last, First, Middle Initial)
Edward Jones PAC

Mailing Address 12555 Manchester Road

City Saint Louis State MO Zip Code 63131-3710

FEC ID number of contributing federal political committee. **C** C00410407

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : A-CF36698

Amount of Each Receipt this Period
1000

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jason Smith for Congress

A. Exxon Mobil PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 5959 Las Colinas Boulevard
 City Irving State TX Zip Code 75039-4202
 FEC ID number of contributing federal political committee. **C** C00095406
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 2500

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 20 / 2014
Transaction ID : A-CF36838
 Amount of Each Receipt this Period
 2500

B. Greenberg Traurig PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 54 State Street Floor 6
 City Albany State NY Zip Code 12207-2510
 FEC ID number of contributing federal political committee. **C** C00266585
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 3000

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 17 / 2014
Transaction ID : A-CF36917
 Amount of Each Receipt this Period
 1000

C. Hallmark Cards, Inc. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 2501 McGee Street
 City Kansas City State MO Zip Code 64108-2615
 FEC ID number of contributing federal political committee. **C** C00000059
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 20 / 2014
Transaction ID : A-CF36541
 Amount of Each Receipt this Period
 1000

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

4500.00

**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 66 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Home Depot Inc. Better Government Com.

Mailing Address 2455 Paces Ferry Rd., NW
Floor C-17

City Atlanta State GA Zip Code 30339-4024

FEC ID number of contributing federal political committee. **C** C00284885

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 13 / 2014

Transaction ID : A-CF36772

Amount of Each Receipt this Period
2000

B. Full Name (Last, First, Middle Initial)
Husch Blackwell Sanders PAC

Mailing Address 4801 Main Street
Suite 1000

City Kansas City State MO Zip Code 64112-2551

FEC ID number of contributing federal political committee. **C** C00424382

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 19 / 2014

Transaction ID : A-CF36537

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
International Franchise Association

Mailing Address 1501 K Street NW
Suite 350

City Washington State DC Zip Code 20005-1412

FEC ID number of contributing federal political committee. **C** C00084491

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : A-CF36882

Amount of Each Receipt this Period
2500

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

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

5000.00

**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 67 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jason Smith for Congress

A. Ipa Wildcatters Fund
 Full Name (Last, First, Middle Initial)
 Mailing Address 1201 15th Street NW
 Suite 300
 City Washington State DC Zip Code 20005-2899
 FEC ID number of contributing federal political committee. **C C00246306**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 25 / 2014
Transaction ID : A-CF36918
 Amount of Each Receipt this Period
 1000

B. Isle of Capri Casinos PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 Emerson Road
 Suite 300
 City Creve Coeur State MO Zip Code 63141-6762
 FEC ID number of contributing federal political committee. **C C00323311**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 28 / 2014
Transaction ID : A-CF36453
 Amount of Each Receipt this Period
 1000

C. Kitpac
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1492
 City Columbia State MO Zip Code 65205-1492
 FEC ID number of contributing federal political committee. **C C00216705**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 05 / 2014
Transaction ID : A-CF36710
 Amount of Each Receipt this Period
 1000

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 68 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Microsoft Corporation PAC

Mailing Address 16011 NE 36th Way
97017

City Redmond State WA Zip Code 98052-6301

FEC ID number of contributing federal political committee. **C C00227546**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 20 / 2014

Transaction ID : A-CF36542

Amount of Each Receipt this Period
1500

B. Full Name (Last, First, Middle Initial)
Microsoft Corporation PAC

Mailing Address 16011 NE 36th Way
97017

City Redmond State WA Zip Code 98052-6301

FEC ID number of contributing federal political committee. **C C00227546**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 20 / 2014

Transaction ID : A-CF36973

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
National Association Of Real Estate Investment Trusts, Inc. Political Action Committee

Mailing Address 1875 I Street NW
Suite 600

City Washington State DC Zip Code 20006-5413

FEC ID number of contributing federal political committee. **C C00303339**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2014

Transaction ID : A-CF36413

Amount of Each Receipt this Period
1500

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

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

4000.00

**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 69 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jason Smith for Congress

A. National Association Of Realtors Political Action Committee

Full Name (Last, First, Middle Initial)
Mailing Address 430 N Michigan Avenue

City Chicago State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 06 / 2014

Transaction ID : A-CF36722

Amount of Each Receipt this Period
 3000

B. National Cotton Council Committee For Advancement Of Cotton PAC

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 2995

City Cordova State TN Zip Code 38088-2995

FEC ID number of contributing federal political committee. **C** C00023028

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2014

Transaction ID : A-CF36485

Amount of Each Receipt this Period
 1000

C. National Cotton Council Committee For Advancement Of Cotton PAC

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 2995

City Cordova State TN Zip Code 38088-2995

FEC ID number of contributing federal political committee. **C** C00023028

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2014

Transaction ID : A-CF36773

Amount of Each Receipt this Period
 2500

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

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

6500.00

**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 70 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jason Smith for Congress

A. National Ocean Industries Association (noia) Political Actio

Full Name (Last, First, Middle Initial)
Mailing Address 1120 G Street NW
Suite 900

City Washington State DC Zip Code 20005-3801

FEC ID number of contributing federal political committee. **C C00409565**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 17 / 2014

Transaction ID : A-CF36919

Amount of Each Receipt this Period
1000

B. National Pork Producers Council PAC

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 10383

City Des Moines State IA Zip Code 50306-0383

FEC ID number of contributing federal political committee. **C C00201871**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 28 / 2014

Transaction ID : A-CF36628

Amount of Each Receipt this Period
2500

C. National Roofing Contractors Association Roof Pac

Full Name (Last, First, Middle Initial)
Mailing Address 324 4th Street NE

City Washington State DC Zip Code 20002-5824

FEC ID number of contributing federal political committee. **C C00244863**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2014

Transaction ID : A-CF36486

Amount of Each Receipt this Period
1000

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

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

4500.00

**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 71 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
National Rural Electric Cooperative Associations Action Committee for Rural Electrification PAC

Mailing Address 4301 Wilson Boulevard

City State Zip Code
Arlington VA 22203-1867

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 17 / 2014

Transaction ID : A-CF36814

Amount of Each Receipt this Period
5000

B. Full Name (Last, First, Middle Initial)
National Stone, Sand & Gravel Association ROCKPAC

Mailing Address 1605 King Street

City State Zip Code
Alexandria VA 22314-2726

FEC ID number of contributing federal political committee. **C** C00089458

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 13 / 2014

Transaction ID : A-CF36523

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Oracle America, Inc. Political Action Committee (oracle Pac)

Mailing Address 1015 15th St., NW
Suite 200

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00323048

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2014

Transaction ID : A-CF36487

Amount of Each Receipt this Period
1000

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

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

7000.00

**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 72 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Peanut PAC of Alabama

Mailing Address **PO Box 10182**

City **Dothan** State **AL** Zip Code **36304-2182**

FEC ID number of contributing federal political committee. **C C00211037**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 25 / 2014

Transaction ID : A-CF36871

Amount of Each Receipt this Period
1000

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

Mailing Address **4615 N Lewis Avenue**

City **Sioux Falls** State **SD** Zip Code **57104-7116**

FEC ID number of contributing federal political committee. **C C00450692**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 30 / 2014

Transaction ID : A-CF36920

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
Rock-Tenn Company PAC

Mailing Address **504 Thrasher Street**

City **Norcross** State **GA** Zip Code **30071-1967**

FEC ID number of contributing federal political committee. **C C00363556**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF36697

Amount of Each Receipt this Period
1000

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

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

4500.00

**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 73 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Jason Smith for Congress

A. Salem Communications Corporation Political Action Committee

Full Name (Last, First, Middle Initial)
Mailing Address 4880 Santa Rosa Road

City Camarillo State CA Zip Code 93012-5190

FEC ID number of contributing federal political committee. **C** C00321158

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 13 / 2014

Transaction ID : A-CF36921

Amount of Each Receipt this Period
 500

B. Scalise For Congress

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 23219

City New Orleans State LA Zip Code 70183-0219

FEC ID number of contributing federal political committee. **C** C00394957

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 24 / 2014

Transaction ID : A-CF36922

Amount of Each Receipt this Period
 2000

C. Sprint Nextel Political Action Committee

Full Name (Last, First, Middle Initial)
Mailing Address 2001 Edmund Halley Drive

City Reston State VA Zip Code 20191-3436

FEC ID number of contributing federal political committee. **C** C00089342

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 23 / 2014

Transaction ID : A-CF36923

Amount of Each Receipt this Period
 1000

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

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

3500.00

**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 74 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
The Eye Of The Tiger Political Action Committee

Mailing Address **PO Box 2485**

City **Springfield** State **VA** Zip Code **22152-0485**

FEC ID number of contributing federal political committee. **C C00467431**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 24 / 2014

Transaction ID : A-CF36916

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Tyson Foods, Inc. PAC

Mailing Address **PO Box 2020**

City **Springdale** State **AR** Zip Code **72765-2020**

FEC ID number of contributing federal political committee. **C C00320457**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 05 / 2014

Transaction ID : A-CF36912

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
USA Rice Federation PAC

Mailing Address **4301 Fairfax Drive
Suite 425**

City **Arlington** State **VA** Zip Code **22203-1653**

FEC ID number of contributing federal political committee. **C C00320457**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 06 / 2014

Transaction ID : A-CF36720

Amount of Each Receipt this Period
1000

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

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

2500.00

**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 75 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Wine And Spirits Wholesalers Of America, Inc. Political Action Committee

Mailing Address 805 15th Street NW
Suite 430

City Washington State DC Zip Code 20005-2273

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 28 / 2014

Transaction ID : A-CF36627

Amount of Each Receipt this Period
1000

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).....

1000.00

74000.00

**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 76 OF 149
	<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	

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NAME OF COMMITTEE (In Full)
Jason Smith for Congress

A. Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address PO Box 25505

City Lehigh Valley State PA Zip Code 18002-5505

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
529.81

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 16 / 2014

Transaction ID : A-OF36977

Amount of Each Receipt this Period
529.81

Contract Refund

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).....

529.81

529.81

**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 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. 1st Community Bank Visa		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address PO Box 4512		Amount of Each Disbursement this Period 2231.39
City Carol Stream	State IL	
Zip Code 60197-4512	Purpose of Disbursement Credit Card: See Below	Original vendors exceeding reporting threshold itemized as memo transactions.
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. McCormick & Schmick's		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 1652 K Street NW		Amount of Each Disbursement this Period 176.48
City Washington	State DC	
Zip Code 20006-2801	Purpose of Disbursement Political Meal	[MEMO ITEM] Subitemization of 1st Community Bank Visa(04/04/14)
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Hops Grill and Bar		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 3625 Jefferson Davis Highway		Amount of Each Disbursement this Period 100.83
City Alexandria	State VA	
Zip Code 22305-3133	Purpose of Disbursement Political Meal	[MEMO ITEM] Subitemization of 1st Community Bank Visa(04/04/14)
Candidate Name	Category/Type 002	
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).....	2231.39
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 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Georgia Brown's		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 950 15th Street NW		Amount of Each Disbursement this Period 228.11
City Washington State DC Zip Code 20005-2501	Purpose of Disbursement Political Meal Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : B-S-682 [MEMO ITEM] Subitemization of 1st Community Bank Visa(04/04/14)

Full Name (Last, First, Middle Initial) B. Red Lobster		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2014
Mailing Address 3269 William Street		Amount of Each Disbursement this Period 31.78
City Cape Girardeau State MO Zip Code 63703-4961	Purpose of Disbursement Political Meal Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : B-S-685 [MEMO ITEM] Subitemization of 1st Community Bank Visa(04/04/14)

Full Name (Last, First, Middle Initial) c. Red Lobster		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 3269 William Street		Amount of Each Disbursement this Period 218.56
City Cape Girardeau State MO Zip Code 63703-4961	Purpose of Disbursement Political Meal Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : B-S-677 [MEMO ITEM] Subitemization of 1st Community Bank Visa(04/04/14)

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Red Lobster		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 3269 William Street		Amount of Each Disbursement this Period 72.84
City Cape Girardeau	State MO	
Zip Code 63703-4961	Purpose of Disbursement Political Meal	[MEMO ITEM] Subitemization of 1st Community Bank Visa(04/04/14)
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Ruby Tuesday		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2014
Mailing Address 2387 Alcey Way		Amount of Each Disbursement this Period 119.58
City Nixa	State MO	
Zip Code 65714-7147	Purpose of Disbursement Political Meal	[MEMO ITEM] Subitemization of 1st Community Bank Visa(04/04/14)
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Applebee's - Cape		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2014
Mailing Address 202 S Broadview Street		Amount of Each Disbursement this Period 138.16
City Cape Girardeau	State MO	
Zip Code 63703-5745	Purpose of Disbursement Political Meal	[MEMO ITEM] Subitemization of 1st Community Bank Visa(04/04/14)
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Applebee's - Cape		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2014
Mailing Address 202 S Broadview Street		Amount of Each Disbursement this Period 2108.99
City Cape Girardeau	State MO	
Zip Code 63703-5745	Purpose of Disbursement Political Meal	Transaction ID : B-S-688
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of 1st Community Bank Visa(04/04/14)
State: District:		

Full Name (Last, First, Middle Initial) B. 1st Community Bank Visa		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address PO Box 4512		Amount of Each Disbursement this Period 2108.07
City Carol Stream	State IL	
Zip Code 60197-4512	Purpose of Disbursement Credit Card: See Below	Transaction ID : B-E-36379
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 320 N Frederick Street		Amount of Each Disbursement this Period 100.32
City Cape Girardeau	State MO	
Zip Code 63701-9998	Purpose of Disbursement Postage Expense	Transaction ID : B-S-696
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of 1st Community Bank Visa(04/04/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2108.07
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Cape Girardeau Area Chamber of Commerce			Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 1267 N Mount Auburn Road			Amount of Each Disbursement this Period 250
City Cape Girardeau	State MO	Zip Code 63701-1734	
Purpose of Disbursement Membership Dues Expense		Category/ Type 001	Transaction ID : B-S-694 [MEMO ITEM] Subitemization of 1st Community Bank Visa(04/04/14)
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. National Entertainment Technologies			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 18039 State Highway 38			Amount of Each Disbursement this Period 890.89
City Marshfield	State MO	Zip Code 65706-8876	
Purpose of Disbursement Filled Plastic Eggs for egghun		Category/ Type 007	Transaction ID : B-S-697 [MEMO ITEM] Subitemization of 1st Community Bank Visa(04/04/14)
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. Victory Enterprises			Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 5200 30th Street SW Suite 7			Amount of Each Disbursement this Period 422.73
City Davenport	State IA	Zip Code 52802-3039	
Purpose of Disbursement Lapel Sticker Expense		Category/ Type 006	Transaction ID : B-S-695 [MEMO ITEM] Subitemization of 1st Community Bank Visa(04/04/14)
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).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. University Plaza Hotel		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2014
Mailing Address 333 S John Q Hammons Parkway		Amount of Each Disbursement this Period 103.65
City Springfield	State MO	Zip Code 65806-2543
Purpose of Disbursement Lodging Expense	Category/Type 002	
Candidate Name	Transaction ID : B-S-690	
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:	[MEMO ITEM] Subitemization of 1st Community Bank Visa(04/04/14)	

Full Name (Last, First, Middle Initial) B. University Plaza Hotel		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2014
Mailing Address 333 S John Q Hammons Parkway		Amount of Each Disbursement this Period 103.65
City Springfield	State MO	Zip Code 65806-2543
Purpose of Disbursement Lodging Expense	Category/Type 002	
Candidate Name	Transaction ID : B-S-691	
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:	[MEMO ITEM] Subitemization of 1st Community Bank Visa(04/04/14)	

Full Name (Last, First, Middle Initial) c. University Plaza Hotel		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2014
Mailing Address 333 S John Q Hammons Parkway		Amount of Each Disbursement this Period 103.65
City Springfield	State MO	Zip Code 65806-2543
Purpose of Disbursement Lodging Expense	Category/Type 002	
Candidate Name	Transaction ID : B-S-692	
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:	[MEMO ITEM] Subitemization of 1st Community Bank Visa(04/04/14)	

SUBTOTAL of Disbursements This Page (optional).....	103.65
TOTAL This Period (last page this line number only).....	0.00

**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 83 OF 149	
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. 1st Community Bank Visa			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014	
Mailing Address PO Box 4512			Amount of Each Disbursement this Period 662	
City Carol Stream	State IL	Zip Code 60197-4512	Transaction ID : B-E-36380	
Purpose of Disbursement Credit Card: See Below		Category/ Type 002	Original vendors exceeding reporting threshold itemized as memo transactions.	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. My Daddy's Cheesecake			Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014	
Mailing Address 6451 Clayton Road			Amount of Each Disbursement this Period 70	
City Saint Louis	State MO	Zip Code 63117-1814	Transaction ID : B-S-700	
Purpose of Disbursement Political Meal		Category/ Type 002	[MEMO ITEM] Subitemization of 1st Community Bank Visa(04/04/14)	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. University Plaza Hotel			Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2014	
Mailing Address 333 S John Q Hammons Parkway			Amount of Each Disbursement this Period 33.46	
City Springfield	State MO	Zip Code 65806-2543	Transaction ID : B-S-699	
Purpose of Disbursement Political Meal		Category/ Type 002	[MEMO ITEM] Subitemization of 1st Community Bank Visa(04/04/14)	
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).....	662.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Outback Steakhouse		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 101 Cape West Parkway		Amount of Each Disbursement this Period 150.86
City Cape Girardeau	State MO	Zip Code 63701-8418
Purpose of Disbursement Political Meal	Category/ Type 002	
Candidate Name	Transaction ID : B-S-702	
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)	[MEMO ITEM] Subitemization of 1st Community Bank Visa(04/04/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Double Tree Hotel Jefferson City		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 422 Monroe Street		Amount of Each Disbursement this Period 136.52
City Jefferson City	State MO	Zip Code 65101-3121
Purpose of Disbursement Lodging Expense	Category/ Type 002	
Candidate Name	Transaction ID : B-S-703	
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)	[MEMO ITEM] Subitemization of 1st Community Bank Visa(04/04/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Casey's General Store		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 920 W Independence Street		Amount of Each Disbursement this Period 34.01
City Jackson	State MO	Zip Code 63755-1106
Purpose of Disbursement Fuel Expense	Category/ Type 002	
Candidate Name	Transaction ID : B-S-704	
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)	[MEMO ITEM] Subitemization of 1st Community Bank Visa(04/04/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. 1st Community Bank Visa		Date of Disbursement MM / DD / YYYY 05 / 07 / 2014
Mailing Address PO Box 4512		Amount of Each Disbursement this Period 1349.8
City Carol Stream	State IL	Zip Code 60197-4512
Purpose of Disbursement Credit Card: See Below	Category/ Type 002	
Candidate Name	Transaction ID : B-E-36489	
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)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) B. AT & T		Date of Disbursement MM / DD / YYYY 04 / 15 / 2014
Mailing Address PO Box 5014		Amount of Each Disbursement this Period 732.12
City Carol Stream	State IL	Zip Code 60197-5014
Purpose of Disbursement Phone Expense	Category/ Type 001	
Candidate Name	Transaction ID : B-S-711	
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)	[MEMO ITEM] Subitemization of 1st Community Bank Visa(05/07/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Cracker Barrel		Date of Disbursement MM / DD / YYYY 03 / 29 / 2014
Mailing Address 3261 William Street		Amount of Each Disbursement this Period 55.72
City Cape Girardeau	State MO	Zip Code 63703-4961
Purpose of Disbursement Political Meal Expense	Category/ Type 002	
Candidate Name	Transaction ID : B-S-706	
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)	[MEMO ITEM] Subitemization of 1st Community Bank Visa(05/07/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1349.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 149			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Ruby Tuesday Restaurant		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2014
Mailing Address 1120 Shapiro Drive		Amount of Each Disbursement this Period 83.53
City Festus State MO Zip Code 63028-2300	Purpose of Disbursement Political Meal Expense	Transaction ID : B-S-709
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of 1st Community Bank Visa(05/07/14)
State: District:		

Full Name (Last, First, Middle Initial) B. 1st Community Bank Visa		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address PO Box 4512		Amount of Each Disbursement this Period 987.54
City Carol Stream State IL Zip Code 60197-4512	Purpose of Disbursement Credit Card: See Below	Transaction ID : B-E-36490
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) c. Photography by Carrie LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 2117 Broadway Street		Amount of Each Disbursement this Period 835.73
City Cape Girardeau State MO Zip Code 63701-4401	Purpose of Disbursement Photograph Expense	Transaction ID : B-S-714
Candidate Name	007 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of 1st Community Bank Visa(05/07/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	987.54
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Concord		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 430 Broadway Street		Amount of Each Disbursement this Period 91.51
City Cape Girardeau	State MO	
Zip Code 63701-5622	Purpose of Disbursement Printing Expense	Transaction ID : B-S-713
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of 1st Community Bank Visa(05/07/14)
State: District:		

Full Name (Last, First, Middle Initial) B. 1st Community Bank Visa		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address PO Box 4512		Amount of Each Disbursement this Period 1726.98
City Carol Stream	State IL	
Zip Code 60197-4512	Purpose of Disbursement Credit Card: See Below	Transaction ID : B-E-36491
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) c. McCormick & Schmick's		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 1652 K Street NW		Amount of Each Disbursement this Period 148.66
City Washington	State DC	
Zip Code 20006-2801	Purpose of Disbursement Political Meal Expense	Transaction ID : B-S-715
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of 1st Community Bank Visa(05/07/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1726.98
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. BLT Steak		Date of Disbursement MM / DD / YYYY 04 / 09 / 2014
Mailing Address 1625 I Street NW		Amount of Each Disbursement this Period 623.88
City Washington State DC Zip Code 20006-4061	Purpose of Disbursement Political Meal Expense Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-S-718 [MEMO ITEM] Subitemization of 1st Community Bank Visa(05/07/14)
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Casey's General Store		Date of Disbursement MM / DD / YYYY 04 / 05 / 2014
Mailing Address 920 W Independence Street		Amount of Each Disbursement this Period 8.56
City Jackson State MO Zip Code 63755-1106	Purpose of Disbursement Food and Beverage Expense Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-S-717 [MEMO ITEM] Subitemization of 1st Community Bank Visa(05/07/14)
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Casey's General Store		Date of Disbursement MM / DD / YYYY 04 / 21 / 2014
Mailing Address 920 W Independence Street		Amount of Each Disbursement this Period 45.01
City Jackson State MO Zip Code 63755-1106	Purpose of Disbursement Fuel Expense Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-S-721 [MEMO ITEM] Subitemization of 1st Community Bank Visa(05/07/14)
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Casey's General Store		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2014
Mailing Address 920 W Independence Street		Amount of Each Disbursement this Period 31.85
City Jackson State MO Zip Code 63755-1106	Purpose of Disbursement Fuel Expense Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : B-S-716 [MEMO ITEM] Subitemization of 1st Community Bank Visa(05/07/14)

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 281.65
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Political Meal Expense Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : B-S-719 [MEMO ITEM] Subitemization of 1st Community Bank Visa(05/07/14)

Full Name (Last, First, Middle Initial) c. 1st Community Bank Visa		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address PO Box 4512		Amount of Each Disbursement this Period 2485.42
City Carol Stream State IL Zip Code 60197-4512	Purpose of Disbursement Credit Card: See below Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : B-E-36682 Original vendors exceeding reporting threshold itemized as memo transactions.

SUBTOTAL of Disbursements This Page (optional).....	2485.42
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 90 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Ted's Montana Grill		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 2200 Crystal Drive Suite A		Amount of Each Disbursement this Period 238.9
City Arlington	State VA	
Zip Code 22202-3730	Purpose of Disbursement Political Meal Expense	Transaction ID : B-S-752
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of 1st Community Bank Visa(06/02/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Talay Thai Restaurant		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 406 1st Street SE		Amount of Each Disbursement this Period 45.43
City Washington	State DC	
Zip Code 20003-1869	Purpose of Disbursement Political Meal Expense	Transaction ID : B-S-746
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of 1st Community Bank Visa(06/02/14)
State: District:		

Full Name (Last, First, Middle Initial) c. My Daddy's Cheesecake		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 6451 Clayton Road		Amount of Each Disbursement this Period 71.15
City Saint Louis	State MO	
Zip Code 63117-1814	Purpose of Disbursement Political Meal	Transaction ID : B-S-748
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of 1st Community Bank Visa(06/02/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 149			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Hops Grill and Bar		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 3625 Jefferson Davis Highway		Amount of Each Disbursement this Period 75.16
City Alexandria State VA Zip Code 22305-3133	Purpose of Disbursement Political Meal Expense 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-S-744 [MEMO ITEM] Subitemization of 1st Community Bank Visa(06/02/14)
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Hops Grill and Bar		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 3625 Jefferson Davis Highway		Amount of Each Disbursement this Period 108.49
City Alexandria State VA Zip Code 22305-3133	Purpose of Disbursement Political Meal Expense 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-S-751 [MEMO ITEM] Subitemization of 1st Community Bank Visa(06/02/14)
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 417.39
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Political Meal Expense 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-S-753 [MEMO ITEM] Subitemization of 1st Community Bank Visa(06/02/14)
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Cracker Barrel		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 3261 William Street		Amount of Each Disbursement this Period 23.59
City Cape Girardeau	State MO	
Zip Code 63703-4961	Purpose of Disbursement Political Meal Expense	Transaction ID : B-S-743
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of 1st Community Bank Visa(06/02/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Colton's Steak House		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 2114 N. Westbrook		Amount of Each Disbursement this Period 30.32
City Poplar Bluff	State MO	
Zip Code 63901	Purpose of Disbursement Political Meal	Transaction ID : B-S-749
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of 1st Community Bank Visa(06/02/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Oceanaire Seafood Room		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 1201 F Street NW		Amount of Each Disbursement this Period 228.5
City Washington	State DC	
Zip Code 20004-1217	Purpose of Disbursement Political Meal Expense	Transaction ID : B-S-745
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of 1st Community Bank Visa(06/02/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Casey's General Store		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2014
Mailing Address 920 W Independence Street		Amount of Each Disbursement this Period 50.31
City Jackson	State MO	
Zip Code 63755-1106	Purpose of Disbursement Fuel Expense	Transaction ID : B-S-741
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of 1st Community Bank Visa(06/02/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Red Lobster		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 3269 William Street		Amount of Each Disbursement this Period 64.86
City Cape Girardeau	State MO	
Zip Code 63703-4961	Purpose of Disbursement Political Meal Expense	Transaction ID : B-S-737
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of 1st Community Bank Visa(06/02/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Bobby Vans Grille		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 1201 New York Avenue		Amount of Each Disbursement this Period 177.4
City Washington	State DC	
Zip Code 20050	Purpose of Disbursement Political Meal Expense	Transaction ID : B-S-742
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of 1st Community Bank Visa(06/02/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. 1st Community Bank Visa			Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address PO Box 4512			Amount of Each Disbursement this Period 1689.14
City Carol Stream	State IL	Zip Code 60197-4512	
Purpose of Disbursement Credit Card: See below		Category/ Type 001	Transaction ID : B-E-36683
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)		Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:			

Full Name (Last, First, Middle Initial) B. USPS			Date of Disbursement MM / DD / YYYY 04 / 29 / 2014
Mailing Address 320 N Frederick Street			Amount of Each Disbursement this Period 196
City Cape Girardeau	State MO	Zip Code 63701-9998	
Purpose of Disbursement Postage Expense		Category/ Type 003	Transaction ID : B-S-730 [MEMO ITEM] Subitemization of 1st Community Bank Visa(06/02/14)
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. Amazon.com			Date of Disbursement MM / DD / YYYY 05 / 20 / 2014
Mailing Address P.O. BOX 81226			Amount of Each Disbursement this Period 295.35
City Seattle	State WA	Zip Code 98108-1226	
Purpose of Disbursement Parade Equipment Expense		Category/ Type 006	Transaction ID : B-S-736 [MEMO ITEM] Subitemization of 1st Community Bank Visa(06/02/14)
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).....	1689.14
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 95 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Victory Enterprises		Date of Disbursement MM / DD / YYYY 05 / 20 / 2014
Mailing Address 5200 30th Street SW Suite 7		Amount of Each Disbursement this Period 506.32
City Davenport	State IA	
Zip Code 52802-3039	Purpose of Disbursement T-shirt Expense	Transaction ID : B-S-735
Candidate Name	Category/Type 006	
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)	[MEMO ITEM] Subitemization of 1st Community Bank Visa(06/02/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Concord		Date of Disbursement MM / DD / YYYY 04 / 25 / 2014
Mailing Address 430 Broadway Street		Amount of Each Disbursement this Period 18.9
City Cape Girardeau	State MO	
Zip Code 63701-5622	Purpose of Disbursement Printing Expense	Transaction ID : B-S-729
Candidate Name	Category/Type 003	
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)	[MEMO ITEM] Subitemization of 1st Community Bank Visa(06/02/14)
State: District:		

Full Name (Last, First, Middle Initial) C. Concord		Date of Disbursement MM / DD / YYYY 05 / 14 / 2014
Mailing Address 430 Broadway Street		Amount of Each Disbursement this Period 121.29
City Cape Girardeau	State MO	
Zip Code 63701-5622	Purpose of Disbursement Printing Expense	Transaction ID : B-S-734
Candidate Name	Category/Type 003	
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)	[MEMO ITEM] Subitemization of 1st Community Bank Visa(06/02/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Stev-Mark		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 2125 William Street		Amount of Each Disbursement this Period 166.12
City Cape Girardeau	State MO	
Zip Code 63703-5817	Purpose of Disbursement Campaign Sponsored Art Competi	Transaction ID : B-S-728
Candidate Name	007 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of 1st Community Bank Visa(06/02/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Stev-Mark		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 2125 William Street		Amount of Each Disbursement this Period 166.23
City Cape Girardeau	State MO	
Zip Code 63703-5817	Purpose of Disbursement Campaign Sponsored Art Competi	Transaction ID : B-S-733
Candidate Name	007 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of 1st Community Bank Visa(06/02/14)
State: District:		

Full Name (Last, First, Middle Initial) c. 1st Community Bank Visa		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address PO Box 4512		Amount of Each Disbursement this Period 186.74
City Carol Stream	State IL	
Zip Code 60197-4512	Purpose of Disbursement Credit Card: See below	Transaction ID : B-E-36684
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	186.74
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 97 OF 149			
	<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)
Jason Smith for Congress

A. Break Time

Full Name (Last, First, Middle Initial)
Mailing Address 420 Norht Main

City Sikeston State MO Zip Code 63801

Purpose of Disbursement Fuel Expense

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 27 / 2014

Amount of Each Disbursement this Period: 21.62

Transaction ID : B-S-724

[MEMO ITEM]
Subitemization of 1st Community Bank Visa(06/02/14)

B. Rhodes 101 Stops

Full Name (Last, First, Middle Initial)
Mailing Address 3140 Nash Road

City Scott City State MO Zip Code 63780-9600

Purpose of Disbursement Fuel Expense

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 01 / 2014

Amount of Each Disbursement this Period: 46.58

Transaction ID : B-S-726

[MEMO ITEM]
Subitemization of 1st Community Bank Visa(06/02/14)

c. Ruby Tuesday

Full Name (Last, First, Middle Initial)
Mailing Address 2387 Alcey Way

City Nixa State MO Zip Code 65714-7147

Purpose of Disbursement Political Meal

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 26 / 2014

Amount of Each Disbursement this Period: 23.57

Transaction ID : B-S-723

[MEMO ITEM]
Subitemization of 1st Community Bank Visa(06/02/14)

SUBTOTAL of Disbursements This Page (optional)..... 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Ameren Union Electric		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address PO Box 66529		Amount of Each Disbursement this Period 142.08
City Saint Louis	State MO	
Zip Code 63166-6529	Purpose of Disbursement Utilities Expense	Transaction ID : B-E-36350
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Ameren Union Electric		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address PO Box 66529		Amount of Each Disbursement this Period 87.63
City Saint Louis	State MO	
Zip Code 63166-6529	Purpose of Disbursement Utilities Expense	Transaction ID : B-E-36474
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Ameren Union Electric		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address PO Box 66529		Amount of Each Disbursement this Period 78.55
City Saint Louis	State MO	
Zip Code 63166-6529	Purpose of Disbursement Utilities Expense	Transaction ID : B-E-36676
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	308.26
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 99 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. AMS Mini Storage		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 1606 N Kings Highway Street		Amount of Each Disbursement this Period 70 Transaction ID : B-E-36377
City Cape Girardeau	State MO	
Zip Code 63701-2120	Purpose of Disbursement Storage Rental Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. AMS Mini Storage		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address 1606 N Kings Highway Street		Amount of Each Disbursement this Period 70 Transaction ID : B-E-36513
City Cape Girardeau	State MO	
Zip Code 63701-2120	Purpose of Disbursement Storage Rental Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. AMS Mini Storage		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address 1606 N Kings Highway Street		Amount of Each Disbursement this Period 70 Transaction ID : B-E-36766
City Cape Girardeau	State MO	
Zip Code 63701-2120	Purpose of Disbursement Storage Rental Expense	Category/ Type 001
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).....	210.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Aristotle International Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 1724.4 Transaction ID : B-E-36457
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Computer Software Expense 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address PO Box 536216		Amount of Each Disbursement this Period 213.94 Transaction ID : B-E-36456
City Atlanta State GA Zip Code 30353-6216	Purpose of Disbursement Phone Expense 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address PO Box 536216		Amount of Each Disbursement this Period 164.24 Transaction ID : B-E-36623
City Atlanta State GA Zip Code 30353-6216	Purpose of Disbursement Phone Expense 001 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).....	2102.58
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 101 OF 149	
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Axiom Strategies, LLC		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 1251 NW Briarcliff Parkway Suite 85		Amount of Each Disbursement this Period 5000 Transaction ID : B-E-36340
City Kansas City State MO Zip Code 64116-1780	Purpose of Disbursement Operational and Strategic Consulting Candidate Name Category/Type 001	
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify)	

Full Name (Last, First, Middle Initial) B. Axiom Strategies, LLC		Date of Disbursement MM / DD / YYYY 04 / 15 / 2014
Mailing Address 1251 NW Briarcliff Parkway Suite 85		Amount of Each Disbursement this Period 10000 Transaction ID : B-E-36420
City Kansas City State MO Zip Code 64116-1780	Purpose of Disbursement Operational and Strategic Consulting Candidate Name Category/Type 001	
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify)	

Full Name (Last, First, Middle Initial) c. Axiom Strategies, LLC		Date of Disbursement MM / DD / YYYY 05 / 02 / 2014
Mailing Address 1251 NW Briarcliff Parkway Suite 85		Amount of Each Disbursement this Period 2500 Transaction ID : B-E-36466
City Kansas City State MO Zip Code 64116-1780	Purpose of Disbursement Operational and Strategic Consulting Candidate Name Category/Type 001	
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	17500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Barklage and Knodell		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 7925 Clayton Road Suite 200		Amount of Each Disbursement this Period 5000 Transaction ID : B-E-36341
City Saint Louis	State MO	
Zip Code 63117-1369	Purpose of Disbursement Operational and Strategic Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Barklage and Knodell		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 7925 Clayton Road Suite 200		Amount of Each Disbursement this Period 2500 Transaction ID : B-E-36376
City Saint Louis	State MO	
Zip Code 63117-1369	Purpose of Disbursement Operational and Strategic Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Barklage and Knodell		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 7925 Clayton Road Suite 200		Amount of Each Disbursement this Period 10000 Transaction ID : B-E-36419
City Saint Louis	State MO	
Zip Code 63117-1369	Purpose of Disbursement Operational and Strategic Consulting	Category/ Type 001
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).....	17500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 149	
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Barklage and Knodell		Date of Disbursement MM / DD / YYYY 05 / 05 / 2014
Mailing Address 7925 Clayton Road Suite 200		Amount of Each Disbursement this Period 2500 Transaction ID : B-E-36475
City Saint Louis	State MO	
Zip Code 63117-1369	Purpose of Disbursement Operational and Strategic Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Begley, Young, Unterreiner and White		Date of Disbursement MM / DD / YYYY 04 / 15 / 2014
Mailing Address 2103 Themis Street		Amount of Each Disbursement this Period 1277.45 Transaction ID : B-E-36392
City Cape Girardeau	State MO	
Zip Code 63701-5123	Purpose of Disbursement Payroll Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Begley, Young, Unterreiner and White		Date of Disbursement MM / DD / YYYY 04 / 30 / 2014
Mailing Address 2103 Themis Street		Amount of Each Disbursement this Period 1277.45 Transaction ID : B-E-36528
City Cape Girardeau	State MO	
Zip Code 63701-5123	Purpose of Disbursement Payroll Expense	Category/ Type 001
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).....	5054.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Begley, Young, Unterreiner and White			Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 2103 Themis Street			Amount of Each Disbursement this Period 1277.45 Transaction ID : B-E-36524
City Cape Girardeau	State MO	Zip Code 63701-5123	
Purpose of Disbursement Payroll Expense		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Begley, Young, Unterreiner and White			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 2103 Themis Street			Amount of Each Disbursement this Period 495 Transaction ID : B-E-36536
City Cape Girardeau	State MO	Zip Code 63701-5123	
Purpose of Disbursement Accountant Payroll Prep Expense		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. Begley, Young, Unterreiner and White			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 2103 Themis Street			Amount of Each Disbursement this Period 1277.45 Transaction ID : B-E-36624
City Cape Girardeau	State MO	Zip Code 63701-5123	
Purpose of Disbursement Payroll Expense		Category/ Type 001	
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).....	3049.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 149	
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Begley, Young, Unterreiner and White		Date of Disbursement MM / DD / YYYY 06 / 13 / 2014
Mailing Address 2103 Themis Street		Amount of Each Disbursement this Period 1277.45 Transaction ID : B-E-36751
City Cape Girardeau	State MO	
Zip Code 63701-5123	Purpose of Disbursement Payroll Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Begley, Young, Unterreiner and White		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address 2103 Themis Street		Amount of Each Disbursement this Period 1277.45 Transaction ID : B-E-36935
City Cape Girardeau	State MO	
Zip Code 63701-5123	Purpose of Disbursement Payroll Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Bespoke Group		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address PO Box 7221		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-36347
City Columbia	State MO	
Zip Code 65205-7221	Purpose of Disbursement FEC Compliance	Category/ Type 001
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).....	3554.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 106 OF 149	
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Bespoke Group		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address PO Box 7221		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-36469
City Columbia	State MO	
Zip Code 65205-7221	Purpose of Disbursement FEC Compliance Service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Bespoke Group		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address PO Box 7221		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-36678
City Columbia	State MO	
Zip Code 65205-7221	Purpose of Disbursement FEC Compliance	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Campaign Concepts		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 24 S Jackson Street		Amount of Each Disbursement this Period 3000 Transaction ID : B-E-36342
City Perryville	State MO	
Zip Code 63775-2515	Purpose of Disbursement Fundraising Consulting Fee	Category/ Type 003
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).....	5000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 149	
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Campaign Concepts		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 24 S Jackson Street		Amount of Each Disbursement this Period 104.24 Transaction ID : B-E-36343
City Perryville State MO Zip Code 63775-2515	Purpose of Disbursement Fundraising Venue Rental Insurance Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Amount of Each Disbursement this Period 3000 Transaction ID : B-E-36468
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Campaign Concepts		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 24 S Jackson Street		Amount of Each Disbursement this Period 3000 Transaction ID : B-E-36468
City Perryville State MO Zip Code 63775-2515	Purpose of Disbursement Operational and Strategic Consulting Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Amount of Each Disbursement this Period 3000 Transaction ID : B-E-36510
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Campaign Concepts		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address 24 S Jackson Street		Amount of Each Disbursement this Period 3000 Transaction ID : B-E-36510
City Perryville State MO Zip Code 63775-2515	Purpose of Disbursement Fundraising Consulting Fee Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Amount of Each Disbursement this Period 6104.24
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	6104.24
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 108 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Campaign Concepts		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 24 S Jackson Street		Amount of Each Disbursement this Period 3000 Transaction ID : B-E-36649
City Perryville State MO Zip Code 63775-2515	Purpose of Disbursement Fundraising Consulting Fee Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 281.65 Transaction ID : B-E-36416
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Food and Beverage Expenses Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 417.39 Transaction ID : B-E-36531
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Political Meal Expense Candidate Name Category/Type 003	
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).....	3699.04
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 109 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 288.2 Transaction ID : B-E-36781
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Food and Beverage Expense Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Charter Communications		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1620 N Kings Highway Street		Amount of Each Disbursement this Period 307.25 Transaction ID : B-E-36351
City Cape Girardeau State MO Zip Code 63701-2120	Purpose of Disbursement Internet and Telephone Expense Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Charter Communications		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 1620 N Kings Highway Street		Amount of Each Disbursement this Period 307.42 Transaction ID : B-E-36498
City Cape Girardeau State MO Zip Code 63701-2120	Purpose of Disbursement Internet and Telephone Expense Candidate Name Category/Type 001	
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).....	902.87
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 110 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Charter Communications		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 1620 N Kings Highway Street		Amount of Each Disbursement this Period 307.42 Transaction ID : B-E-36680
City Cape Girardeau	State MO	
Zip Code 63701-2120	Purpose of Disbursement Internet and Phone Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Complete Campaigns		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2014
Mailing Address 3635 Ruffin Road Floor 3		Amount of Each Disbursement this Period 25 Transaction ID : B-E-36454
City San Diego	State CA	
Zip Code 92123-1880	Purpose of Disbursement Credit Card Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Complete Campaigns		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 3635 Ruffin Road Floor 3		Amount of Each Disbursement this Period 1.25 Transaction ID : B-E-36431
City San Diego	State CA	
Zip Code 92123-1880	Purpose of Disbursement Credit Card Fee Expense	Category/ Type 001
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).....	333.67
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 111 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Complete Campaigns		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 3635 Ruffin Road Floor 3		Amount of Each Disbursement this Period 5
City San Diego State CA Zip Code 92123-1880	Purpose of Disbursement Credit Card Fee Expense	
Candidate Name	001 Category/Type	Transaction ID : B-E-36622
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Complete Campaigns		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 3635 Ruffin Road Floor 3		Amount of Each Disbursement this Period 10.5
City San Diego State CA Zip Code 92123-1880	Purpose of Disbursement Credit Card Fee	
Candidate Name	001 Category/Type	Transaction ID : B-E-36689
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Complete Campaigns		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address 3635 Ruffin Road Floor 3		Amount of Each Disbursement this Period 1.5
City San Diego State CA Zip Code 92123-1880	Purpose of Disbursement Credit Card Fee	
Candidate Name	001 Category/Type	Transaction ID : B-E-36737
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) 17.00
TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Complete Campaigns		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 3635 Ruffin Road Floor 3		Amount of Each Disbursement this Period 57.5 Transaction ID : B-E-36742
City San Diego State CA Zip Code 92123-1880	Purpose of Disbursement Credit Card Fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Complete Campaigns		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 3635 Ruffin Road Floor 3		Amount of Each Disbursement this Period 205 Transaction ID : B-E-36804
City San Diego State CA Zip Code 92123-1880	Purpose of Disbursement Credit Card Fee Expense 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Complete Campaigns		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 3635 Ruffin Road Floor 3		Amount of Each Disbursement this Period 7.5 Transaction ID : B-E-36805
City San Diego State CA Zip Code 92123-1880	Purpose of Disbursement Credit Card Fee 001 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).....	270.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. Complete Campaigns		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>20</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	06		20		2014
M M	/	D D	/	Y Y Y Y								
06		20		2014								
Mailing Address 3635 Ruffin Road Floor 3		Amount of Each Disbursement this Period										
City San Diego	State CA	Zip Code 92123-1880										
Purpose of Disbursement Credit Card Fee	<table border="1"> <tr> <td>001</td> </tr> </table>		001									
001												
Candidate Name	Category/Type											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												
		Transaction ID : B-E-36839										

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. Complete Campaigns		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>26</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	06		26		2014
M M	/	D D	/	Y Y Y Y								
06		26		2014								
Mailing Address 3635 Ruffin Road Floor 3		Amount of Each Disbursement this Period										
City San Diego	State CA	Zip Code 92123-1880										
Purpose of Disbursement Credit Card Fee	<table border="1"> <tr> <td>001</td> </tr> </table>		001									
001												
Candidate Name	Category/Type											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												
		Transaction ID : B-E-36877										

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. Complete Campaigns		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>30</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	06		30		2014
M M	/	D D	/	Y Y Y Y								
06		30		2014								
Mailing Address 3635 Ruffin Road Floor 3		Amount of Each Disbursement this Period										
City San Diego	State CA	Zip Code 92123-1880										
Purpose of Disbursement Credit Card Fee	<table border="1"> <tr> <td>001</td> </tr> </table>		001									
001												
Candidate Name	Category/Type											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												
		Transaction ID : B-E-36897										

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td>105.00</td> </tr> </table>	105.00
105.00		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

**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 114 OF 149	
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Complete Campaigns		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 3635 Ruffin Road Floor 3		Amount of Each Disbursement this Period 50
City San Diego	State CA	Zip Code 92123-1880
Purpose of Disbursement Credit Card Fee Expense	Category/Type 001	
Candidate Name		Transaction ID : B-E-36939
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Dent County Fall Festival Assn		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address PO Box 972		Amount of Each Disbursement this Period 220
City Salem	State MO	Zip Code 65560-0972
Purpose of Disbursement Fair Program Ad Expense	Category/Type 004	
Candidate Name		Transaction ID : B-E-36382
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. Dent County Republican Central Committee		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 177 Dent County Road 2110		Amount of Each Disbursement this Period 300
City Lecoma	State MO	Zip Code 65401-8646
Purpose of Disbursement Event Sponsorship Expense	Category/Type	
Candidate Name		Transaction ID : B-E-36375
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)	570.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 115 OF 149	
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. DeSoto Chamber of Commerce		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address 47 Jefferson Square		Amount of Each Disbursement this Period 110
City De Soto State MO Zip Code 63020-1031	Purpose of Disbursement Chamber Dues Expense	Transaction ID : B-E-36753
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Direct Mail Systems		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 12450 Automobile Boulevard		Amount of Each Disbursement this Period 960
City Clearwater State FL Zip Code 33762-4427	Purpose of Disbursement Postage Expense	Transaction ID : B-E-36479
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Direct Mail Systems		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 12450 Automobile Boulevard		Amount of Each Disbursement this Period 2878.83
City Clearwater State FL Zip Code 33762-4427	Purpose of Disbursement Mailer Expense	Transaction ID : B-E-36679
Candidate Name	Category/Type 003	
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).....	3948.83
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 116 OF 149	
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. DSW Development		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 101 Farrar Drive		Amount of Each Disbursement this Period 1500 Transaction ID : B-E-36353
City Cape Girardeau	State MO	
Zip Code 63701-4905	Purpose of Disbursement Office Rent Expenses	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. DSW Development		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 101 Farrar Drive		Amount of Each Disbursement this Period 1500 Transaction ID : B-E-36467
City Cape Girardeau	State MO	
Zip Code 63701-4905	Purpose of Disbursement Office Rental Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. DSW Development		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 101 Farrar Drive		Amount of Each Disbursement this Period 1500 Transaction ID : B-E-36662
City Cape Girardeau	State MO	
Zip Code 63701-4905	Purpose of Disbursement Office Rent Expense	Category/ Type 001
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).....	4500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 117 OF 149	
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Enterprise Rent-A-Car		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address PO Box 16230		Amount of Each Disbursement this Period 71.32
City Saint Louis State MO Zip Code 63105-0930	Purpose of Disbursement Vehicle Rental Expense	
Candidate Name	Category/Type 002	Transaction ID : B-E-36455
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Fedex		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address PO Box 1140		Amount of Each Disbursement this Period 97.8
City Memphis State TN Zip Code 38101-1140	Purpose of Disbursement Shipping Expenses	
Candidate Name	Category/Type 001	Transaction ID : B-E-36407
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Fedex		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address PO Box 1140		Amount of Each Disbursement this Period 179.52
City Memphis State TN Zip Code 38101-1140	Purpose of Disbursement Shipping Expenses	
Candidate Name	Category/Type 001	Transaction ID : B-E-36483
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).....	348.64
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 118 OF 149	
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Fedex		Date of Disbursement MM / DD / YYYY 06 / 11 / 2014
Mailing Address PO Box 1140		Amount of Each Disbursement this Period 18.01
City Memphis	State TN	
Zip Code 38101-1140	Purpose of Disbursement Shipping Expense	Transaction ID : B-E-36767
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Grand Valley Consulting LLC		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 213 Ashby Street		Amount of Each Disbursement this Period 2935.04
City Alexandria	State VA	
Zip Code 22305-2902	Purpose of Disbursement Itemized: See Below	Transaction ID : B-E-36344
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) c. Johnny's Half Shell		Date of Disbursement MM / DD / YYYY 02 / 12 / 2014
Mailing Address 400 N Capitol Street NW		Amount of Each Disbursement this Period 390
City Washington	State DC	
Zip Code 20001-1511	Purpose of Disbursement Food and Beverage Expense	Transaction ID : B-S-664
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Grand Valley Consulting LLC(04/01/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2953.05
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 119 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Fedex		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address PO Box 1140		Amount of Each Disbursement this Period 14.92
City Memphis	State TN	
Zip Code 38101-1140	Purpose of Disbursement Shipping Expense	Transaction ID : B-S-665
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Grand Valley Consulting LLC(04/01/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Fedex		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address PO Box 1140		Amount of Each Disbursement this Period 15.06
City Memphis	State TN	
Zip Code 38101-1140	Purpose of Disbursement Shipping Expense	Transaction ID : B-S-666
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Grand Valley Consulting LLC(04/01/14)
State: District:		

Full Name (Last, First, Middle Initial) C. Fedex		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address PO Box 1140		Amount of Each Disbursement this Period 15.06
City Memphis	State TN	
Zip Code 38101-1140	Purpose of Disbursement Shipping Expense	Transaction ID : B-S-667
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Grand Valley Consulting LLC(04/01/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Grand Valley Consulting LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 213 Ashby Street			Amount of Each Disbursement this Period 2945.68
City Alexandria	State VA	Zip Code 22305-2902	
Purpose of Disbursement Operational and Strategic Consulting		Category/ Type 003	Transaction ID : B-E-36384
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)		Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:			

Full Name (Last, First, Middle Initial) B. Johnny's Half Shell			Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 400 N Capitol Street NW			Amount of Each Disbursement this Period 400.5
City Washington	State DC	Zip Code 20001-1511	
Purpose of Disbursement Food and Beverage Expense		Category/ Type 003	Transaction ID : B-S-668
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)		[MEMO ITEM] Subitemization of Grand Valley Consulting LLC(04/08/14)
State: District:			

Full Name (Last, First, Middle Initial) c. Fedex			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address PO Box 1140			Amount of Each Disbursement this Period 15.06
City Memphis	State TN	Zip Code 38101-1140	
Purpose of Disbursement Shipping Expense		Category/ Type 003	Transaction ID : B-S-669
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)		[MEMO ITEM] Subitemization of Grand Valley Consulting LLC(04/08/14)
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	2945.68
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 121 OF 149	
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Fedex		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address PO Box 1140		Amount of Each Disbursement this Period 15.06
City Memphis State TN Zip Code 38101-1140	Purpose of Disbursement Shipping Expense 003 Category/Type	
Candidate Name		Transaction ID : B-S-670 [MEMO ITEM] Subitemization of Grand Valley Consulting LLC(04/08/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Fedex		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address PO Box 1140		Amount of Each Disbursement this Period 15.06
City Memphis State TN Zip Code 38101-1140	Purpose of Disbursement Shipping Expense 003 Category/Type	
Candidate Name		Transaction ID : B-S-671 [MEMO ITEM] Subitemization of Grand Valley Consulting LLC(04/08/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Grand Valley Consulting LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 213 Ashby Street		Amount of Each Disbursement this Period 3042.96
City Alexandria State VA Zip Code 22305-2902	Purpose of Disbursement Itemized: See Below 003 Category/Type	
Candidate Name		Transaction ID : B-E-36478 Original vendors exceeding reporting threshold itemized as memo transactions.
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).....	3042.96
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 122 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Johnny's Half Shell		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 400 N Capitol Street NW		Amount of Each Disbursement this Period 100 Transaction ID : B-S-673
City Washington State DC Zip Code 20001-1511	Purpose of Disbursement Venue Deposit 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Subitemization of Grand Valley Consulting LLC(05/05/14)
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Johnny's Half Shell		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 400 N Capitol Street NW		Amount of Each Disbursement this Period 400.5 Transaction ID : B-S-674
City Washington State DC Zip Code 20001-1511	Purpose of Disbursement Food and Beverage Expense 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Subitemization of Grand Valley Consulting LLC(05/05/14)
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Fedex		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address PO Box 1140		Amount of Each Disbursement this Period 27.4 Transaction ID : B-S-675
City Memphis State TN Zip Code 38101-1140	Purpose of Disbursement Shipping Expense 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Subitemization of Grand Valley Consulting LLC(05/05/14)
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Fedex		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2014
Mailing Address PO Box 1140		Amount of Each Disbursement this Period 15.06
City Memphis	State TN	Zip Code 38101-1140
Purpose of Disbursement Shipping Expense	Category/ Type 003	
Candidate Name	Transaction ID : B-S-676	
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:	[MEMO ITEM] Subitemization of Grand Valley Consulting LLC(05/05/14)	

Full Name (Last, First, Middle Initial) B. Grandad's Deli		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address PO Box 46		Amount of Each Disbursement this Period 600
City Caruthersville	State MO	Zip Code 63830-0046
Purpose of Disbursement Food and Beverage Expense	Category/ Type 003	
Candidate Name	Transaction ID : B-E-36526	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address PO Box 37941		Amount of Each Disbursement this Period 489.1
City Hartford	State CT	Zip Code 06176-7941
Purpose of Disbursement Federal Tax Deposit	Category/ Type 001	
Candidate Name	Transaction ID : B-E-36322	
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).....	1089.10
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 124 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address PO Box 37941		Amount of Each Disbursement this Period 489.1
City Hartford	State CT	Zip Code 06176-7941
Purpose of Disbursement Federal Tax Deposit	Candidate Name 001 Category/ Type	Transaction ID : B-E-36421
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: _____ District: _____	

Full Name (Last, First, Middle Initial) B. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address PO Box 37941		Amount of Each Disbursement this Period 978.2
City Hartford	State CT	Zip Code 06176-7941
Purpose of Disbursement Federal Tax Deposit	Candidate Name 001 Category/ Type	Transaction ID : B-E-36484
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: _____ District: _____	

Full Name (Last, First, Middle Initial) c. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address PO Box 37941		Amount of Each Disbursement this Period 978.2
City Hartford	State CT	Zip Code 06176-7941
Purpose of Disbursement Federal Tax Deposit	Candidate Name 001 Category/ Type	Transaction ID : B-E-36738
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).....	2445.50
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 125 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. J Marie's Flowers and Boutique		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 149 W Yoakum Avenue		Amount of Each Disbursement this Period 89.23
City Chaffee State MO Zip Code 63740-1136	Purpose of Disbursement Constituent Funeral Flowers	
Candidate Name	Category/Type	Transaction ID : B-E-36395
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. J Marie's Flowers and Boutique		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address 149 W Yoakum Avenue		Amount of Each Disbursement this Period 85.23
City Chaffee State MO Zip Code 63740-1136	Purpose of Disbursement Contituent Funeral Flowers	
Candidate Name	Category/Type 001	Transaction ID : B-E-36768
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) c. J Marie's Flowers and Boutique		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2014
Mailing Address 149 W Yoakum Avenue		Amount of Each Disbursement this Period 115.98
City Chaffee State MO Zip Code 63740-1136	Purpose of Disbursement Constituent Funeral Flowers	
Candidate Name	Category/Type	Transaction ID : B-E-36808
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).....	290.44
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 126 OF 149	
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Jefferson County Republican Central Committee		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address PO Box 284		Amount of Each Disbursement this Period 100 Transaction ID : B-E-36422
City High Ridge State MO Zip Code 63049-0284	Purpose of Disbursement Lincoln Day Ad Expense Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Jefferson County Republican Central Committee		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address PO Box 284		Amount of Each Disbursement this Period 170 Transaction ID : B-E-36425
City High Ridge State MO Zip Code 63049-0284	Purpose of Disbursement Political Event Ticket Expense Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Kenny Rogers Benefit Concert		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address PO Box 1266		Amount of Each Disbursement this Period 250 Transaction ID : B-E-36530
City Sikeston State MO Zip Code 63801-1266	Purpose of Disbursement Event Sponsorship Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	520.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 149			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Kinetic 5		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address PO Box 3524		Amount of Each Disbursement this Period 228.9
City Springfield	State MO	
Zip Code 65808-3524	Purpose of Disbursement Website Hosting	Transaction ID : B-E-36402
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Kinetic 5		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address PO Box 3524		Amount of Each Disbursement this Period 100
City Springfield	State MO	
Zip Code 65808-3524	Purpose of Disbursement Web Hosting Expense	Transaction ID : B-E-36423
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Kinetic 5		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address PO Box 3524		Amount of Each Disbursement this Period 100
City Springfield	State MO	
Zip Code 65808-3524	Purpose of Disbursement Web Hosting Expense	Transaction ID : B-E-36750
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	428.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Kinetic 5		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address PO Box 3524		Amount of Each Disbursement this Period 100 Transaction ID : B-E-36784
City Springfield	State MO	Zip Code 65808-3524
Purpose of Disbursement Web Host Expense	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Minuteman Press		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 121 E Columbia Street		Amount of Each Disbursement this Period 526.96 Transaction ID : B-E-36349
City Farmington	State MO	Zip Code 63640-3104
Purpose of Disbursement Mailer Expense	Category/ Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Minuteman Press		Date of Disbursement MM / DD / YYYY 05 / 13 / 2014
Mailing Address 121 E Columbia Street		Amount of Each Disbursement this Period 154 Transaction ID : B-E-36512
City Farmington	State MO	Zip Code 63640-3104
Purpose of Disbursement Mailer Expense	Category/ Type 003	
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).....	780.96
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 129 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Minuteman Press		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 121 E Columbia Street		Amount of Each Disbursement this Period 286.63 Transaction ID : B-E-36532
City Farmington State MO Zip Code 63640-3104	Purpose of Disbursement Mailer Expense Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Minuteman Press		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 121 E Columbia Street		Amount of Each Disbursement this Period 463.58 Transaction ID : B-E-36545
City Farmington State MO Zip Code 63640-3104	Purpose of Disbursement Mailer Expense Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Minuteman Press		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 121 E Columbia Street		Amount of Each Disbursement this Period 935.29 Transaction ID : B-E-36740
City Farmington State MO Zip Code 63640-3104	Purpose of Disbursement Mailer Expense Candidate Name Category/Type 003	
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).....	1685.50
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 130 OF 149	
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Missouri Department of Revenue		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address PO Box 999		Amount of Each Disbursement this Period 367 Transaction ID : B-E-36443
City Jefferson City State MO Zip Code 65108-0999	Purpose of Disbursement State Tax Deposit Expense Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Amount of Each Disbursement this Period 298.35 Transaction ID : B-E-36444
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. MO Division of Employment Security		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address PO Box 888		Amount of Each Disbursement this Period 298.35 Transaction ID : B-E-36444
City Jefferson City State MO Zip Code 65102-0888	Purpose of Disbursement MO Unemployment Deposit Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Amount of Each Disbursement this Period 1150 Transaction ID : B-E-36328
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Owens Dynamic		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address PO Box 1985		Amount of Each Disbursement this Period 1150 Transaction ID : B-E-36328
City Ozark State MO Zip Code 65721-1985	Purpose of Disbursement Operational and Strategic Consulting Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Amount of Each Disbursement this Period 1815.35
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1815.35
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 131 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Owens Dynamic		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address PO Box 1985		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-36433
City Ozark	State MO	
Zip Code 65721-1985	Purpose of Disbursement Operational and Strategic Consulting Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Owens Dynamic		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address PO Box 1985		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-36544
City Ozark	State MO	
Zip Code 65721-1985	Purpose of Disbursement Operational and Strategic Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Owens Dynamic		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address PO Box 1985		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-36824
City Ozark	State MO	
Zip Code 65721-1985	Purpose of Disbursement Statagic and Operational Consultanting	Category/ Type 001
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).....	3000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Sam's Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 232 Shirley Drive		Amount of Each Disbursement this Period 152.55 Transaction ID : B-E-36400
City Cape Girardeau	State MO	
Zip Code 63701-8478	Purpose of Disbursement Parade Candy Expense	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Sam's Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 232 Shirley Drive		Amount of Each Disbursement this Period 67.02 Transaction ID : B-E-36442
City Cape Girardeau	State MO	
Zip Code 63701-8478	Purpose of Disbursement Campaign Office Supplies Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Sam's Club		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 232 Shirley Drive		Amount of Each Disbursement this Period 167.62 Transaction ID : B-E-36462
City Cape Girardeau	State MO	
Zip Code 63701-8478	Purpose of Disbursement Parade Candy Expense	Category/ Type 007
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).....	387.19
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 133 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Sam's Club		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 232 Shirley Drive		Amount of Each Disbursement this Period 228.52 Transaction ID : B-E-36471
City Cape Girardeau	State MO	
Zip Code 63701-8478	Purpose of Disbursement Food and Beverage Expense	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Sam's Club		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 232 Shirley Drive		Amount of Each Disbursement this Period 230.44 Transaction ID : B-E-36497
City Cape Girardeau	State MO	
Zip Code 63701-8478	Purpose of Disbursement Parade Candy Expense	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Sam's Club		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2014
Mailing Address 232 Shirley Drive		Amount of Each Disbursement this Period 106.84 Transaction ID : B-E-36806
City Cape Girardeau	State MO	
Zip Code 63701-8478	Purpose of Disbursement Parade Candy Expense	Category/ Type 007
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).....	565.80
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 134 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Sam's Club		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2014
Mailing Address 232 Shirley Drive		Amount of Each Disbursement this Period 37.75 Transaction ID : B-E-36807
City Cape Girardeau	State MO	
Zip Code 63701-8478	Purpose of Disbursement Office Supplies Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Spiceberry Flowers, Gifts, and Catering		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 114 N Union Street		Amount of Each Disbursement this Period 530 Transaction ID : B-E-36346
City Mountain Grove	State MO	
Zip Code 65711-1724	Purpose of Disbursement Food and Beverage Expense	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. State Farm Insurance		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 204 Ferguson Street		Amount of Each Disbursement this Period 109.23 Transaction ID : B-E-36352
City Poplar Bluff	State MO	
Zip Code 63901-4900	Purpose of Disbursement Rental Insurance Expense	Category/ Type 001
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).....	676.98
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 135 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Ste. Genevieve Chamber of Commerce			Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 51 S 3rd Street			Amount of Each Disbursement this Period 250 Transaction ID : B-E-36496
City Ste Genevieve	State MO	Zip Code 63670-1601	
Purpose of Disbursement Membership Dues		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. USPS			Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 320 N Frederick Street			Amount of Each Disbursement this Period 220 Transaction ID : B-E-36445
City Cape Girardeau	State MO	Zip Code 63701-9998	
Purpose of Disbursement Presort Permit Renewal Fee		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. Verizon Wireless			Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address PO Box 25505			Amount of Each Disbursement this Period 136.05 Transaction ID : B-E-36406
City Lehigh Valley	State PA	Zip Code 18002-5505	
Purpose of Disbursement Phone Expense		Category/ Type 001	
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).....	606.05
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 136 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement MM / DD / YYYY 04 / 10 / 2014
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 105.89 Transaction ID : B-E-36394
City Lehigh Valley	State PA	
Zip Code 18002-5505	Purpose of Disbursement Phone Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement MM / DD / YYYY 05 / 13 / 2014
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 105.89 Transaction ID : B-E-36511
City Lehigh Valley	State PA	
Zip Code 18002-5505	Purpose of Disbursement Phone Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 105.89 Transaction ID : B-E-36779
City Lehigh Valley	State PA	
Zip Code 18002-5505	Purpose of Disbursement Phone Expense	Category/ Type 001
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).....	317.67
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 137 OF 149	
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Victory Enterprises		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 5200 30th Street SW Suite 7		Amount of Each Disbursement this Period 10000.00 Transaction ID : B-E-36345
City Davenport State IA Zip Code 52802-3039	Purpose of Disbursement Operational and Strategic Consulting Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Victory Enterprises		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 5200 30th Street SW Suite 7		Amount of Each Disbursement this Period 2500.00 Transaction ID : B-E-36396
City Davenport State IA Zip Code 52802-3039	Purpose of Disbursement Operational and Strategic Consulting Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Victory Enterprises		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 5200 30th Street SW Suite 7		Amount of Each Disbursement this Period 2500.00 Transaction ID : B-E-36499
City Davenport State IA Zip Code 52802-3039	Purpose of Disbursement Operational and Strategic Consulting Expense Candidate Name Category/Type 001	
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)	10000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Melanie Bell		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address PO Box 919		Amount of Each Disbursement this Period 87.18 Transaction ID : B-E-36427
City Steelville	State MO	
Zip Code 65565-0919	Purpose of Disbursement Mileage Reimbursement	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Carrie Bock		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 1717 E Capitol Street SE Apt. 163		Amount of Each Disbursement this Period 296.62 Transaction ID : B-E-36749
City Washington	State DC	
Zip Code 20003-1786	Purpose of Disbursement Mileage Reimbursement	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Carrie Bock		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 1717 E Capitol Street SE Apt. 163		Amount of Each Disbursement this Period 94.65 Transaction ID : B-E-36840
City Washington	State DC	
Zip Code 20003-1786	Purpose of Disbursement Mileage Reimbursement	Category/ Type 002
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).....	478.45
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 139 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Tina Boettcher			Date of Disbursement MM / DD / YYYY 05 / 07 / 2014
Mailing Address 2645 Highway B			Amount of Each Disbursement this Period 146.03
City Perryville	State MO	Zip Code 63775-5742	
Purpose of Disbursement Inkind: Parade Decorations		Category/ Type	Transaction ID : B-I-36488
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Ross Branson			Date of Disbursement MM / DD / YYYY 04 / 10 / 2014
Mailing Address 2326 Three Chimneys Road Apt. A			Amount of Each Disbursement this Period 30
City Rolla	State MO	Zip Code 65401-2191	
Purpose of Disbursement Mileage Reimbursement		Category/ Type	Transaction ID : B-E-36393
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. Ross Branson			Date of Disbursement MM / DD / YYYY 05 / 22 / 2014
Mailing Address 2326 Three Chimneys Road Apt. A			Amount of Each Disbursement this Period 53.2
City Rolla	State MO	Zip Code 65401-2191	
Purpose of Disbursement Mileage Reimbursement		Category/ Type	Transaction ID : B-E-36551
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).....	229.23
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 140 OF 149	
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Amy Huber		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 1705 Pcr 206		Amount of Each Disbursement this Period 103.4 Transaction ID : B-E-36780
City Perryville	State MO	
Zip Code 63775-8871	Purpose of Disbursement Mileage Reimbursement	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Kristi J King		Date of Disbursement MM / DD / YYYY 04 / 14 / 2014
Mailing Address 868 Bella Vista Drive		Amount of Each Disbursement this Period 110 Transaction ID : B-E-36404
City Jackson	State MO	
Zip Code 63755-7807	Purpose of Disbursement Mileage Reimbursement	Category/ Type 002
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:	Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial) c. Kristi J King		Date of Disbursement MM / DD / YYYY 04 / 15 / 2014
Mailing Address 868 Bella Vista Drive		Amount of Each Disbursement this Period 50 Transaction ID : B-E-36417
City Jackson	State MO	
Zip Code 63755-7807	Purpose of Disbursement Campaign Event Ticket Reimbursement	Category/ Type 007
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:	Original vendors exceeding reporting threshold itemized as memo transactions.

SUBTOTAL of Disbursements This Page (optional).....	263.40
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 141 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Kristi J King		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 868 Bella Vista Drive		Amount of Each Disbursement this Period 220 Transaction ID : B-E-36472
City Jackson	State MO	
Zip Code 63755-7807	Purpose of Disbursement Mileage Reimbursement	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Kristi J King		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address 868 Bella Vista Drive		Amount of Each Disbursement this Period 72 Transaction ID : B-E-36509
City Jackson	State MO	
Zip Code 63755-7807	Purpose of Disbursement Mileage Reimbursement	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Kristi J King		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 868 Bella Vista Drive		Amount of Each Disbursement this Period 41 Transaction ID : B-E-36534
City Jackson	State MO	
Zip Code 63755-7807	Purpose of Disbursement Mileage Reimbursement	Category/ Type 002
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).....	333.00
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Kristi J King			Date of Disbursement MM / DD / YYYY 06 / 09 / 2014	
Mailing Address 868 Bella Vista Drive			Amount of Each Disbursement this Period 82.32	
City Jackson	State MO	Zip Code 63755-7807	Transaction ID : B-E-36739	
Purpose of Disbursement Mileage Reimbursement		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Kristi J King			Date of Disbursement MM / DD / YYYY 06 / 16 / 2014	
Mailing Address 868 Bella Vista Drive			Amount of Each Disbursement this Period 107.52	
City Jackson	State MO	Zip Code 63755-7807	Transaction ID : B-E-36782	
Purpose of Disbursement Mileage Reimbursement		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Dylan Lloyd			Date of Disbursement MM / DD / YYYY 04 / 01 / 2014	
Mailing Address 360 Dearmont Circle			Amount of Each Disbursement this Period 100.8	
City Cape Girardeau	State MO	Zip Code 63701-8504	Transaction ID : B-E-36338	
Purpose of Disbursement Mileage Reimbursement		Category/ Type 002		
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).....	290.64
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Dylan Lloyd			Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014	
Mailing Address 360 Dearmont Circle			Amount of Each Disbursement this Period 103.6	
City Cape Girardeau	State MO	Zip Code 63701-8504	Transaction ID : B-E-36500	
Purpose of Disbursement Mileage Reimbursement		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Dylan Lloyd			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014	
Mailing Address 360 Dearmont Circle			Amount of Each Disbursement this Period 108.08	
City Cape Girardeau	State MO	Zip Code 63701-8504	Transaction ID : B-E-36527	
Purpose of Disbursement Mileage Reimbursement		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Heather Peugh			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014	
Mailing Address 2316 Hammond Mill Lane			Amount of Each Disbursement this Period 111.1	
City West Plains	State MO	Zip Code 65775-6548	Transaction ID : B-E-36661	
Purpose of Disbursement Mileage Reimbursement		Category/ Type 002		
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).....	322.78
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 144 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Matthew Phillips		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 162 County Road 4221		Amount of Each Disbursement this Period 327.2 Transaction ID : B-E-36403
City Poplar Bluff	State MO	
Zip Code 63901-8053	Purpose of Disbursement Mileage Reimbursement	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Matthew Phillips		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 162 County Road 4221		Amount of Each Disbursement this Period 183 Transaction ID : B-E-36473
City Poplar Bluff	State MO	
Zip Code 63901-8053	Purpose of Disbursement Mileage Reimbursement	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Jenni Riegel		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 513 Ashley Drive		Amount of Each Disbursement this Period 36.96 Transaction ID : B-E-36492
City Rolla	State MO	
Zip Code 65401-8099	Purpose of Disbursement Mileage Reimbursement	Category/ Type 002
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).....	547.16
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 145 OF 149	
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Becca Schroeder		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 204 Hunters Ridge		Amount of Each Disbursement this Period 162.11 Transaction ID : B-E-36458
City Saint Charles	State MO	
Zip Code 63301-0429	Purpose of Disbursement Mileage Reimbursement	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Becca Schroeder		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 204 Hunters Ridge		Amount of Each Disbursement this Period 120.4 Transaction ID : B-E-36477
City Saint Charles	State MO	
Zip Code 63301-0429	Purpose of Disbursement Mileage Reimbursement	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Cassie Thomas		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 2016 Knob Lick Road		Amount of Each Disbursement this Period 126.44 Transaction ID : B-E-36535
City Farmington	State MO	
Zip Code 63640-7522	Purpose of Disbursement Mileage Reimbursement	Category/ Type 002
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).....	408.95
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 146 OF 149	
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Cassie Thomas		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 2016 Knob Lick Road		Amount of Each Disbursement this Period 69.29 Transaction ID : B-E-36783
City Farmington State MO Zip Code 63640-7522	Purpose of Disbursement Mileage Reimbursement Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Debbie Westrich		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 157 County Highway 223		Amount of Each Disbursement this Period 60 Transaction ID : B-E-36348
City Chaffee State MO Zip Code 63740-9149	Purpose of Disbursement Cleaning Service Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Debbie Westrich		Date of Disbursement MM / DD / YYYY 05 / 05 / 2014
Mailing Address 157 County Highway 223		Amount of Each Disbursement this Period 60 Transaction ID : B-E-36476
City Chaffee State MO Zip Code 63740-9149	Purpose of Disbursement Cleaning Service Category/Type 001	
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).....	189.29
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 147 OF 149			
	<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)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Debbie Westrich			Date of Disbursement MM / DD / YYYY 06 / 02 / 2014	
Mailing Address 157 County Highway 223			Amount of Each Disbursement this Period 60	
City Chaffee	State MO	Zip Code 63740-9149	Transaction ID : B-E-36681	
Purpose of Disbursement Cleaning Service		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B.			Date of Disbursement MM / DD / YYYY	
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: _____			

Full Name (Last, First, Middle Initial) C.			Date of Disbursement MM / DD / YYYY	
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).....	60.00
TOTAL This Period (last page this line number only).....	125180.94

**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 148 OF 149	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Texas County Republican Central Committee			Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 8707 Highway E			Amount of Each Disbursement this Period 1 Transaction ID : B-E-36432
City Houston	State MO	Zip Code 65483-1371	
Purpose of Disbursement State Committee Excess Contribution Refund		Category/Type 010	
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) 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		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y
Mailing Address			Amount of Each Disbursement this Period
City	State	Zip Code	
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).....	1.00
TOTAL This Period (last page this line number only).....	1.00

**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 149 OF 149			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Jason Smith for Congress

Full Name (Last, First, Middle Initial) A. Cory Gardner For Senate		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 9227 E Lincoln Avenue # 200-235		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-36401
City Lone Tree State CO Zip Code 80124-5506	Purpose of Disbursement Campaign Contribution Category/Type 011	
Candidate Name Cory Gardner For Senate	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) 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 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	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).....	1000.00
TOTAL This Period (last page this line number only).....	1000.00