

# 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

Billy Long for Congress

ADDRESS (number and street)

3246 E Ridgeview Street

Check if different than previously reported. (ACC)

Springfield

MO

65804-4076

2. FEC IDENTIFICATION NUMBER ▼

C C00460063

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

MO

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 Ron Neville

Signature of Treasurer Ron Neville

[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  
**Billy Long for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	245895.00	250715.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	245895.00	250715.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	75385.41	299779.60
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	75385.41	299779.60
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	746181.88	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Billy Long for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	168395.00	173215.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	168395.00	173215.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	77500.00	77500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	245895.00	250715.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	12000.00	12000.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	1067.73	1618.27
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	258962.73	264333.27

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	75385.41	299779.60
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	460.00	710.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	75845.41	300489.60

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	563064.56
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	258962.73
25. SUBTOTAL (add Line 23 and Line 24).....	822027.29
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	75845.41
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	746181.88

**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 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John E Raidel**

Mailing Address 5253 E Crown Park Lane

City Springfield State MO Zip Code 65809-3107

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

Name of Employer Ridewell Suspensions Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 13 / 2015

**Transaction ID : AD0F0E487F3A748F1B35**

Amount of Each Receipt this Period  
**2000.00**

Donation

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

Mailing Address 1525 E Republic Road Suite B155

City Springfield State MO Zip Code 65804-6528

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

Name of Employer Self Employed Occupation Investor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : AB10D21E7D2CA491C829**

Amount of Each Receipt this Period  
**2700.00**

Donation

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

Mailing Address PO Box 217

City Omaha State AR Zip Code 72662-0217

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2015

**Transaction ID : A58CB0914BE864FFD875**

Amount of Each Receipt this Period  
**2500.00**

Donation

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

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

**7200.00**

**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 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Jan Stahle**

Mailing Address 3114 Winged Foot Dr

City Nixa State MO Zip Code 65714-9499

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

Name of Employer Harry Cooper Supply Company Occupation Sales

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 23 / 2015

**Transaction ID : A5B329DCFCE9740A786A**

Amount of Each Receipt this Period  
250.00

Donation

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

Mailing Address PO Box 2298

City Branson West State MO Zip Code 65737-2298

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

Name of Employer Keller Williams Realty Occupation Realtor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 26 / 2015

**Transaction ID : A09C49A626E2448A5AEB**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 7701 Forsyth Blvd

City Saint Louis State MO Zip Code 63105-1875

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

Name of Employer Harbour Group Occupation Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : A6B4B9A39885B4CBD841**

Amount of Each Receipt this Period  
2700.00

Donation

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

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

3450.00

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

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

FOR LINE NUMBER: PAGE 7 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Donald Raphael**

Mailing Address 1200 E Woodhurst Drive  
Suite A400

City Springfield State MO Zip Code 65804-3746

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

Name of Employer Self Occupation Dentist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : A3DEECC37A8344BF0AB9**

Amount of Each Receipt this Period  
 100.00

Donation

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

Mailing Address 4500 E Farm Road 148

City Springfield State MO Zip Code 65809-2991

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

Name of Employer Med-Pay, Inc. Occupation Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : A5A123A2D825B44CF8CB**

Amount of Each Receipt this Period  
 2500.00

Donation

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

Mailing Address 2647 Cottonwood Rd

City Rogersville State MO Zip Code 65742-7408

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

Name of Employer The Larson Group Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2015

**Transaction ID : A1BF163EDE65D4C9390F**

Amount of Each Receipt this Period  
 2700.00

Donation

**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 8 OF 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Larry Burke**

Mailing Address 1644 S Broadway Avenue

City Springfield State MO Zip Code 65807-1942

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

Name of Employer Mercy Occupation Technician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
25.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 03 / 2015

**Transaction ID : AAF48768E7A0A473FBDF**

Amount of Each Receipt this Period  
 25.00

Donation

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Stanley M Herzog**

Mailing Address PO Box 1089

City Saint Joseph State MO Zip Code 64502-1089

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

Name of Employer Herzog Contracting Occupation Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : A5B6A1C8989244C5E8A0**

Amount of Each Receipt this Period  
 2700.00

Donation

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

Mailing Address 736 Splitrail Pass

City Branson West State MO Zip Code 65737-8441

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

Name of Employer Black Oak Amphitheater Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : AFA4DCAF95A1D400B979**

Amount of Each Receipt this Period  
 100.00

Donation

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

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

2825.00

**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 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Matthew Brooks**

Mailing Address 6654 Avignon Boulevard

City Falls Church State VA Zip Code 22043-1752

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

Name of Employer Republican Jewish Coalition Occupation Executive Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 20 / 2015

**Transaction ID : AE27767CE33294F07897**

Amount of Each Receipt this Period  
2700.00

Donation

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

Mailing Address 4411 E Berkeley Street

City Springfield State MO Zip Code 65809-3519

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

Name of Employer Self Occupation Dentist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : A5CB25B3F113A4C6A90E**

Amount of Each Receipt this Period  
2700.00

Donation

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

Mailing Address 615 S. New Ballas Road  
Floor 5

City Saint Louis State MO Zip Code 63141-8221

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

Name of Employer Mercy Occupation Regional President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : AF3221865DE294044B00**

Amount of Each Receipt this Period  
1000.00

Donation

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

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

6400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. David L Spalding**

Mailing Address 1325 Roller Road

City Rogersville State MO Zip Code 65742-8007

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : A69040ED2C6FB44D899D**

Amount of Each Receipt this Period  
 25.00

Donation

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

Mailing Address 1491 Wilder Drive

City Springfield State MO Zip Code 65804-2565

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

Name of Employer None Occupation Housewife

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2015

**Transaction ID : A60BC6696D6DD4EBFAEB**

Amount of Each Receipt this Period  
 2700.00

Donation

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

Mailing Address PO Box 1746

City Springfield State MO Zip Code 65801-1746

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

Name of Employer Meek Lumber Company Occupation Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2015

**Transaction ID : A04A4FFC1289B485BA2E**

Amount of Each Receipt this Period  
 500.00

Donation

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

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

**3225.00**

**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 108
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>Dr Larry Petersen</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 27 / 2015
Mailing Address 5276 S Stirling Way		<b>Transaction ID : A3AD7B59B896541E082C</b>
City Springfield	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer Self Employed	Occupation Physician	Donation
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

Full Name (Last, First, Middle Initial) <b>Terry Bassham</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 27 / 2015
Mailing Address 700 W 31st Street Suite 1902		<b>Transaction ID : ABA75508A503E406E8BA</b>
City Kansas City	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Information Requested	Occupation Information Requested	Donation
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>Mr. Eugene Schwartz</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 16 / 2015
Mailing Address 300 Nelson Avenue		<b>Transaction ID : A9D8EEAF8F645441DAF2</b>
City Neosho	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer K & S Wire Products	Occupation Executive	Donation
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Stan Crader**

Mailing Address 175 Lakeview Lane

City Jackson State MO Zip Code 63755-6922

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

Name of Employer Crader Distribution Company Occupation Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : A489F1D931F9342C586E**

Amount of Each Receipt this Period  
2500.00

Donation

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

Mailing Address 1220 S Weller Avenue

City Springfield State MO Zip Code 65804-0254

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

Name of Employer Husch Blackwell Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 03 / 2015

**Transaction ID : AEF6A4739A7724D34ADC**

Amount of Each Receipt this Period  
250.00

Donation

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

Mailing Address 2931 E Battlefield Street

City Springfield State MO Zip Code 65804-4015

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

Name of Employer Self Occupation Restaurateur

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : A8D14FF757F2144B5877**

Amount of Each Receipt this Period  
500.00

Donation

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

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

3250.00

**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 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Cindy Larson**

Mailing Address 1491 Wilder Drive

City Springfield State MO Zip Code 65804-2565

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

Name of Employer None Occupation Housewife

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 13 / 2015

**Transaction ID : A99094A9A4FDB4301856**

Amount of Each Receipt this Period  
2700.00

Donation

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

Mailing Address 3947 E Glen Abbey Drive

City Springfield State MO Zip Code 65809-4689

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

Name of Employer Leigh Environmental Occupation Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
50.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : A7E7A3C7A95884436A9C**

Amount of Each Receipt this Period  
50.00

Donation

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

Mailing Address 5367 S Castlebay Dr

City Springfield State MO Zip Code 65809-4667

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

Name of Employer Self Occupation Builder/Developer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 23 / 2015

**Transaction ID : A40B5AD81C75F41769B2**

Amount of Each Receipt this Period  
1000.00

Donation

**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 14 OF 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Lloyd Evans**

Mailing Address 295 Summer Road

City State Zip Code  
Kimberling City MO 65686-8366

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

Name of Employer Self Occupation Lefty's Pump & Drilling

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 19 / 2015

**Transaction ID : ACF2D67DE9B2C4808BFE**

Amount of Each Receipt this Period  
100.00

Donation

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

Mailing Address 1525 E Republic Rd Suite B-155

City State Zip Code  
Springfield MO 65804-6528

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

Name of Employer Self Employed Occupation Investor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : AEA2A6E39BBAB42C8A77**

Amount of Each Receipt this Period  
2700.00

Donation

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Stanley M Herzog**

Mailing Address PO Box 1089

City State Zip Code  
Saint Joseph MO 64502-1089

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

Name of Employer Herzog Contracting Occupation Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 27 / 2015

**Transaction ID : AEDF658F67976423EA3E**

Amount of Each Receipt this Period  
2700.00

Donation

**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 15 OF 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Bill McCoy**

Mailing Address 2131 W Republic Road

City Springfield State MO Zip Code 65807-5705

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

Name of Employer Xaxax Business Solutions Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 13 / 2015

**Transaction ID : A85C5E9F9C44F45E69BC**

Amount of Each Receipt this Period  
 1000.00

Donation

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

Mailing Address 1718 S Glenstone Avenue

City Springfield State MO Zip Code 65804-1508

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

Name of Employer Voss Autohaus Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : A04326679D7414A7C884**

Amount of Each Receipt this Period  
 300.00

Donation

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

Mailing Address 2660 Shelly Road

City Harleysville State PA Zip Code 19438-1229

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

Name of Employer Self Occupation Auctioneer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 01 / 03 / 2015

**Transaction ID : AC04410B509114820A5F**

Amount of Each Receipt this Period  
 50.00

Donation

**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 16 OF 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Jeff Layman**

Mailing Address 3769 E Eaglescliffe Drive

City Springfield State MO Zip Code 65809-4639

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

Name of Employer Morgan Stanley Occupation Financial Advisor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 23 / 2015

**Transaction ID : AB7207FE2C0AE40A2970**

Amount of Each Receipt this Period  
 1000.00

Donation

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

Mailing Address PO Box 217

City Omaha State AR Zip Code 72662-0217

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 13 / 2015

**Transaction ID : A18206023CEC54B909A2**

Amount of Each Receipt this Period  
 2700.00

Donation

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

Mailing Address 3494 E Bluff Point Drive

City Ozark State MO Zip Code 65721-6665

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

Name of Employer Christenson Transportation Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 14 / 2015

**Transaction ID : A40277F6709804A97BF5**

Amount of Each Receipt this Period  
 2700.00

Donation

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

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

6400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Ron Neville**

Mailing Address 3541 E Kingswood Drive

City Springfield State MO Zip Code 65809-4500

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

Name of Employer Self Employed Occupation Investor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 16 / 2015

**Transaction ID : AF82147E3D6D34023B62**

Amount of Each Receipt this Period  
2700.00

Donation

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

Mailing Address PO Box 140

City Stockton State MO Zip Code 65785-0140

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

Name of Employer Hammons Products Co. Occupation President & CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 03 / 2015

**Transaction ID : AB609A526B2BC4C2F90B**

Amount of Each Receipt this Period  
100.00

Donation

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

Mailing Address 1525 E Republic Rd Suite B-155

City Springfield State MO Zip Code 65804-6528

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

Name of Employer Self Employed Occupation Investor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : AB422BDF20D604B9DA41**

Amount of Each Receipt this Period  
2700.00

Donation

**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 18 OF 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Fredna B Mahaffey**

Mailing Address 3720 E Eaglescliffe Drive

City Springfield State MO Zip Code 65809-4639

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

Name of Employer None Occupation Housewife

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2015

**Transaction ID : A913AA8BC40534D5DB85**

Amount of Each Receipt this Period  
2700.00

Donation

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

Mailing Address 4824 S Bellhurst Avenue

City Springfield State MO Zip Code 65804-7594

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

Name of Employer Springfield Underground Occupation Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2015

**Transaction ID : A0C298BEE2BEC45BD98D**

Amount of Each Receipt this Period  
2700.00

Donation

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

Mailing Address 2342 E Fritts Lane

City Springfield State MO Zip Code 65804-3312

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

Name of Employer Self Employed Occupation Real Estate Developer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2015

**Transaction ID : A9AF8C65585C34421A63**

Amount of Each Receipt this Period  
2700.00

Donation

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

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

8100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joe Killian**

Mailing Address 1835 S Stewart Avenue  
Suite 107

City Springfield State MO Zip Code 65804-2556

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

Name of Employer Springfield Development Comp Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : AB407ED333E3F4DCABEA**

Amount of Each Receipt this Period  
1500.00

Donation

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

Mailing Address 2680 Parch Corn Rd

City Rogersville State MO Zip Code 65742-8790

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

Name of Employer Murney Associates Occupation Real Estate

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2015

**Transaction ID : ACCF3AF0CF4B3414B9B2**

Amount of Each Receipt this Period  
500.00

Donation

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

Mailing Address 3541 E Kingswood Drive

City Springfield State MO Zip Code 65809-4500

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

Name of Employer Self Employed Occupation Investor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 16 / 2015

**Transaction ID : ABC37C98509C84B23871**

Amount of Each Receipt this Period  
2700.00

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

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

4700.00

**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 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Windstream Corporation Political Action Committee**

Mailing Address 4001 N Rodney Parham Road

City Little Rock State AR Zip Code 72212-2459

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 01 / 03 / 2015

**Transaction ID : AF71C9C5ACA7042E992A**

Amount of Each Receipt this Period  
 1500.00

Donation

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

Mailing Address 6108 S San Rosa Avenue

City Ozark State MO Zip Code 65721-6733

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

Name of Employer Occupation  
 Harry Cooper Supply Sales

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 26 / 2015

**Transaction ID : A3AC42FDA003143E3B3D**

Amount of Each Receipt this Period  
 2700.00

Donation

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

Mailing Address 7701 Forsyth Boulevard

City Saint Louis State MO Zip Code 63105-1818

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

Name of Employer Occupation  
 None Housewife

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : AA7AC344AD45543B594C**

Amount of Each Receipt this Period  
 2700.00

Donation

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

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

6900.00

**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 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Max Spann**

Mailing Address **PO Box 4992**

City **Clinton** State **NJ** Zip Code **08809-4992**

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

Name of Employer **Self** Occupation **Auctioneer**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 03 / 2015**

**Transaction ID : AED3EAED3E9947E4BF8**

Amount of Each Receipt this Period  
**50.00**

Donation

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

Mailing Address **2647 Cottonwood Rd**

City **Rogersville** State **MO** Zip Code **65742-7408**

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

Name of Employer **The Larson Group** Occupation **President**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 13 / 2015**

**Transaction ID : A416807F555F243AABFC**

Amount of Each Receipt this Period  
**2700.00**

Donation

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

Mailing Address **7701 Forsyth Blvd**

City **Saint Louis** State **MO** Zip Code **63105-1875**

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

Name of Employer **Harbour Group** Occupation **Chairman**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : A3A0330A4EDB741BEA0C**

Amount of Each Receipt this Period  
**2700.00**

Donation

**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 22 OF 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Abigail Rose**

Mailing Address 6108 S San Rosa Avenue

City Ozark State MO Zip Code 65721-6733

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

Name of Employer Pinegar Chevrolet Occupation Marketing Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 26 / 2015**

**Transaction ID : AC775CA24E7594D37B02**

Amount of Each Receipt this Period  
**2700.00**

Donation

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

Mailing Address 1451 Crestwood Drive

City Joplin State MO Zip Code 64801-1039

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

Name of Employer Pro 100, Inc Occupation Broker-Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : A945E207B87384838943**

Amount of Each Receipt this Period  
**25.00**

Donation

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

Mailing Address 11764 N Farm Road 177

City Fair Grove State MO Zip Code 65648-8649

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

Name of Employer Trailiner Corporation Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 13 / 2015**

**Transaction ID : ACF1F708E430E4C38AEB**

Amount of Each Receipt this Period  
**2700.00**

Donation

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

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

**5425.00**

**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 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Matthew Brooks**

Mailing Address 6654 Avignon Boulevard

City Falls Church State VA Zip Code 22043-1752

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

Name of Employer Republican Jewish Coalition Occupation Executive Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2015

**Transaction ID : A229F55301A7742758DA**

Amount of Each Receipt this Period  
2300.00

Donation

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

Mailing Address 3049 S Arcadia Avenue

City Springfield State MO Zip Code 65804-4556

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

Name of Employer Positronic Industries Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 05 / 2015

**Transaction ID : AD24900BA73BA42A7971**

Amount of Each Receipt this Period  
2500.00

Donation

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

Mailing Address 3754 E Monroe St

City Springfield State MO Zip Code 65809-1358

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

Name of Employer Self Occupation Food Services

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : A9CF61F2E826349459F3**

Amount of Each Receipt this Period  
500.00

Donation

**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 24 OF 108
	<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)  
**Billy Long for Congress**

**A. Mr. Brent Davis**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4798 E Farm Road 132

City Springfield	State MO	Zip Code 65802-7299
---------------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Investor
-----------------------------------	------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 16 / 2015

**Transaction ID : A0F49916E15DB416FB74**

Amount of Each Receipt this Period  
 2700.00

Donation

**B. Mrs. Anise Pendleton**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1525 E Republic Road Suite B155

City Springfield	State MO	Zip Code 65804-6528
---------------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Investor
-----------------------------------	------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : A454EC2A043094C37B38**

Amount of Each Receipt this Period  
 2700.00

Donation

**C. Dr Larry Petersen**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5276 S Stirling Way

City Springfield	State MO	Zip Code 65809-4647
---------------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Physician
-----------------------------------	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : A9A1108D69D804F94BE5**

Amount of Each Receipt this Period  
 2700.00

Donation

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

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

8100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Dale Pearce**

Mailing Address 1341 S Devon Road

City Springfield State MO Zip Code 65809-2013

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

Name of Employer The Carpet Shoppe Occupation General Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : A361A5E2E8A1D49D3B66**

Amount of Each Receipt this Period  
 100.00

Donation

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

Mailing Address 1470 E Meadowmere Street

City Springfield State MO Zip Code 65804-0258

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

Name of Employer Ozarks Coca-Cola Bottling Occupation Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : AB458D4581A094AF4A1B**

Amount of Each Receipt this Period  
 2700.00

Donation

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

Mailing Address 6108 S San Rosa Avenue

City Ozark State MO Zip Code 65721-6733

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

Name of Employer Harry Cooper Supply Occupation Sales

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 26 / 2015

**Transaction ID : AD46168FAEEF84A9999D**

Amount of Each Receipt this Period  
 2700.00

Donation

**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 26 OF 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Independent Insurance Agents & Brokers Of America,**

Mailing Address 412 1st Street SE  
Suite 300

City Washington State DC Zip Code 20003-1804

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 17 / 2015

**Transaction ID : A1FCEFD7C18DD44428DA**

Amount of Each Receipt this Period  
 1000.00

Donation

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Jack P Stack**

Mailing Address 4140 E Whitehall Drive

City Springfield State MO Zip Code 65809-2346

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

Name of Employer Occupation  
 SRC Holdings Corporation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : A6D49A698DDE04533A43**

Amount of Each Receipt this Period  
 2300.00

Donation

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

Mailing Address 4961 S 111th Road

City Bolivar State MO Zip Code 65613-2884

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

Name of Employer Occupation  
 Information Requested Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : A87ACD0CCB8BF4D60900**

Amount of Each Receipt this Period  
 25.00

Donation

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

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

3325.00

**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 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Paul Behr**

Mailing Address 6993 S Andes Circle

City Centennial State CO Zip Code 80016-2111

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

Name of Employer Self Occupation Auctioneer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 01 / 03 / 2015

**Transaction ID : A4210D1172CCF4EA79EE**

Amount of Each Receipt this Period  
 100.00

Donation

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

Mailing Address 30300 State Highway 76

City Bradleyville State MO Zip Code 65614-3817

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

Name of Employer None Occupation Housewife

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 17 / 2015

**Transaction ID : A194DE32CA79542EAA28**

Amount of Each Receipt this Period  
 2700.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. 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 HFF Corporation Occupation Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 02 / 23 / 2015

**Transaction ID : A6461FF4C583F457BBBC**

Amount of Each Receipt this Period  
 2300.00

Donation

**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 28 OF 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Rosalie Wooten**

Mailing Address 3106 E. White Oak Terrace

City Springfield State MO Zip Code 65809

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2015

**Transaction ID : A444A2085E3494CA082D**

Amount of Each Receipt this Period  
 1000.00

Donation

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

Mailing Address 2342 E Fritts Lane

City Springfield State MO Zip Code 65804-3312

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

Name of Employer Self Employed Occupation Real Estate Developer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2015

**Transaction ID : A82AF09604CCE430A91F**

Amount of Each Receipt this Period  
 2300.00

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

Mailing Address 4550 E Bannister Road

City Springfield State MO Zip Code 65809-4300

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

Name of Employer Self Occupation Songwriter

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2025.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : AD5F65A0928564119BFF**

Amount of Each Receipt this Period  
 25.00

Donation

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

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

3325.00

**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 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lawrence Kloeppel**

Mailing Address 230 S Woodmont Drive

City Joplin State MO Zip Code 64801-8427

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

Name of Employer Transport Distribution Co Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 02 / 23 / 2015

**Transaction ID : AA51A8C086B9D420FACB**

Amount of Each Receipt this Period  
 100.00

Donation

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

Mailing Address 846 White Diamond Ct

City Springfield State MO Zip Code 65809-1515

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 13 / 2015

**Transaction ID : A3109802D3C3F47718DF**

Amount of Each Receipt this Period  
 2700.00

Donation

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

Mailing Address PO Box 1009

City Branson West State MO Zip Code 65737-1009

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

Name of Employer Self Occupation Real Estate

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 17 / 2015

**Transaction ID : A72FD58A341324147855**

Amount of Each Receipt this Period  
 1500.00

Donation

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

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

4300.00

**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 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Curtis Jared**

Mailing Address 2870 S Ingram Mill Road

City Springfield State MO Zip Code 65804-4042

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

Name of Employer Self Occupation Real Estate

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 26 / 2015

**Transaction ID : A46789796578C409E92E**

Amount of Each Receipt this Period  
 2700.00

Donation

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

Mailing Address PO Box 217

City Omaha State AR Zip Code 72662-0217

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

Name of Employer None Occupation Housewife

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2015

**Transaction ID : ACCEE8E05AB084752A83**

Amount of Each Receipt this Period  
 2700.00

Donation

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

Mailing Address 2224 S Edgewater Drive

City Springfield State MO Zip Code 65804-3449

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

Name of Employer Ozarks Coca-Cola/ Dr. Pepper Occupation Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2015

**Transaction ID : AF0BABF8012CC46789E8**

Amount of Each Receipt this Period  
 2700.00

Donation

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

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

8100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Carla Smith**

Mailing Address 4135 E Windsong Ct

City Springfield State MO Zip Code 65809-3553

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

Name of Employer Self Occupation Real Estate

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 20 / 2015

**Transaction ID : AE71CB626635545E2B64**

Amount of Each Receipt this Period  
250.00

Donation

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

Mailing Address 2224 S Edgewater Drive

City Springfield State MO Zip Code 65804-3449

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

Name of Employer Ozarks Coca-Cola/ Dr. Pepper Occupation Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 23 / 2015

**Transaction ID : A97BCA51AB4C34806BAF**

Amount of Each Receipt this Period  
2700.00

Donation

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Jack P Stack**

Mailing Address 4140 E Whitehall Drive

City Springfield State MO Zip Code 65809-2346

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

Name of Employer SRC Holdings Corporation Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : AEADE215505854EE3B04**

Amount of Each Receipt this Period  
2700.00

Donation

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

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

5650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Alvin Kaddatz**

Mailing Address 535 Hcr 4223

City Hillsboro State TX Zip Code 76645-7415

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

Name of Employer Self Occupation Farmer and Auctioneer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 01 / 03 / 2015

**Transaction ID : A826C73D9B24A47F0AA7**

Amount of Each Receipt this Period  
 100.00

Donation

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

Mailing Address 7701 Forsyth Boulevard

City Saint Louis State MO Zip Code 63105-1818

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

Name of Employer None Occupation Housewife

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : AB1169EA5A2394E2BA56**

Amount of Each Receipt this Period  
 2700.00

Donation

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

Mailing Address 6108 S San Rosa Avenue

City Ozark State MO Zip Code 65721-6733

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

Name of Employer Pinegar Chevrolet Occupation Marketing Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 26 / 2015

**Transaction ID : A9A87E2A9C17C4DC2861**

Amount of Each Receipt this Period  
 2700.00

Donation

**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 33 OF 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Fredna B Mahaffey**

Mailing Address 3720 E Eaglescliffe Drive

City Springfield State MO Zip Code 65809-4639

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

Name of Employer None Occupation Housewife

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2015

**Transaction ID : A8806407263524653BF4**

Amount of Each Receipt this Period  
2700.00

Donation

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

Mailing Address 4798 E Farm Road 132

City Springfield State MO Zip Code 65802-7299

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

Name of Employer Self Employed Occupation Investor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 16 / 2015

**Transaction ID : ADB7383AC90E04C09852**

Amount of Each Receipt this Period  
2700.00

Donation

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

Mailing Address 3903 E Eaglescliffe Drive

City Springfield State MO Zip Code 65809-4628

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

Name of Employer Custom Metalcraft Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : ACB887F0D04B842C1AB1**

Amount of Each Receipt this Period  
2000.00

Donation

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

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

7400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 108
	<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)  
**Billy Long for Congress**

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

Mailing Address 4550 E Bannister Road

City Springfield State MO Zip Code 65809-4300

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

Name of Employer Self Occupation Songwriter

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 06 / 2015

**Transaction ID : A2EB64B0681314A11A2F**

Amount of Each Receipt this Period  
 2000.00

Donation

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

Mailing Address 6698 State Highway 176

City Walnut Shade State MO Zip Code 65771-9101

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

Name of Employer Self Employed Occupation Marketing and Communications

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015

**Transaction ID : A18D7DE81524C43F2B62**

Amount of Each Receipt this Period  
 250.00

Donation

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

Mailing Address PO Box 5

City Cassville State MO Zip Code 65625-0005

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 15 / 2015

**Transaction ID : AFDF6D80DFCDC44C4A56**

Amount of Each Receipt this Period  
 100.00

Donation

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

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

2350.00

**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 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Liz Whitener**

Mailing Address 11764 N Farm Road 177

City State Zip Code  
Fair Grove MO 65648-8649

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

Name of Employer Occupation  
None Housewife

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2015

**Transaction ID : A4AA0C5AFFFC44A7DA86**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 5400 Macomb Street NW

City State Zip Code  
Washington DC 20016-5307

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

Name of Employer Occupation  
Self Lobbyist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 03 / 2015

**Transaction ID : A1C3A09FC8ECB4722A9F**

Amount of Each Receipt this Period  
1000.00

Donation

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

Mailing Address 2643 S Forrest Heights Avenue

City State Zip Code  
Springfield MO 65809-3414

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

Name of Employer Occupation  
Nixon & Lindstrom Insurance

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2015

**Transaction ID : ABBAC7D1CC8424234B7F**

Amount of Each Receipt this Period  
250.00

Donation

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

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

3950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. 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 HFF Corporation Occupation Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 23 / 2015**

**Transaction ID : A6B869BEA5EB44888B90**

Amount of Each Receipt this Period  
**2700.00**

Donation

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

Mailing Address 2917 Cheyenne Circle

City North Kansas City State MO Zip Code 64116-3214

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **20.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 16 / 2015**

**Transaction ID : A74F787FC4FC24D2093B**

Amount of Each Receipt this Period  
**20.00**

Donation

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

Mailing Address PO Box 217

City Omaha State AR Zip Code 72662-0217

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

Name of Employer None Occupation Housewife

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 13 / 2015**

**Transaction ID : A3B2C692C90F8456F9FF**

Amount of Each Receipt this Period  
**2500.00**

Donation

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

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

**5220.00**

**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 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Jerry Long**

Mailing Address 1642 E Catalpa Street

City Springfield State MO Zip Code 65804-0202

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

Name of Employer St. Louis University Occupation Orthodontist/ Professor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 03 / 2015

**Transaction ID : A5EC8A962C12141ABA97**

Amount of Each Receipt this Period  
 100.00

Donation

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

Mailing Address 7725 E Farm Road 194

City Rogersville State MO Zip Code 65742-6414

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

Name of Employer Self Occupation Farmer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2015

**Transaction ID : AC4C23F0823D44B53BFB**

Amount of Each Receipt this Period  
 2000.00

Donation

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

Mailing Address 240 Norwood Dr

City Branson State MO Zip Code 65616-3768

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 19 / 2015

**Transaction ID : ADC432E78ECC2489CAD4**

Amount of Each Receipt this Period  
 250.00

Donation

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

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

2350.00

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 38 OF 108

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NAME OF COMMITTEE (In Full)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kerry DaVault**

Mailing Address 1439 Legacy Circle

City Fenton State MO Zip Code 63026-2375

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 09 / 2015

**Transaction ID : A943C4FBFB8E04A38A31**

Amount of Each Receipt this Period  
 2500.00

Donation

**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).....

2500.00

168395.00

**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 108
	<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)  
**Billy Long for Congress**

**A. National Association of Broadcasters Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 1771 N Street NW

City Washington State DC Zip Code 20036-2800

FEC ID number of contributing federal political committee. **C C00009985**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2015

**Transaction ID : A8849AFD054F242DBBCB**

Amount of Each Receipt this Period  
1000.00

Donation

**B. KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address 600 14th Street NW Suite 800

City Washington State DC Zip Code 20005-2099

FEC ID number of contributing federal political committee. **C C00236489**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : AE50F4E8EF3C94A3289E**

Amount of Each Receipt this Period  
1500.00

Donation

**C. KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address 600 14th Street NW Suite 800

City Washington State DC Zip Code 20005-2099

FEC ID number of contributing federal political committee. **C C00236489**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 03 / 2015

**Transaction ID : A97A4797BBC274D168BA**

Amount of Each Receipt this Period  
1000.00

Donation

**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 40 OF 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**News America Holdings Inc - Fox Political Action Committee**

Mailing Address 444 N Capitol Street NW  
Suite 740

City Washington State DC Zip Code 20001-1512

FEC ID number of contributing federal political committee. **C** C00330019

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 17 / 2015

**Transaction ID : A5BDF8385F6C44945A6A**

Amount of Each Receipt this Period  
2500.00

Donation

**B.** Full Name (Last, First, Middle Initial)  
**KRAFT FOODS GLOBAL INC. POLITICAL ACTION COMMITTEE (KRAFTPAC)**

Mailing Address 975 F Street NW  
Suite 1000

City Washington State DC Zip Code 20004-1467

FEC ID number of contributing federal political committee. **C** C00077701

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : AB843673579E64CB098D**

Amount of Each Receipt this Period  
2500.00

Donation

**C.** Full Name (Last, First, Middle Initial)  
**Gridiron Political Action Committee**

Mailing Address 345 Park Avenue

City New York State NY Zip Code 10154-0004

FEC ID number of contributing federal political committee. **C** C00451153

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : A6C0D20A217324742B08**

Amount of Each Receipt this Period  
1000.00

Donation

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 41 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**General Dynamics Corporation Political Action Committee**

Mailing Address 2941 Fairview Park Drive  
Suite 100

City Falls Church State VA Zip Code 22042-4541

FEC ID number of contributing federal political committee. **C C00078451**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2015

**Transaction ID : A1E1C14E572C847589C5**

Amount of Each Receipt this Period  
 2000.00

Donation

**B.** Full Name (Last, First, Middle Initial)  
**Political Action Committee of the American Academy of Orthopaedic Surgeons**

Mailing Address 317 Massachusetts Avenue NE

City Washington State DC Zip Code 20002-5769

FEC ID number of contributing federal political committee. **C C00343137**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2015

**Transaction ID : AFD FDE6DC9067478C86B**

Amount of Each Receipt this Period  
 2500.00

Donation

**C.** Full Name (Last, First, Middle Initial)  
**MONSANTO COMPANY CITIZENSHIP FUND AKA MONSANTO CITIZENSHIP FUND**

Mailing Address 800 N Lindbergh Boulevard

City Saint Louis State MO Zip Code 63141-7843

FEC ID number of contributing federal political committee. **C C00042069**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2015

**Transaction ID : A6C95E8ADF3EB479FA39**

Amount of Each Receipt this Period  
 1500.00

Donation

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

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

6000.00

**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 108
	<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)  
**Billy Long for Congress**

**A. General Mills Inc, Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 1 General Mills Boulevard

City State Zip Code  
Minneapolis MN 55426-1347

FEC ID number of contributing federal political committee. **C** C00062646

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : A2F2FBEE3E3B84DDDB06**

Amount of Each Receipt this Period  
 1500.00

Donation

**B. National Association of Broadcasters Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 1771 N Street NW

City State Zip Code  
Washington DC 20036-2800

FEC ID number of contributing federal political committee. **C** C00009985

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2015

**Transaction ID : A27A1927589B24B59B9D**

Amount of Each Receipt this Period  
 1000.00

Donation

**C. Duffy for Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 538

City State Zip Code  
Wausau WI 54402-0538

FEC ID number of contributing federal political committee. **C** C00464339

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : AD4126E9C66854AC895A**

Amount of Each Receipt this Period  
 1000.00

Donation

**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: PAGE 43 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**T-MOBILE USA, INC. POLITICAL ACTION COMMITTEE (T-PAC)**

Mailing Address 401 9th Street NW  
Suite 550

City Washington State DC Zip Code 20004-2141

FEC ID number of contributing federal political committee. **C C00361758**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 03 / 2015

**Transaction ID : A39558C7B1804452CA30**

Amount of Each Receipt this Period  
 1000.00

Donation

**B.** Full Name (Last, First, Middle Initial)  
**AMEREN FEDERAL POLITICAL ACTION COMMITTEE (AMERENFED PAC)**

Mailing Address 1331 Pennsylvania Avenue NW

City Washington State DC Zip Code 20004-1710

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 27 / 2015

**Transaction ID : A969F604A2EF349C49C5**

Amount of Each Receipt this Period  
 1000.00

Donation

**C.** Full Name (Last, First, Middle Initial)  
**KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)**

Mailing Address 600 14th Street NW  
Suite 800

City Washington State DC Zip Code 20005-2099

FEC ID number of contributing federal political committee. **C C00236489**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : A18892931C07A416FAD1**

Amount of Each Receipt this Period  
 1000.00

Donation

**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: PAGE 44 OF 108  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**KRAFT FOODS GLOBAL INC. POLITICAL ACTION COMMITTEE (KRAFTPAC)**

Mailing Address 975 F Street NW  
Suite 1000

City Washington State DC Zip Code 20004-1467

FEC ID number of contributing federal political committee. **C C00077701**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 25 / 2015

**Transaction ID : AD3158783F02D42E6A9E**

Amount of Each Receipt this Period  
2500.00

Donation

**B.** Full Name (Last, First, Middle Initial)  
**MAJORITY COMMITTEE PAC--MC PAC**

Mailing Address PO Box 10134

City Bakersfield State CA Zip Code 93389-0134

FEC ID number of contributing federal political committee. **C C00428052**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 27 / 2015

**Transaction ID : AD3A06C11896C4745A8A**

Amount of Each Receipt this Period  
5000.00

Donation

**C.** Full Name (Last, First, Middle Initial)  
**CBS Corporation Political Action Committee**

Mailing Address 601 Pennsylvania Avenue NW  
Suite 540

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C C00423442**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 17 / 2015

**Transaction ID : A370F64CDD259459B84B**

Amount of Each Receipt this Period  
1000.00

Donation

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

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

8500.00

**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 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Cerner Political Action Committee**

Mailing Address 2800 RockCreek Parkway

City State Zip Code  
Kansas City MO 64117

FEC ID number of contributing federal political committee. **C** C00410589

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2015

**Transaction ID : A3F57ED311B544001926**

Amount of Each Receipt this Period  
 1000.00

Donation

**B.** Full Name (Last, First, Middle Initial)  
**KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)**

Mailing Address 600 14th Street NW  
Suite 800

City State Zip Code  
Washington DC 20005-2099

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2015

**Transaction ID : AB9C39D6FAFED4FCF938**

Amount of Each Receipt this Period  
 2500.00

Donation

**C.** Full Name (Last, First, Middle Initial)  
**News America Holdings Inc - Fox Political Action Committee**

Mailing Address 444 N Capitol Street NW  
Suite 740

City State Zip Code  
Washington DC 20001-1512

FEC ID number of contributing federal political committee. **C** C00330019

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2015

**Transaction ID : ADEB632F056DC4F85AD7**

Amount of Each Receipt this Period  
 1000.00

Donation

**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: PAGE 46 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Billy Long for Congress**

**A. General Electric Political Action Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1299 Pennsylvania Avenue NW  
 City Washington State DC Zip Code 20004-2400  
 FEC ID number of contributing federal political committee. **C C00024869**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 19 / 2015  
**Transaction ID : A4567AA1007A04917A8E**  
 Amount of Each Receipt this Period  
 1500.00  
 Donation

**B. Peabody Political Action Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 701 Market Street  
 City Saint Louis State MO Zip Code 63101-1830  
 FEC ID number of contributing federal political committee. **C C00110478**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2015  
**Transaction ID : ABBAAB05A2F8E49ABB63**  
 Amount of Each Receipt this Period  
 1500.00  
 Donation

**C. Safari Club International Political Action Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4800 W Gates Pass Rd  
 City Tucson State AZ Zip Code 85745-9600  
 FEC ID number of contributing federal political committee. **C C00122101**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 03 / 2015  
**Transaction ID : AC059C3E22A90402BBB9**  
 Amount of Each Receipt this Period  
 2000.00  
 Donation

**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 47 OF 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**COMMERCE BANCS PAC**

Mailing Address 922 Walnut Street  
Suite 800

City State Zip Code  
Kansas City MO 64106-1802

FEC ID number of contributing federal political committee. **C** C00072967

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 30 / 2015

**Transaction ID : A3B77A1A1E9A5446CA6D**

Amount of Each Receipt this Period  
1000.00

Donation

**B.** Full Name (Last, First, Middle Initial)  
**KCP&L Power Political Action Committee**

Mailing Address PO Box 418679

City State Zip Code  
Kansas City MO 64141-9679

FEC ID number of contributing federal political committee. **C** C00111310

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : A424C6D0D54334EBB8EE**

Amount of Each Receipt this Period  
3000.00

Donation

**C.** Full Name (Last, First, Middle Initial)  
**General Electric Political Action Committee**

Mailing Address 1299 Pennsylvania Avenue NW

City State Zip Code  
Washington DC 20004-2400

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 27 / 2015

**Transaction ID : A24DC5FC269DE407FA6A**

Amount of Each Receipt this Period  
2500.00

Donation

**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: PAGE 48 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**UnitedHealth Group Incorporated PAC**

Mailing Address 9900 BREN ROAD EAST

City State Zip Code  
Hopkins MN 55343

FEC ID number of contributing federal political committee. **C C00274431**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 23 / 2015

**Transaction ID : A809C9790E5DA497CAF4**

Amount of Each Receipt this Period  
1500.00

Donation

**B.** Full Name (Last, First, Middle Initial)  
**American Physical Therapy Association Political Action Committee**

Mailing Address 1111 N Fairfax Street

City State Zip Code  
Alexandria VA 22314-1484

FEC ID number of contributing federal political committee. **C C00012880**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2015

**Transaction ID : A5ED7ED793617474F8B6**

Amount of Each Receipt this Period  
1000.00

Donation

**C.** Full Name (Last, First, Middle Initial)  
**HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**

Mailing Address 101 Constitution Avenue NW  
Suite 500

City State Zip Code  
Washington DC 20001-2133

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 19 / 2015

**Transaction ID : A3D063E5B5AB740B7928**

Amount of Each Receipt this Period  
1000.00

**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 49 OF 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Realtors Political Action Committee (National)**

Mailing Address 430 N Michigan Ave

City	State	Zip Code
Chicago	IL	60611-4011

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

Name of Employer	Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 23 / 2015

**Transaction ID : A9F4459E6942A4068804**

Amount of Each Receipt this Period  
 1000.00

Donation

**B.** Full Name (Last, First, Middle Initial)  
**AMO Voluntary Political Action (American Maritime Officers)**

Mailing Address PO Box 66

City	State	Zip Code
Dania	FL	33004

FEC ID number of contributing federal political committee. **C** C00027532

Name of Employer	Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 03 / 2015

**Transaction ID : A6BB992BABC924E13ADB**

Amount of Each Receipt this Period  
 1000.00

Donation

**C.** Full Name (Last, First, Middle Initial)  
**AT&T Inc. Federal PAC**

Mailing Address 208 S Akard St

City	State	Zip Code
Dallas	TX	75202-4295

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

Name of Employer	Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2015

**Transaction ID : A3BBABDEC5FCA48F4841**

Amount of Each Receipt this Period  
 2500.00

Donation

**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: PAGE 50 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Billy Long for Congress**

A. Full Name (Last, First, Middle Initial)  
**AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 25 Massachusetts Avenue NW  
Suite 600

City Washington State DC Zip Code 20001-7400

FEC ID number of contributing federal political committee. **C C00000422**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : A339A31F7F0934447897**

Amount of Each Receipt this Period  
1000.00

Donation

B. Full Name (Last, First, Middle Initial)  
**Realtors Political Action Committee (National)**

Mailing Address 430 N Michigan Ave

City Chicago State IL Zip Code 60611-4011

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : AECAB110CCEDA49A58F1**

Amount of Each Receipt this Period  
1000.00

Donation

C. Full Name (Last, First, Middle Initial)  
**American Society Of Anesthesiologists Political Action Committee**

Mailing Address 520 N Northwest Highway

City Park Ridge State IL Zip Code 60068-2538

FEC ID number of contributing federal political committee. **C C00255752**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 13 / 2015

**Transaction ID : A2903194B92D34B84B0D**

Amount of Each Receipt this Period  
2500.00

Donation

**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 51 OF 108
	<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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Union Pacific Corporation Fund for Effective Government**

Mailing Address 600 13th Street NW

City Washington State DC Zip Code 20005-3005

FEC ID number of contributing federal political committee. **C C00010470**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2015

**Transaction ID : AF266E2E1B7D347DBB78**

Amount of Each Receipt this Period  
 1000.00

Donation

**B.** Full Name (Last, First, Middle Initial)  
**DAIRY FARMERS OF AMERICA, INC. - DEPAC (DAIRY EDUCATIONAL POLITICAL ACTION COMMITTEE)**

Mailing Address PO Box 909700

City Kansas City State MO Zip Code 64190-9700

FEC ID number of contributing federal political committee. **C C00001388**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2015

**Transaction ID : AE436B69EED61470EA4E**

Amount of Each Receipt this Period  
 1500.00

Donation

**C.** Full Name (Last, First, Middle Initial)  
**Vicky Hartzler for Congress**

Mailing Address 2511 Industrial Drive Suite A

City Jefferson City State MO Zip Code 65109-6708

FEC ID number of contributing federal political committee. **C C00464602**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : A2C23A33C1D0F41DE8BB**

Amount of Each Receipt this Period  
 2000.00

Donation

**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: PAGE 52 OF 108  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN ASSOCIATION OF NURSE ANESTHETISTS POLITICAL ACTION COMMITTEE**

Mailing Address 25 Massachusetts Avenue NW  
Suite 550

City Washington State DC Zip Code 20001-1408

FEC ID number of contributing federal political committee. **C C00173153**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 13 / 2015

**Transaction ID : A19EECDA142EF4E8F9E5**

Amount of Each Receipt this Period  
 2500.00

Donation

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

Mailing Address PO Box 125

City Holts Summit State MO Zip Code 65043-0125

FEC ID number of contributing federal political committee. **C C00458679**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : A7FC33CD1EA944BAAAC8**

Amount of Each Receipt this Period  
 2000.00

Donation

**C.** Full Name (Last, First, Middle Initial)  
**Republican Jewish Coalition Political Action Committee**

Mailing Address 50 F Street NW  
Suite 100

City Washington State DC Zip Code 20001-1590

FEC ID number of contributing federal political committee. **C C00345132**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : A200AB5CDAE064ADEB24**

Amount of Each Receipt this Period  
 5000.00

Donation

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

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

9500.00

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

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

FOR LINE NUMBER: PAGE 53 OF 108  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BOEING COMPANY POLITICAL ACTION COMMITTEE, THE**

Mailing Address 1200 Wilson Boulevard

City State Zip Code  
Arlington VA 22209-2300

FEC ID number of contributing federal political committee. **C C00142711**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 27 / 2015

**Transaction ID : AB883721FA30B4F708FC**

Amount of Each Receipt this Period  
1000.00

Donation

**B.** Full Name (Last, First, Middle Initial)  
**American Veterinary Medical Association Political Action Committee**

Mailing Address 1910 Sunderland Place NW

City State Zip Code  
Washington DC 20036-1608

FEC ID number of contributing federal political committee. **C C00114132**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 01 / 2015

**Transaction ID : A2412A5F094044618863**

Amount of Each Receipt this Period  
1000.00

Donation

**C.** Full Name (Last, First, Middle Initial)  
**T-MOBILE USA, INC. POLITICAL ACTION COMMITTEE (T-PAC)**

Mailing Address 401 9th Street NW  
Suite 550

City State Zip Code  
Washington DC 20004-2141

FEC ID number of contributing federal political committee. **C C00361758**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 17 / 2015

**Transaction ID : A030B41D9AB5A479B899**

Amount of Each Receipt this Period  
2500.00

Donation

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

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

4500.00

77500.00

**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 108
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Billy Long for Congress**

**A. Excelsior PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 430 Ferdinand Day Dr  
 City Alexandria State VA Zip Code 22304-8701  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2015  
**Transaction ID : A0A9A8287ADCB499DA8E**  
 Amount of Each Receipt this Period  
 2000.00  
 Donation

**B. Rite Aid Political Action Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 30 Hunter Ln  
 City Camp Hill State PA Zip Code 17011-2400  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2015  
**Transaction ID : A541E0AB700BA4AF1B75**  
 Amount of Each Receipt this Period  
 500.00  
 Donation

**C. The US Oncology Network PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10101 Woodloch Forest Dr  
 City The Woodlands State TX Zip Code 77380-1975  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2015  
**Transaction ID : A09533F7B58364E40BE9**  
 Amount of Each Receipt this Period  
 2500.00  
 Donation

**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: PAGE 55 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  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)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ann PAC**

Mailing Address **PO Box 3535**

City **Ballwin** State **MO** Zip Code **63022-3535**

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 25 / 2015**

**Transaction ID : A8061CF285D6043638FE**

Amount of Each Receipt this Period  
**2500.00**

Donation

**B.** Full Name (Last, First, Middle Initial)  
**Maintaining All Republicans In Office Political Action Committee**

Mailing Address **8770 SW 72nd St**

City **Miami** State **FL** Zip Code **33173-3512**

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 26 / 2015**

**Transaction ID : ADCD4DA8230F848E897E**

Amount of Each Receipt this Period  
**1000.00**

Donation

**C.** Full Name (Last, First, Middle Initial)  
**American Academy of Ophthalmology PAC**

Mailing Address **20 F St NW**

City **Washington** State **DC** Zip Code **20001-6705**

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 27 / 2015**

**Transaction ID : A5C46E6B5A8E949FF8B2**

Amount of Each Receipt this Period  
**2500.00**

Donation

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

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

**6000.00**

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

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

FOR LINE NUMBER: PAGE 56 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Smith PAC**

Mailing Address **PO Box 30844**

City **Bethesda** State **MD** Zip Code **20824-0844**

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2015**

**Transaction ID : AAE0CF57A1EE541DBA0E**

Amount of Each Receipt this Period  
 1000.00

Donation

**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

12000.00

**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 108
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Aristotle International**

Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1164

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **727.81**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : A43BD4D5D4F544B769DC**

Amount of Each Receipt this Period  
**727.81**

Software Calculation Adjustment

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

Mailing Address 2006 S Glenstone Avenue

City Springfield State MO Zip Code 65804-2428

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **569.70**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : A193097226EF344D0B85**

Amount of Each Receipt this Period  
**117.52**

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

Mailing Address 2006 S Glenstone Avenue

City Springfield State MO Zip Code 65804-2428

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **452.18**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 28 / 2015

**Transaction ID : A14BB8BE36CA646FB882**

Amount of Each Receipt this Period  
**101.49**

Interest Payment

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

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

**946.82**

**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 108
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Billy Long for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Springfield First Community Bank**

Mailing Address 2006 S Glenstone Avenue

City Springfield State MO Zip Code 65804-2428

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.69**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 31 / 2015**

**Transaction ID : A29FCB3B12E9F486DBF1**

Amount of Each Receipt this Period  
**114.91**

Interest Payment

**B.** Full Name (Last, First, Middle Initial)  
**Missouri Department Of Revenue**

Mailing Address 301 W High Street

City Jefferson City State MO Zip Code 65101-1517

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **6.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 21 / 2015**

**Transaction ID : A8EB8BCCA4E584FE98C6**

Amount of Each Receipt this Period  
**6.00**

Compensation Adjustment

**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).....

**120.91**

**1067.73**

**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 59 OF 108	
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jared Enterprises</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2015
Mailing Address 2870 S Ingram Mill Road		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : BCC3F79CEF1514B8AB89</b>
City Springfield	State MO Zip Code 65804-4042	
Purpose of Disbursement Office Rent	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Price Cutter #50</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2015
Mailing Address 3260 E Battlefield Street		Amount of Each Disbursement this Period 53.79 <b>Transaction ID : B1FB6839630864B9CB3A</b>
City Springfield	State MO Zip Code 65804-4051	
Purpose of Disbursement Event Supplies	Category/Type 006	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jimm's Steakhouse &amp; Pub</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2015
Mailing Address 1935 S Glenstone Avenue		Amount of Each Disbursement this Period 102.47 <b>Transaction ID : BB25F6833112445C5ADC</b>
City Springfield	State MO Zip Code 65804-2304	
Purpose of Disbursement Meal	Category/Type 007	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	906.26
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 108			
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. NPC DialPay</b>		Date of Disbursement MM / DD / YYYY 01 / 06 / 2015
Mailing Address 7851 185th Street		Amount of Each Disbursement this Period 49.95 <b>Transaction ID : BCB43DD9D2AE4F7EBD8</b>
City Tinley Park	State IL	
Zip Code 60477-6248	Purpose of Disbursement Card Processing Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Gannett</b>		Date of Disbursement MM / DD / YYYY 01 / 06 / 2015
Mailing Address PO Box 727		Amount of Each Disbursement this Period 9.60 <b>Transaction ID : BE8D633F3E228445AA7E</b>
City Indianapolis	State IN	
Zip Code 46206-0727	Purpose of Disbursement Subscription Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. NPC DialPay</b>		Date of Disbursement MM / DD / YYYY 01 / 07 / 2015
Mailing Address 7851 185th Street		Amount of Each Disbursement this Period 53.90 <b>Transaction ID : B5E543BC7BBB04E11AB5</b>
City Tinley Park	State IL	
Zip Code 60477-6248	Purpose of Disbursement Card Processing Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	113.45
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 108			
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ally Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2015
Mailing Address P.O. Box 9001951		Amount of Each Disbursement this Period 1199.45 <b>Transaction ID : B61A396A8EC9744758CA</b>
City Louisville	State KY	
Zip Code 40290-1951	Purpose of Disbursement Car Lease Payment	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Highland Springs Country Club</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2015
Mailing Address 5400 S Highland Springs Boulevard		Amount of Each Disbursement this Period 3352.80 <b>Transaction ID : B5FED13E3D8814F3D8F7</b>
City Springfield	State MO	
Zip Code 65809-4609	Purpose of Disbursement Event Material- Food/Beverage	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Ally Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address P.O. Box 9001951		Amount of Each Disbursement this Period 982.37 <b>Transaction ID : BC66A22F712054B63806</b>
City Louisville	State KY	
Zip Code 40290-1951	Purpose of Disbursement Car Lease Payment	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5534.62
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 108			
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jared Enterprises</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 2870 S Ingram Mill Road		Amount of Each Disbursement this Period 190.01 <b>Transaction ID : B460D4E8B6D3D4FE1B3A</b>
City Springfield	State MO Zip Code 65804-4042	
Purpose of Disbursement Office Utilities	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Uniiverse Collaborative Lifestyle, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 955 Massachusetts Ave #319		Amount of Each Disbursement this Period 75.48 <b>Transaction ID : B637D88CA8B8940178B2</b>
City Cambridge	State MA Zip Code 02139-3233	
Purpose of Disbursement Event Tickets	Category/Type 007	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Springfield Area Chamber of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2015
Mailing Address PO Box 1687		Amount of Each Disbursement this Period 150.00 <b>Transaction ID : B556CF7C5B6D94C8E907</b>
City Springfield	State MO Zip Code 65801-1687	
Purpose of Disbursement Membership Fee	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	415.49
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 108			
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. State Farm Insurance</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2015
Mailing Address 1901a S. Glenstone Ave		Amount of Each Disbursement this Period 116.31 <b>Transaction ID : B712F8E9EE0844C21A5C</b>
City Springfield	State MO Zip Code 65804-2304	
Purpose of Disbursement Leased Car Insurance Payment	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Missouri Division Of Employment Security</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2015
Mailing Address 111 N 7th Street # 700		Amount of Each Disbursement this Period 291.46 <b>Transaction ID : B8F015E8A4EDE46B7B35</b>
City Saint Louis	State MO Zip Code 63101-2100	
Purpose of Disbursement Unemployment tax	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Lawrence County Republican Central Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2015
Mailing Address Lawrence County courthouse		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : B0F9CE2FC329142C7A79</b>
City Mt. Vernon	State MO Zip Code 65712	
Purpose of Disbursement Registration Fee	Category/Type 007	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	707.77
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 108			
	<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)  
**Billy Long for Congress**

**A. Internal Revenue Service**

Full Name (Last, First, Middle Initial)  
Mailing Address 1111 Constitution Avenue NW

City Washington State DC Zip Code 20224-0001

Purpose of Disbursement Payroll Tax 001 Category/Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 22 / 2015

Amount of Each Disbursement this Period: 1093.96  
**Transaction ID : B94C280C33F6E4AB9839**

**B. Aristotle International**

Full Name (Last, First, Middle Initial)  
Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement Campaign Software 001 Category/Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 22 / 2015

Amount of Each Disbursement this Period: 600.00  
**Transaction ID : B3F8CCC236ABD453F8B0**

**c. City of Springfield**

Full Name (Last, First, Middle Initial)  
Mailing Address 840 N Boonille

City Springfield State MO Zip Code 65802-3832

Purpose of Disbursement Meal 007 Category/Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 23 / 2015

Amount of Each Disbursement this Period: 25.00  
**Transaction ID : BCE8560C182974C01B4F**

**SUBTOTAL** of Disbursements This Page (optional) ..... 1718.96

**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 65 OF 108	
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial)  
**A. Copeland Accounting & Tax Service**

Mailing Address 3128 E Sunshine Street

City Springfield State MO Zip Code 65804-2055

Purpose of Disbursement Quarterly Payroll Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 24 / 2015

Amount of Each Disbursement this Period: 75.00

Transaction ID : B9B4C4AFBB3134A6EA2A

Category/Type: 001

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

Mailing Address 4822 Chadwick Ln

City Saint Peters State MO Zip Code 63304-7519

Purpose of Disbursement January Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 28 / 2015

Amount of Each Disbursement this Period: 375.00

Transaction ID : B611FCBDA50B84417823

Category/Type:

Full Name (Last, First, Middle Initial)  
**c. Matthew Hough**

Mailing Address 937 W Broad

City Republic State MO Zip Code 65738-2501

Purpose of Disbursement January Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 28 / 2015

Amount of Each Disbursement this Period: 600.00

Transaction ID : B1BB2ADE506F74BD7B8F

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional) ..... 1050.00

**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 66 OF 108	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr. Royce Reding</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2015
Mailing Address 1459 Miller Avenue		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : B0E01172E2B0A4B7E846</b>
City Springfield	State MO	
Zip Code 65802-7111	Purpose of Disbursement January Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Jared Enterprises</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2015
Mailing Address 2870 S Ingram Mill Road		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : B338E1CBF936948C1AB8</b>
City Springfield	State MO	
Zip Code 65804-4042	Purpose of Disbursement Office Rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. ELAN Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2015
Mailing Address 225 W Station Square Dr		Amount of Each Disbursement this Period 14044.07 <b>Transaction ID : B09D4F2CE77C440FD974</b>
City Pittsburgh	State PA	
Zip Code 15219-1174	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	15794.07
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 108			
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Gannett</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2015
Mailing Address PO Box 727		Amount of Each Disbursement this Period 12.00 <b>Transaction ID : B9780F75700444FB4B32</b>
City Indianapolis	State IN Zip Code 46206-0727	
Purpose of Disbursement Subscription Fee	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NPC DialPay</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2015
Mailing Address 7851 185th Street		Amount of Each Disbursement this Period 98.85 <b>Transaction ID : BA56C1FE7AD6F43648E4</b>
City Tinley Park	State IL Zip Code 60477-6248	
Purpose of Disbursement Card Processing Fee	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Ally Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2015
Mailing Address P.O. Box 9001951		Amount of Each Disbursement this Period 1199.45 <b>Transaction ID : B4BAC2085491342B3B34</b>
City Louisville	State KY Zip Code 40290-1951	
Purpose of Disbursement Car Lease Payment	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1310.30
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 108			
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ally Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2015
Mailing Address P.O. Box 9001951		Amount of Each Disbursement this Period 982.37 <b>Transaction ID : B414F81662BC9403FB0E</b>
City Louisville	State KY	
Zip Code 40290-1951	Purpose of Disbursement Car Lease Payment	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Florette by Countryside</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2015
Mailing Address 1608 S Maple		Amount of Each Disbursement this Period 64.58 <b>Transaction ID : B3F69D0E4D1614361986</b>
City Carthage	State MO	
Zip Code 64836-3009	Purpose of Disbursement Memorial Donation	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. The Grove</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2015
Mailing Address Chicago Ohare Intl Airport		Amount of Each Disbursement this Period 5.47 <b>Transaction ID : B20090BB43BF84D5FB67</b>
City Chicago	State IL	
Zip Code 60666	Purpose of Disbursement Meal	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1052.42
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 108			
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Courtyard By Marriott</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2015
Mailing Address 140 L ST SE		Amount of Each Disbursement this Period 202.67 <b>Transaction ID : B56133055256144D1928</b>
City Washington	State DC	
Zip Code 20003-3335	Purpose of Disbursement Lodging	Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. State Farm Insurance</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2015
Mailing Address 1901a S. Glenstone Ave		Amount of Each Disbursement this Period 116.31 <b>Transaction ID : B8358DEAC315B40D2B55</b>
City Springfield	State MO	
Zip Code 65804-2304	Purpose of Disbursement Leased Car Insurance Payment	Category/Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Amanda Polt</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2015
Mailing Address 4822 Chadwick Ln		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : B3B52CD63E28643A38A5</b>
City Saint Peters	State MO	
Zip Code 63304-7519	Purpose of Disbursement February Salary	Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1068.98
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 108			
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Matthew Hough</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2015
Mailing Address 937 W Broad		Amount of Each Disbursement this Period 600.00 <b>Transaction ID : BCBB9515DD3054C82806</b>
City Republic	State MO Zip Code 65738-2501	
Purpose of Disbursement February Salary	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mr. Royce Reding</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2015
Mailing Address 1459 Miller Avenue		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : BBE50FC3FFD414304888</b>
City Springfield	State MO Zip Code 65802-7111	
Purpose of Disbursement February Salary	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Aristotle International</b>		Date of Disbursement MM / DD / YYYY 02 / 25 / 2015
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 600.00 <b>Transaction ID : B19D4658ED67648B993A</b>
City Washington	State DC Zip Code 20003-1164	
Purpose of Disbursement Campaign Software	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 108	
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. VoteSane Political Action Committee</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2015
Mailing Address PO Box 2713		Amount of Each Disbursement this Period 25.00 <b>Transaction ID : B1C3DA1A52296402EAE4</b>
City Alexandria	State VA	
Zip Code 22301-0713	Purpose of Disbursement Processing Fee	Category/ Type 001
Candidate Name <b>VoteSane Political Action Committee</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. FTD.com</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2015
Mailing Address 3113 Woodcreek Drive		Amount of Each Disbursement this Period 65.90 <b>Transaction ID : B9B7F11E834C6466B969</b>
City Downers Grove	State IL	
Zip Code 60515-5412	Purpose of Disbursement Memorial Donation	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. ChocolateDC.com</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2015
Mailing Address 1130 Connecticut Ave		Amount of Each Disbursement this Period 45.95 <b>Transaction ID : B9871B9D411D04F8DB8E</b>
City Washington	State DC	
Zip Code 20036-3904	Purpose of Disbursement Campaign Event Food	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	136.85
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 108	
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sam's Club</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2015
Mailing Address 3660 E Sunshine Street		Amount of Each Disbursement this Period 342.53 <b>Transaction ID : B05E1EADA4B2B4897BCE</b>
City Springfield	State MO Zip Code 65809-2820	
Purpose of Disbursement Office Equipment	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Copy Shoppe</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2015
Mailing Address 1446 E Sunshine Street		Amount of Each Disbursement this Period 329.37 <b>Transaction ID : B350BE376BE0843179CE</b>
City Springfield	State MO Zip Code 65804-1238	
Purpose of Disbursement Printed Materials	Category/Type 007	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Walter Knoll Florist</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2015
Mailing Address 2765 LaSalle Street		Amount of Each Disbursement this Period 122.18 <b>Transaction ID : B01B118B38E634D578C7</b>
City Saint Louis	State MO Zip Code 63104-1917	
Purpose of Disbursement Memorial Donation	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	794.08
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 108			
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jared Enterprises</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2015
Mailing Address 2870 S Ingram Mill Road		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : BAEE2EBF5A8C34EF68DA</b>
City Springfield	State MO	
Zip Code 65804-4042	Purpose of Disbursement Office Rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Internal Revenue Service</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2015
Mailing Address 1111 Constitution Avenue NW		Amount of Each Disbursement this Period 204.00 <b>Transaction ID : B5CA2FA293AD3427B8DB</b>
City Washington	State DC	
Zip Code 20224-0001	Purpose of Disbursement Payroll Tax	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. NPC DialPay</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2015
Mailing Address 7851 185th Street		Amount of Each Disbursement this Period 404.76 <b>Transaction ID : B6CCDF5D575B24BA494A</b>
City Tinley Park	State IL	
Zip Code 60477-6248	Purpose of Disbursement Card Processing Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1358.76
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 74 OF 108	
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Missouri Department Of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 06 / 2015</b>
Mailing Address <b>301 W High Street</b>		Amount of Each Disbursement this Period <b>91.00</b> <b>Transaction ID : B35B2EEDED7494B5E9ED</b>
City <b>Jefferson City</b> State <b>MO</b> Zip Code <b>65101-1517</b>	Purpose of Disbursement <b>Estimated 2015 Corporate Taxes</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ally Bank</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 09 / 2015</b>
Mailing Address <b>P.O. Box 9001951</b>		Amount of Each Disbursement this Period <b>982.37</b> <b>Transaction ID : BDF A702917C984D45905</b>
City <b>Louisville</b> State <b>KY</b> Zip Code <b>40290-1951</b>	Purpose of Disbursement <b>Car Lease Payment</b> Category/Type <b>002</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Sam's Club</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 09 / 2015</b>
Mailing Address <b>3660 E Sunshine Street</b>		Amount of Each Disbursement this Period <b>321.29</b> <b>Transaction ID : BA8BC0050740541E3ACC</b>
City <b>Springfield</b> State <b>MO</b> Zip Code <b>65809-2820</b>	Purpose of Disbursement <b>Event Materials</b> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1394.66</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 108			
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ally Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2015
Mailing Address P.O. Box 9001951		Amount of Each Disbursement this Period 1199.45 <b>Transaction ID : B3934EFD426D74A169A6</b>
City Louisville	State KY	
Zip Code 40290-1951	Purpose of Disbursement Car Lease Payment	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Polk County Republican Party</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2015
Mailing Address Downtown		Amount of Each Disbursement this Period 60.00 <b>Transaction ID : B63D7BD8FED8749E9881</b>
City Bolivar	State MO	
Zip Code 65613	Purpose of Disbursement Event Registration Fee	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Greater Ozark Pachyderms</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2015
Mailing Address 333 Park Central E Suite 622		Amount of Each Disbursement this Period 40.00 <b>Transaction ID : BD243211CF98C4A829DA</b>
City Springfield	State MO	
Zip Code 65806-2229	Purpose of Disbursement Banquet Tickets	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1299.45
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 108	
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mrs. Mavis Busiek</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2015
Mailing Address 1325 S Jones Mill Lane		Amount of Each Disbursement this Period 216.71 <b>Transaction ID : B5CBC1CDAD25E405BBF6</b>
City Springfield	State MO Zip Code 65809-2292	
Purpose of Disbursement Event Materials Reimbursement	Category/Type 007	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. State Farm Insurance</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2015
Mailing Address 1901a S. Glenstone Ave		Amount of Each Disbursement this Period 116.31 <b>Transaction ID : B6C34AA44530A441089A</b>
City Springfield	State MO Zip Code 65804-2304	
Purpose of Disbursement Leased Car Insurance Payment	Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Jared Enterprises</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2015
Mailing Address 2870 S Ingram Mill Road		Amount of Each Disbursement this Period 347.89 <b>Transaction ID : BBE8C06C90CCA4E85875</b>
City Springfield	State MO Zip Code 65804-4042	
Purpose of Disbursement Office Utilities	Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	680.91
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 108			
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Lawrence County Republican Central Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2015
Mailing Address Lawrence County courthouse		Amount of Each Disbursement this Period 25.00 <b>Transaction ID : B08ACD49D79E641CCAAE</b>
City Mt. Vernon	State MO	
Zip Code 65712	Purpose of Disbursement Registration Fee	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Greene County Republican Party</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2015
Mailing Address Downtown		Amount of Each Disbursement this Period 670.00 <b>Transaction ID : BA8CCD119AE184604832</b>
City Springfield	State MO	
Zip Code 65802	Purpose of Disbursement Event Registration	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2015
Mailing Address 1593 Spring Hill Road Suite 400		Amount of Each Disbursement this Period 600.00 <b>Transaction ID : BA7441F5DF81E4F01A30</b>
City Tysons Corner	State VA	
Zip Code 22182-2245	Purpose of Disbursement Campaign Software	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1295.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 78 OF 108	
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial)  
**A. Signature Home Comfort Heating and Air**

Mailing Address 669 N Miller Ave

City Springfield State MO Zip Code 65802-6454

Purpose of Disbursement Appliance Repair

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 20 / 2015

Amount of Each Disbursement this Period: 114.26

Transaction ID : B503455934C1B43029CA

Category/Type: 001

Full Name (Last, First, Middle Initial)  
**B. Elliott, Robinson & Company**

Mailing Address 1736 E Sunshine Street Suite 913

City Springfield State MO Zip Code 65804-1337

Purpose of Disbursement 2014 Tax Preparation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 24 / 2015

Amount of Each Disbursement this Period: 335.00

Transaction ID : B9045622109224CA38E7

Category/Type: 001

Full Name (Last, First, Middle Initial)  
**c. Amanda Polt**

Mailing Address 4822 Chadwick Ln

City Saint Peters State MO Zip Code 63304-7519

Purpose of Disbursement February Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 25 / 2015

Amount of Each Disbursement this Period: 750.00

Transaction ID : B27BD5C2975004C70AB1

Category/Type:

**SUBTOTAL** of Disbursements This Page (optional) ..... 1199.26

**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 79 OF 108			
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr. Royce Reding</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2015		
Mailing Address 1459 Miller Avenue			Amount of Each Disbursement this Period 1000.00		
City Springfield	State MO	Zip Code 65802-7111	Transaction ID : <b>BF46B74A7ED8B4BA8AE4</b>		
Purpose of Disbursement March Salary		Category/ Type 001			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Matthew Hough</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2015		
Mailing Address 937 W Broad			Amount of Each Disbursement this Period 600.00		
City Republic	State MO	Zip Code 65738-2501	Transaction ID : <b>B70059026C2CC45B2BC4</b>		
Purpose of Disbursement March Salary		Category/ Type 001			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Sam's Club</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2015		
Mailing Address 3660 E Sunshine Street			Amount of Each Disbursement this Period 344.24		
City Springfield	State MO	Zip Code 65809-2820	Transaction ID : <b>BC204C118763842A1AE2</b>		
Purpose of Disbursement Event Materials		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1944.24
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 80 OF 108	
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Webster County Central Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address 26676 State Highway 38		Amount of Each Disbursement this Period 20.00 <b>Transaction ID : BF9B33B39624D40BD981</b>
City Marshfield State MO Zip Code 65706-8833	Purpose of Disbursement Event Registration Fee Candidate Name Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. McDonald County Republican Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address 30 Wilson Ln		Amount of Each Disbursement this Period 150.00 <b>Transaction ID : BE2EC82F8CF1D493FB21</b>
City Anderson State MO Zip Code 64831-9892	Purpose of Disbursement Event Registration Candidate Name Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Taney County Central Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address PO Box 621		Amount of Each Disbursement this Period 75.00 <b>Transaction ID : B7F487D09B0244B55B29</b>
City Forsyth State MO Zip Code 65653-0621	Purpose of Disbursement Event Registration Candidate Name Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	245.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 81 OF 108	
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Myeloma Institute for Research &amp; Therapy</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 31 / 2015</b>
Mailing Address 4301 W Markham, Slot 816		Amount of Each Disbursement this Period <b>100.00</b> Transaction ID : <b>BC7CEA5A4062F494D9E1</b>
City Little Rock State AR Zip Code 72205-7101	Purpose of Disbursement Memorial Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ELAN Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 31 / 2015</b>
Mailing Address 225 W Station Square Dr		Amount of Each Disbursement this Period <b>13424.84</b> Transaction ID : <b>BFC3AB691820B4B00990</b>
City Pittsburgh State PA Zip Code 15219-1174	Purpose of Disbursement Credit Card Payment	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Red River Co., LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 31 / 2015</b>
Mailing Address 616 Old Stage Road		Amount of Each Disbursement this Period <b>7500.00</b> Transaction ID : <b>BD028CE8F66B6461D8FD</b>
City Glen Burnie State MD Zip Code 21061-4543	Purpose of Disbursement Fundraising Consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>21024.84</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 108			
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. ELAN Financial Services</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2015
Mailing Address 225 W Station Square Dr			Amount of Each Disbursement this Period 12140.04 <b>Transaction ID : B850351923E2A48FC9DE</b>
City Pittsburgh	State PA	Zip Code 15219-1174	
Purpose of Disbursement Credit Card Payment	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2015
Mailing Address 777 Big Timber Road			Amount of Each Disbursement this Period 150.00 <b>Transaction ID : B0D05C22EFF034074A12</b> <b>[MEMO ITEM]</b>
City Elgin	State IL	Zip Code 60123-1488	
Purpose of Disbursement Office Phones	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Distad's BP</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2015
Mailing Address 823 Penn St NE			Amount of Each Disbursement this Period 32.00 <b>Transaction ID : B9FB2D191E8B2414ABF5</b> <b>[MEMO ITEM]</b>
City Washington	State DC	Zip Code 20003-2155	
Purpose of Disbursement Gas	Candidate Name		Category/ Type 002
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	12140.04
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 108			
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2015
Mailing Address PO Box 619688		Amount of Each Disbursement this Period 625.00
City Dallas	State TX	Zip Code 75261-9688
Purpose of Disbursement Airfare	Category/ Type 002	
Candidate Name <b>American Airlines</b>	Transaction ID : <b>B8715AC8152C74CDAB44</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. McDonald's</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address 1091 E Mount Vernon Boulevard		Amount of Each Disbursement this Period 5.99
City Mount Vernon	State MO	Zip Code 65712-2122
Purpose of Disbursement Meal	Category/ Type	
Candidate Name	Transaction ID : <b>BBC7A36652E33428C9DD</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>c. Kum &amp; Go #4</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address 3313 W Battlefield Street		Amount of Each Disbursement this Period 30.81
City Springfield	State MO	Zip Code 65807-3872
Purpose of Disbursement Gas	Category/ Type 002	
Candidate Name	Transaction ID : <b>B3773A9026BFE4FC59DA</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 108			
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kum &amp; Go #4</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address 3313 W Battlefield Street		Amount of Each Disbursement this Period 25.02
City Springfield	State MO Zip Code 65807-3872	
Purpose of Disbursement Gas	Category/Type 002	Transaction ID : BF7BF7DFA6B164A169F6 <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mister Car Wash</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address 2323 E Sunshine St		Amount of Each Disbursement this Period 5.00
City Springfield	State MO Zip Code 65804-1820	
Purpose of Disbursement Vehicle Maintenance	Category/Type 002	Transaction ID : B34CDF58B4EDF46CEB6A <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. McDonald's F4695</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address 850 S Jefferson Avenue		Amount of Each Disbursement this Period 3.51
City Lebanon	State MO Zip Code 65536-3638	
Purpose of Disbursement Meal	Category/Type 007	Transaction ID : BFD261BF55B14438594A <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 85 OF 108	
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ozark Chamber of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2015
Mailing Address Main Sqaure		Amount of Each Disbursement this Period 10.00
City Ozark	State MO	
Zip Code 65721	Purpose of Disbursement Event Registration	Transaction ID : <b>BC735580270654FA698B</b>
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kum &amp; Go #4</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2015
Mailing Address 3313 W Battlefield Street		Amount of Each Disbursement this Period 39.19
City Springfield	State MO	
Zip Code 65807-3872	Purpose of Disbursement Gas	Transaction ID : <b>B7C62EB113B1942D6848</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2015
Mailing Address 500 W Chestnut Expressway		Amount of Each Disbursement this Period 246.85
City Springfield	State MO	
Zip Code 65801-9998	Purpose of Disbursement Postage	Transaction ID : <b>B1A392164681F4EFE8FB</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 108			
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Splash Car Wash</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2015
Mailing Address 10 I St SE		Amount of Each Disbursement this Period 500.00
City Washington	State DC	
Zip Code 20003-3323	Purpose of Disbursement Vehicle Maintenance	Transaction ID : B1122BA782BEC47E6B8D
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Prime Rib</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2015
Mailing Address Downtown		Amount of Each Disbursement this Period 358.77
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Meal	Transaction ID : B8DBB358BB8C44442B15
Candidate Name	Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Joplin Globe</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2015
Mailing Address Downtown		Amount of Each Disbursement this Period 292.98
City Joplin	State MO	
Zip Code 64801	Purpose of Disbursement Subscription Fee	Transaction ID : B868A5FC39E2145E681C
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 108			
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mister Car Wash</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2015
Mailing Address 2323 E Sunshine St		Amount of Each Disbursement this Period 32.99
City Springfield	State MO Zip Code 65804-1820	
Purpose of Disbursement Vehicle Maintenance	Category/Type 002	Transaction ID : B6BC843177C5D4C99953 <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. UPS Store</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2015
Mailing Address 2733 E Battlefield Street		Amount of Each Disbursement this Period 21.32
City Springfield	State MO Zip Code 65804-3981	
Purpose of Disbursement Shipping	Category/Type 001	Transaction ID : B0ADAC6BC1CFB4955AFF <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. McDonald's</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2015
Mailing Address 1091 E Mount Vernon Boulevard		Amount of Each Disbursement this Period 18.38
City Mount Vernon	State MO Zip Code 65712-2122	
Purpose of Disbursement Meal	Category/Type	Transaction ID : B17AF4BCBF7F7477C9E4 <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 88 OF 108	
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Springfield Area Chamber of Commerce</b>		Date of Disbursement MM / DD / YYYY 01 / 13 / 2015
Mailing Address PO Box 1687		Amount of Each Disbursement this Period 420.00 <b>Transaction ID : B7E6B21EDE3064833A78</b>
City Springfield	State MO	
Zip Code 65801-1687	Purpose of Disbursement Membership Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. Lowe's #0733</b>		Date of Disbursement MM / DD / YYYY 01 / 13 / 2015
Mailing Address 1707 W Norton Road		Amount of Each Disbursement this Period 21.48 <b>Transaction ID : BE0CEB82E7DB74A859E1</b>
City Springfield	State MO	
Zip Code 65803-5301	Purpose of Disbursement Office Equipment	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>c. Kum &amp; Go #550</b>		Date of Disbursement MM / DD / YYYY 01 / 13 / 2015
Mailing Address 2404 E Sunshine Street		Amount of Each Disbursement this Period 40.79 <b>Transaction ID : BE700A94C61FF411BA4D</b>
City Springfield	State MO	
Zip Code 65804-1823	Purpose of Disbursement Gas	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 108			
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Applebee's Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 1855 E Primrose Street		Amount of Each Disbursement this Period 58.97
City Springfield	State MO	
Zip Code 65804-4293	Purpose of Disbursement Meal	Transaction ID : B9952EA24698E40F79E1
Candidate Name	007 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2015
Mailing Address PO Box 650553		Amount of Each Disbursement this Period 173.78
City Dallas	State TX	
Zip Code 75265-0553	Purpose of Disbursement Office Phones	Transaction ID : B9EFE73E21DB8456184D
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Price Cutter #50</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2015
Mailing Address 3260 E Battlefield Street		Amount of Each Disbursement this Period 37.67
City Springfield	State MO	
Zip Code 65804-4051	Purpose of Disbursement Office Equipment	Transaction ID : B639EC81BE9AA4FD8B07
Candidate Name	007 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 90 OF 108	
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2015
Mailing Address PO Box 36647		Amount of Each Disbursement this Period 1040.60
City Dallas	State TX	
Zip Code 75235-1647	Purpose of Disbursement Airfare	<b>Transaction ID : B728ED2A5E6834B0D87A</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Price Cutter #50</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2015
Mailing Address 3260 E Battlefield Street		Amount of Each Disbursement this Period 6.99
City Springfield	State MO	
Zip Code 65804-4051	Purpose of Disbursement Campaign Event- Food/Beverage	<b>Transaction ID : B8D794728017342A8B7E</b>
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Hootsuite</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2015
Mailing Address 5 East 8th Ave		Amount of Each Disbursement this Period 9.99
City Vancouver, Bc	State	
Zip Code	Purpose of Disbursement Software Fee	<b>Transaction ID : BE1E40A3CEA464EDE84A</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 108			
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jimmy's Egg</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2015
Mailing Address 3315 E Battlefield Rd		Amount of Each Disbursement this Period 11.11
City Springfield	State MO	
Zip Code 65804-4048	Purpose of Disbursement Meal	Transaction ID : B6663C8CAC5DE40B7BE9
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Constant Contact</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2015
Mailing Address 1601 Trapelo Road		Amount of Each Disbursement this Period 20.00
City Waltham	State MA	
Zip Code 02451-7333	Purpose of Disbursement Campaign Software	Transaction ID : BE687C0C053254203AC1
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jimm's Steakhouse &amp; Pub</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2015
Mailing Address 1935 S Glenstone Avenue		Amount of Each Disbursement this Period 49.68
City Springfield	State MO	
Zip Code 65804-2304	Purpose of Disbursement Meal	Transaction ID : B6E3B30ADA881462382B
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 108			
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Lowe's #0422</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2015
Mailing Address 1850 E Primrose Street		Amount of Each Disbursement this Period 8.48
City Springfield	State MO Zip Code 65804-6496	
Purpose of Disbursement Office Equipment	Category/Type 001	Transaction ID : B28CB9A0FC8BF4FADB9E
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2015
Mailing Address PO Box 619688		Amount of Each Disbursement this Period 657.10
City Dallas	State TX Zip Code 75261-9688	
Purpose of Disbursement Airfare	Category/Type 002	Transaction ID : BB197B26978E14C77B46
Candidate Name <b>American Airlines</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Missouri Republican Party</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2015
Mailing Address 204 E Dunklin Street		Amount of Each Disbursement this Period 155.00
City Jefferson City	State MO Zip Code 65101-3127	
Purpose of Disbursement Event Registration	Category/Type 007	Transaction ID : BF6377B2D6BA7422D874
Candidate Name <b>Missouri Republican Party</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 93 OF 108	
	<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)  
**Billy Long for Congress**

**A. Greenbrier Resort**

Full Name (Last, First, Middle Initial)  
Mailing Address 300 W Main Street

City White Sulphur Springs State WV Zip Code 24986-2414

Purpose of Disbursement Campaign Event Materials

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 20 / 2015

Amount of Each Disbursement this Period: 216.12

Transaction ID : BC2DF26D9A2134EE8A30

**[MEMO ITEM]**

**B. Hershey Lodge**

Full Name (Last, First, Middle Initial)  
Mailing Address 325 University Drive

City Hershey State PA Zip Code 17033-2800

Purpose of Disbursement Meal

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 20 / 2015

Amount of Each Disbursement this Period: 24.50

Transaction ID : BC4C9A642EC534661944

**[MEMO ITEM]**

**C. Southwest Airlines**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 36647

City Dallas State TX Zip Code 75235-1647

Purpose of Disbursement Airfare

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 20 / 2015

Amount of Each Disbursement this Period: 185.60

Transaction ID : B0D48ECE5AC434652B03

**[MEMO ITEM]**

**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 95 OF 108			
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. House Gift Shop</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2015		
Mailing Address Longworth Office Bldg			Amount of Each Disbursement this Period 72.35		
City Washington	State DC	Zip Code 20515-0001	Transaction ID : B3052E90516F64F07991		
Purpose of Disbursement Event Supplies		Category/ Type 006	[MEMO ITEM]		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Kum &amp; Go #4</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2015		
Mailing Address 3313 W Battlefield Street			Amount of Each Disbursement this Period 24.47		
City Springfield	State MO	Zip Code 65807-3872	Transaction ID : B783DDE8DD5B24DE69F5		
Purpose of Disbursement Gas		Category/ Type 002	[MEMO ITEM]		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Jimmy's Egg</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2015		
Mailing Address 3315 E Battlefield Rd			Amount of Each Disbursement this Period 20.59		
City Springfield	State MO	Zip Code 65804-4048	Transaction ID : B25019581559C478EA99		
Purpose of Disbursement Meal		Category/ Type 007	[MEMO ITEM]		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 96 OF 108	
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. House Gift Shop</b>		Date of Disbursement MM / DD / YYYY 01 / 21 / 2015
Mailing Address Longworth Office Bldg		Amount of Each Disbursement this Period 72.35
City Washington	State DC	
Zip Code 20515-0001	Purpose of Disbursement Event Supplies	Transaction ID : B8713F6C04D80469B933
Candidate Name	Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jimmy's Egg</b>		Date of Disbursement MM / DD / YYYY 01 / 21 / 2015
Mailing Address 3315 E Battlefield Rd		Amount of Each Disbursement this Period 20.59
City Springfield	State MO	
Zip Code 65804-4048	Purpose of Disbursement Meal	Transaction ID : B9D26AA45320044D5B52
Candidate Name	Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Panera Bread</b>		Date of Disbursement MM / DD / YYYY 01 / 21 / 2015
Mailing Address 2401 E 32nd Street		Amount of Each Disbursement this Period 3.85
City Joplin	State MO	
Zip Code 64804-3177	Purpose of Disbursement Meal	Transaction ID : BB82A10C8789C435280A
Candidate Name	Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 108			
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kum &amp; Go #4</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2015
Mailing Address 3313 W Battlefield Street			Amount of Each Disbursement this Period 24.47
City Springfield	State MO	Zip Code 65807-3872	
Purpose of Disbursement Gas		Category/ Type 002	<b>Transaction ID : B48FA98B7F5294C9BA3D</b>  <b>[MEMO ITEM]</b>
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. Distad's BP</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2015
Mailing Address 823 Penn St NE			Amount of Each Disbursement this Period 64.80
City Washington	State DC	Zip Code 20003-2155	
Purpose of Disbursement Gas		Category/ Type 002	<b>Transaction ID : BF24677BDC0B1406CBBB</b>  <b>[MEMO ITEM]</b>
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) <b>C. Distad's BP</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2015
Mailing Address 823 Penn St NE			Amount of Each Disbursement this Period 64.80
City Washington	State DC	Zip Code 20003-2155	
Purpose of Disbursement Gas		Category/ Type 002	<b>Transaction ID : B40B5FF1BDD84BB480D</b>  <b>[MEMO ITEM]</b>
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 108			
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2015
Mailing Address PO Box 650553		Amount of Each Disbursement this Period 45.00
City Dallas	State TX	
Zip Code 75265-0553	Purpose of Disbursement Office Phones	Transaction ID : B2CB49B6787B14D3ABBF
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Flame</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2015
Mailing Address 314 W Walnut Street		Amount of Each Disbursement this Period 43.59
City Springfield	State MO	
Zip Code 65806-2118	Purpose of Disbursement Meal	Transaction ID : BBA98A701A67F46F49BC
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2015
Mailing Address PO Box 650553		Amount of Each Disbursement this Period 45.00
City Dallas	State TX	
Zip Code 75265-0553	Purpose of Disbursement Office Phones	Transaction ID : B4894C0BB55814568933
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 108			
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Flame</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2015
Mailing Address 314 W Walnut Street		Amount of Each Disbursement this Period 43.59
City Springfield	State MO	
Zip Code 65806-2118	Purpose of Disbursement Meal	Transaction ID : <b>B6AB53D8F8F4B41E2955</b>
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kum &amp; Go #4</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2015
Mailing Address 3313 W Battlefield Street		Amount of Each Disbursement this Period 32.42
City Springfield	State MO	
Zip Code 65807-3872	Purpose of Disbursement Gas	Transaction ID : <b>B13520B8D222E4DA3B83</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. O'Reilly Auto Parts</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2015
Mailing Address PO Box 1156		Amount of Each Disbursement this Period 33.86
City Springfield	State MO	
Zip Code 65801-1156	Purpose of Disbursement Vehicle Maintenance	Transaction ID : <b>B150E1997E24D4BF9B72</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 108	
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kum &amp; Go #4</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2015
Mailing Address 3313 W Battlefield Street		Amount of Each Disbursement this Period 32.42
City Springfield	State MO Zip Code 65807-3872	
Purpose of Disbursement Gas	Category/Type 002	Transaction ID : <b>BC166476DA88044AFA88</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Wall Street Journal</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2015
Mailing Address 1211 Avenue Of The Americas		Amount of Each Disbursement this Period 113.19
City New York	State NY Zip Code 10036-8701	
Purpose of Disbursement Subscription Fee	Category/Type 001	Transaction ID : <b>B7AC0CE129A644A03B57</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. O'Reilly Auto Parts</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2015
Mailing Address PO Box 1156		Amount of Each Disbursement this Period 33.86
City Springfield	State MO Zip Code 65801-1156	
Purpose of Disbursement Vehicle Maintenance	Category/Type 002	Transaction ID : <b>BDBD66164BA1F45A5BEF</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 108			
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Wall Street Journal</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2015
Mailing Address 1211 Avenue Of The Americas			Amount of Each Disbursement this Period 113.19
City New York	State NY	Zip Code 10036-8701	Transaction ID : <b>BE41B699344E64EAEB27</b>  <b>[MEMO ITEM]</b>
Purpose of Disbursement Subscription Fee		001 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Office Depot #106</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2015
Mailing Address 3111 S Glenstone Avenue			Amount of Each Disbursement this Period 13.97
City Springfield	State MO	Zip Code 65804-4403	Transaction ID : <b>B42EEB0703B674DE7832</b>  <b>[MEMO ITEM]</b>
Purpose of Disbursement Office Equipment		001 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>c. Kum &amp; Go #550</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2015
Mailing Address 2404 E Sunshine Street			Amount of Each Disbursement this Period 27.59
City Springfield	State MO	Zip Code 65804-1823	Transaction ID : <b>B756F97FCCEBE40FEA80</b>  <b>[MEMO ITEM]</b>
Purpose of Disbursement Gas		002 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 108	
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Prime Rib</b>		Date of Disbursement MM / DD / YYYY 01 / 29 / 2015
Mailing Address Downtown		Amount of Each Disbursement this Period 1407.00 <b>Transaction ID : B2D645EF3F0B242EF899</b>
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Meal	Category/Type 007	<b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Prime Rib</b>		Date of Disbursement MM / DD / YYYY 01 / 29 / 2015
Mailing Address Downtown		Amount of Each Disbursement this Period 1407.00 <b>Transaction ID : B1DC34240CB7F4D3885B</b>
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Meal	Category/Type 007	<b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Office Depot #106</b>		Date of Disbursement MM / DD / YYYY 01 / 29 / 2015
Mailing Address 3111 S Glenstone Avenue		Amount of Each Disbursement this Period 13.97 <b>Transaction ID : B1C83DC2779C9453B8AE</b>
City Springfield	State MO Zip Code 65804-4403	
Purpose of Disbursement Office Equipment	Category/Type 001	<b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 108	
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kum &amp; Go #550</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2015
Mailing Address 2404 E Sunshine Street		Amount of Each Disbursement this Period 27.59
City Springfield	State MO	
Zip Code 65804-1823	Purpose of Disbursement Gas	Transaction ID : B38ECA6F5B27E4184AC6
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jimm's Steakhouse &amp; Pub</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2015
Mailing Address 1935 S Glenstone Avenue		Amount of Each Disbursement this Period 40.40
City Springfield	State MO	
Zip Code 65804-2304	Purpose of Disbursement Meal	Transaction ID : BC1AAFA3956164B82A65
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Applebee's Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2015
Mailing Address 1855 E Primrose Street		Amount of Each Disbursement this Period 38.15
City Springfield	State MO	
Zip Code 65804-4293	Purpose of Disbursement Meal	Transaction ID : B3C565F519FF5432AB72
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 104 OF 108	
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Copy Shoppe</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2015
Mailing Address 1446 E Sunshine Street		Amount of Each Disbursement this Period 199.79
City Springfield	State MO Zip Code 65804-1238	
Purpose of Disbursement Event Material	Category/Type 003	Transaction ID : BE16FDCDA84CC45B19C7 <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jimmy's Egg</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2015
Mailing Address 3315 E Battlefield Rd		Amount of Each Disbursement this Period 25.28
City Springfield	State MO Zip Code 65804-4048	
Purpose of Disbursement Meal	Category/Type 007	Transaction ID : B54C769F53557473BB18 <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jimm's Steakhouse &amp; Pub</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2015
Mailing Address 1935 S Glenstone Avenue		Amount of Each Disbursement this Period 40.40
City Springfield	State MO Zip Code 65804-2304	
Purpose of Disbursement Meal	Category/Type 007	Transaction ID : BC46664168BD24AE0927 <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 108			
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial)  
**A. Applebee's Restaurant**

Mailing Address 1855 E Primrose Street

City Springfield State MO Zip Code 65804-4293

Purpose of Disbursement Meal

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 30 / 2015

Amount of Each Disbursement this Period: 38.15

Transaction ID : BE6B4D31794FE4058846

**[MEMO ITEM]**

Category/Type: 007

Full Name (Last, First, Middle Initial)  
**B. Jimmy's Egg**

Mailing Address 3315 E Battlefield Rd

City Springfield State MO Zip Code 65804-4048

Purpose of Disbursement Meal

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 30 / 2015

Amount of Each Disbursement this Period: 25.28

Transaction ID : B4A826B10646A483D938

**[MEMO ITEM]**

Category/Type: 007

Full Name (Last, First, Middle Initial)  
**c. The Copy Shoppe**

Mailing Address 1446 E Sunshine Street

City Springfield State MO Zip Code 65804-1238

Purpose of Disbursement Event Material

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 30 / 2015

Amount of Each Disbursement this Period: 199.79

Transaction ID : B99A5FECA3F6E488B91C

**[MEMO ITEM]**

Category/Type: 003

**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 106 OF 108	
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 14 / 2015</b>
Mailing Address 2636 N Kansas Expressway		Amount of Each Disbursement this Period <b>27.41</b>
City Springfield	State MO Zip Code 65803-1162	
Purpose of Disbursement Office Equipment	Category/Type <b>001</b>	<b>Transaction ID : B6398EA3E8C754CADA45</b> <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	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>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>75385.41</b>

**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 108	
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Wounded Warrior Project</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2015
Mailing Address 4899 Belfort Road Suite 300		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : B63E16EBCE9684E1B924</b>
City Jacksonville	State FL Zip Code 32256-6033	
Purpose of Disbursement Donation	Category/Type 012	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Cancer Society</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2015
Mailing Address PO Box 22718		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : BACF8300ABCA7494DA09</b>
City Oklahoma City	State OK Zip Code 73123-1718	
Purpose of Disbursement Memorial Donation	Category/Type 012	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Central Assembly of God</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2015
Mailing Address 1301 N Boonville		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : B0E03F6BF958C444D9E6</b>
City Springfield	State MO Zip Code 65802-1803	
Purpose of Disbursement Memorial Donation	Category/Type 012	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 108 OF 108	
	<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)  
**Billy Long for Congress**

Full Name (Last, First, Middle Initial) <b>A. Carthage Police Department</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2015
Mailing Address 31 W 4th Street		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : B0478EDF3C5424622996</b>
City Carthage	State MO Zip Code 64836	
Purpose of Disbursement Memorial Contribution	Category/Type 012	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Alzheimer's Association</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2015
Mailing Address 225 N Michigan Avenue Floor 17		Amount of Each Disbursement this Period 60.00 <b>Transaction ID : B139CB464DAA54D4C818</b>
City Chicago	State IL Zip Code 60601-7652	
Purpose of Disbursement Memorial Contribution	Category/Type 012	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. American Cancer Society</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2015
Mailing Address PO Box 22718		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : B5A145E3F09B54FF18CD</b>
City Oklahoma City	State OK Zip Code 73123-1718	
Purpose of Disbursement Memorial Donation	Category/Type 012	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	160.00
<b>TOTAL</b> This Period (last page this line number only).....	460.00