PAGE 1 / 31

FEC FORM 3		ND DIS		ECEIPTS EMENTS ommittee		o	ffice Use Only
1. NAME OF COMMITTEE (in		TYPE OR PRIN	Γ ▼	Example: If typin over the lines.	g, type	12FE4M5	
JOE KAUFMA	N FOR C	ONGRESS	S				
ADDRESS (number ar	nd street)	2645 EXECUT		E STE 512			
Check if dif							
than previou reported. (A	usly	WESTON				FL 3	3331
2. FEC IDENTIFIC	CATION NU	MBER 🔻	CITY 4			STATE A	ZIP CODE
C C0050120	05		3. IS THIS REPOR	~	OR	AMENDEI (A)	D STATE ▼ DISTRICT
July 15 Cotobe January	eports: 5 Quarterly Re Quarterly Re	eport (Q1) eport (Q2) y Report (Q3) I Report (YE)	Election	POST-Election Rep General (30G) 12C)	<u>.</u>	in the State of
5. Covering Period		1 / D D /	Y Y Y Y 2016	through	M N 09	4 / D D / 30	Y Y Y Y 2016
I certify that I have e Type or Print Name		s Report and to KAUFMAN, J		y knowledge and	belief it is t	true, correct and c	complete.
Signature of Treasure		FMAN, JOE, , ,		[Electronically]	Filed]	Date	/ D D / Y Y Y Y 15 2016
	false, erroned	ous, or incomple	te information n	nay subject the per	son signing	this Report to the	penalties of 52 U.S.C. §30109
Office Use Only							FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements PAGE 2 / 31 FEC Form 3 (Revised 05/2016) Write or Type Committee Name JOE KAUFMAN FOR CONGRESS М D D D D ž016 08 2016 09 30 11 Report Covering the Period: From: To: COLUMN A COLUMN B This Period **Election Cycle-to-Date** 6. Net Contributions (other than loans) **Total Contributions** (a) 16308.93 129014.84 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 16308.93 129014.84 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 35304.92 94405.36 (from Line 17) (b) Total Offsets to Operating 1150.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 35304.92 93255.36 (subtract Line 7(b) from Line 7(a)) 8. Cash on Hand at Close of 390815.32 Reporting Period (from Line 27)..... 9. Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 89862.53 Schedule C and/or Schedule D)

For further information contact:

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

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

Image# 20161015903	2871250

1	TAILED SUMMARY PAGE of Receipts	PAGE 3 / 31
FEC Form 3 (Revised 05/2016)		FAGE 3731
Write or Type Committee Name JOE KAUFMAN FOR CONGRESS		
JOE RAUFMAN FOR CONGRESS		
Report Covering the Period: From:	/ D D / Y Y Y Y 11 2016 To:	M M / D D / Y Y Y Y 09 30 2016
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than		
Political Committees (i) Itemized (use Schedule A)	8952.34	54786.79
	7050 50	7 7 7
(ii) Unitemized (iii) TOTAL of contributions	7356.59	74228.05
from individuals	16308.93	129014.84
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)	· · · · · · · · · · · · · ·	
(d) The Candidate (e) TOTAL CONTRIBUTIONS	0.00	0.00
(other than loans)		
(add Lines 11(a)(iii), (b), (c), and (d))	16308.93	129014.84
12. TRANSFERS FROM OTHER	0.00	0.00
AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	0.00	5745.93
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS		F745.00
(add Lines 13(a) and (b))	0.00	5745.93
14. OFFSETS TO OPERATING		
EXPENDITURES (Refunds, Rebates, etc.)	0.00	1150.00
15. OTHER RECEIPTS	, ,	, ,
(Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15)		
(Carry Total to Line 24, page 4)	16308.93	135910.77

of Disbursements FEC Form 3 (Revised 05/2016) COLUMN A COLUMN B **II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 35304.92 94405.36 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 9500.00 0.00 by the Candidate..... 0.00 0.00 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 0.00 9500.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other (a) 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees..... Other Political Committees (c) 0.00 0.00 (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS 0.00 0.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 35304.92 103905.36 (add Lines 17, 18, 19(c), 20(d), and 21)

DETAILED SUMMARY PAGE

III. CASH SUMMARY

23.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD		7		7	409811.31
24	TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)		7		7	16308.93
25.	SUBTOTAL (add Line 23 and Line 24)	Γ.	7		7	426120.24
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		7		7	35304.92
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	[.	7		7	390815.32

Image# 201610159032871251

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS							
or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRES		address of any political commit	tee to solicit contributions from such committee.			
Α.	Full Name (Last, First, Middle Initial) ANNETTS, PAUL, W, MR, Mailing Address 57 HAMPSHIRE RD			Date of Receipt			
	City FISHKILL	State NY	Zip Code 12524	09 02 2016 Transaction ID : SA11AI.60616			
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period			
	Name of Employer RETIRED Receipt For: 2016 Primary ✗ General Other (specify) ▼	Occupation RETIRED Election C	vcle-to-Date 210.00	Memo Item Contribution			
в.	Full Name (Last, First, Middle Initial) ANNETTS, PAUL, W, MR, Mailing Address ₅₇ HAMPSHIRE RD			Date of Receipt			
	City FISHKILL	State NY	Zip Code 12524	Transaction ID : SA11AI.60640			
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 25.00 Memo Item Contribution			
	Name of Employer RETIRED	Occupation RETIRED	1				
	Receipt For: 2016 Primary	Election Cy	235.00				
C.	Full Name (Last, First, Middle Initial) BRIGHT STAR PAC Mailing Address 5701 Cypress Rd.			Date of Receipt			
	City	State	Zip Code	09 12 Y Y Y Y 2016			
	Plantation	FL	33317	Transaction ID : SA11AI.60689			
	FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period			
Name of Employer C		Occupation	I	5000.00			
	Receipt For: 2016 Primary	Election Cy	vcle-to-Date ▼ 8000.00	Memo Item Contribution			
	UBTOTAL of Receipts This Page (optional)			5040.00			

6/	CHEDULE A (FEC Form 3)			FOR LINE NUMBER: PAGE 6 OF 31					
	• •		Use separate schedule(s)	(check only one)					
IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 11d					
			Detailed Summary 1 age	12 13a 13b 14 15					
				person for the purpose of soliciting contributions					
or	for commercial purposes, other than using the	e name and a	address of any political committee	ee to solicit contributions from such committee.					
$\left \right\rangle$	NAME OF COMMITTEE (In Full)								
$ \rangle$	JOE KAUFMAN FOR CONGRES	SS							
\langle									
	Full Name (Last, First, Middle Initial)								
Α.	HARING, ANGELINE, , ,			Date of Receipt					
	Mailing Address 825 ALEXANDER RD W	M M / D D / Y Y Y Y							
				08 28 2016					
	City	State	Zip Code	Transaction ID : SA11AI.60364					
	BELLVILLE	OH	44813						
	FEC ID number of contributing	0		Amount of Each Receipt this Period					
	federal political committee.	С		Amount of Each Necept this renou					
				95.50					
	Name of Employer	Occupation							
	retired	retired		- Memo Item					
	Receipt For: 2016	Election Cy	/cle-to-Date	Contribution					
	Primary General		291.00						
	Other (specify)		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7						
	Full Name (Last, First, Middle Initial)								
В.	Kaufman, Joseph, , ,	Date of Receipt							
	Mailing Address 8708 NW 82 ST.			M M / D D / Y Y Y Y					
	01	01-11-		08 18 2016					
	City	State	Zip Code	Transaction ID : SA11AI.60457					
	Tamarac	FL	33321						
	FEC ID number of contributing	С		Amount of Each Receipt this Period					
	federal political committee.	U		Anount of Each Necept this renou					
	Name of Employer	Occupation		3000.00					
		Writer and r							
	SELF EMPLOY			Memo Item					
	Receipt For: 2016	Election Cy	/cle-to-Date ▼	LOAN					
	Primary X General		10172.93	11					
	Other (specify) ▼		, , ,	1					
	Full Name (Last, First, Middle Initial)								
	Leahy, Robert, , ,			Date of Receipt					
C.	Mailing Address 622 Jasmine La								
	622 Jasmine La			08 17 2016					
	City	State	Zip Code	Transaction ID : SA11AI.60356					
	Sunset Beach	NC	28468	Transaction ID : SATTAI.60356					
		_							
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period					
		•							
	Name of Employer	Occupation	I	33.42					
	Retired	retired		, , , , , , , , , , , , , , , , , , , ,					
	Receipt For: 2016	Election C	/cle-to-Date	Memo Item					
	x Primary General		•	Contribution					
	Other (specify)		501.30						
			7 7 7	*					
	UBTOTAL of Receipts This Page (optional)			3128.92					
Ļ	CONTINE OF RECEIPTS THIS Page (optional)								
-	OTAL This Period (last page this line number of	anly)							
1	UNE THIS FERIOU (last page this line number of	ווע)							

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a									
	NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRES								
A. Full Name (Last, First, Middle Initial) Mailing Address 622 Jasmine La				Date of Receipt					
	City Sunset Beach	State NC	Zip Code 28468	09 15 2016 Transaction ID : SA11AI.60408					
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period					
	Retired Receipt For: 2016 Primary X General		n ycle-to-Date ▼ 534.72	Memo Item Contribution					
В.	Other (specify) ▼ Full Name (Last, First, Middle Initial) TATE, STANLEY, , , Mailing Address 9999 COLLINS AVE		9 1 9 1 1 1 1 1 1	Date of Receipt					
	City BAL HARBOUR	State	Zip Code 33154	09 12 2016 Transaction ID : SA11AI.60677					
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period						
	Name of Employer RETIRED	Occupation RETIRED	1	Memo Item Contribution					
	Receipt For: 2016 Primary ★ General Other (specify) ▼	Election C	ycle-to-Date 350.00						
с.	Full Name (Last, First, Middle Initial) Wallace, Virginia, , , Mailing Address 265 Lakewood Ct			Date of Receipt					
	City Rocky Mount	State VA	Zip Code 24157	08 23 2016 Transaction ID : SA11AI.60472					
	FEC ID number of contributing federal political committee. Name of Employer retired Occurretired			Amount of Each Receipt this Period					
				500.00					
	Receipt For: 2016 Primary		ycle-to-Date ▼ 500.00	Contribution					
s	UBTOTAL of Receipts This Page (optional)			783.42					
Г	OTAL This Period (last page this line number o	only)		▶ 8952.34					

~						FOR LINE NUMBER: PAGE 8 OF 31				
	CHEDULE B (FEC Form 3)		Use separate schedule(s)			(check only one)				
IT	EMIZED DISBURSEMENTS		for each category of the Detailed Summary Page			✗ 17 18 19a 19b				
۸-	ny information copied from such Reports and Stat	omonto		ot he cold or :		20a 20b 20c 21				
	for commercial purposes, other than using the na									
\setminus	NAME OF COMMITTEE (In Full)									
	JOE KAUFMAN FOR CONGRES	S								
_	Full Name (Last, First, Middle Initial)					Date of Disbursement				
Α.	A Plus Printing									
	Mailing Address 6561 NW 18th Ct	08 12 2016								
	City	State		Zip Code		FEC Identification Number				
	Plantation	FL		33313						
	Purpose of Disbursement Graphics and Printing					C				
	Candidate Name				Category/	Amount of Each Disbursement this Period				
)16	Туре					
	Office Sought: House Disburse Senate	ement For Primary	. 20	General		1524.00 Transaction ID : SB17.60696				
	President	Other (s	pecif							
	State: District:	-				Memo Item				
	Full Name (Last, First, Middle Initial)					Date of Dishumanest				
В.						Date of Disbursement				
	Mailing Address Online					08 / 12 / Y Y Y Y 08 12 2016				
	City	State Zip Code				FEC Identification Number				
	Durpoon of Diaburgourset		Category/							
	Purpose of Disbursement Advertisement									
	Candidate Name					Amount of Each Disbursement this Period				
		···· -			Туре					
	Office Sought: House Disburse	ement For Primary				5000.00				
	President					Transaction ID : SB17.60811				
	State: District:	. L		·		Memo Item				
	Full Name (Last, First, Middle Initial)									
C.	Cheappcintink					Date of Disbursement				
	Mailing Address Online					M M / D D / Y Y Y Y 08 18 2016				
	City	State		Zip Code		FEC Identification Number				
	Online			T						
	Purpose of Disbursement T Shirts				· · · ·					
Candidate Name					Category/	Amount of Each Disbursement this Period				
	Office Sought: House Disburse	ement For	: 20)16	Туре	229.00				
	Senate X	Primary	_0	General		Transaction ID : SB17.60712				
	President	Other (s	pecif	fy) ▼		Memo Item				
_	State: District:									
	SUBTOTAL of Disbursements This Page (optional)				▶ 6753.00				
	TOTAL This Period (last page this line number on	ly)				··· ▶				

_			Í			FOR LINE NUMBER: PAGE 9 OF 31				
S	CHEDULE B (FEC Form 3)		Use	e separate sch	edule(s)	FOR LINE NUMBER: PAGE 9 OF 31 (check only one)				
IT	EMIZED DISBURSEMENTS		for each category of the Detailed Summary Page			X 17 18 19a 19b				
_					, °	20a 20b 20c 21				
	y information copied from such Reports and Stat for commercial purposes, other than using the na									
	NAME OF COMMITTEE (In Full)									
	> JOE KAUFMAN FOR CONGRESS									
	Full Name (Last, First, Middle Initial)									
Α.	City of Aventura					Date of Disbursement				
	Mailing Address 19200 West Country Club Drive					08 12 2016				
	City	State	Z	Zip Code		FEC Identification Number				
	Aventura	FL		33180						
	Purpose of Disbursement Political Yard Signs				· · ·					
	Candidate Name				Category/	Amount of Each Disbursement this Period				
		· · · -		40	Туре					
	Office Sought: House Disburse Senate	ement For Primary		16 General		500.00 Transaction ID : SB17.60693				
	President	Other (s								
	State: District:		-			Memo Item				
	Full Name (Last, First, Middle Initial) Drive Media									
В.						Date of Disbursement				
	Mailing Address 404 Washington Ave ste 650					09 / 12 / Y Y Y Y 09 12				
	City	State Zip Code				FEC Identification Number				
	Miami Beach	FL		33139						
	Purpose of Disbursement Digital Marketing		Category/							
	Candidate Name					Amount of Each Disbursement this Period				
		· -			Туре					
		ement For Primary	nent For: 2016 Primary			300.00				
	Senate President	·				Transaction ID : SB17.60774				
	State: District:			··· •		Memo Item				
	Full Name (Last, First, Middle Initial)									
C.	Facebook Advertisement					Date of Disbursement				
	Mailing Address Online					M M / D D / Y Y Y Y 08 / 26 / 2016				
	City	State		Zip Code		FEC Identification Number				
	Online									
	Purpose of Disbursement Advertisement					C				
	Candidate Name				Category/ Type	Amount of Each Disbursement this Period				
	Office Sought: House Disburse	ement For	: 20	16	-76-	250.51				
	Senate x	Primary		General		Transaction ID : SB17.60730				
	State: District:	Other (s	specify	^{y)} v		Memo Item				
	State: District:									
	SUBTOTAL of Disbursements This Page (optional)				► 1050.51				
	TOTAL This Davied (look as as this line much									
	TOTAL This Period (last page this line number on	ııy)				•••••				

S	HEDULE B (FEC Form 3)		Use separate scl	nedule(s)	FOR LINE NUMBER: PAGE 10 OF 31 (check only one)				
IT	EMIZED DISBURSEMENTS		for each categor Detailed Summar	y of the	X 17 18 19a 19b 20a 20b 20c 21				
					person for the purpose of soliciting contributions				
or	for commercial purposes, other than using the n NAME OF COMMITTEE (In Full)	arne and a	address of any poli	tical commit	ee to solicit contributions from such committee.				
А.	Full Name (Last, First, Middle Initial) Facebook Advertisement	Date of Disbursement							
	Mailing Address Online				09 / D D / Y Y Y Y 01 2016				
	City Online	State	Zip Code		FEC Identification Number				
	Purpose of Disbursement Advertisement				C				
	Candidate Name			Category, Type	Amount of Each Disbursement this Period				
	Senate	ement For Primary	X General		430.10 Transaction ID : SB17.60752				
	State: District:	Other (s	pecify) 🔻		Memo Item				
в.	Full Name (Last, First, Middle Initial) Facebook Advertisement				Date of Disbursement				
	Mailing Address Online			M M / D D / Y Y Y Y 09 / 26 / 2016					
	City Online	State	Zip Code		FEC Identification Number				
	Purpose of Disbursement Advertisement				C				
	Candidate Name			Category, Type	Amount of Each Disbursement this Period				
	Office Sought: House Disburst Senate President State: District:	ement For Primary Other (s	C 2016	500.10 Transaction ID : SB17.60803 Memo Item					
	Full Name (Last, First, Middle Initial) Kaufman, Joe, , ,				Date of Disbursement				
0.	Mailing Address 8708 NW 82. st.				M M / D D / Y				
	City Tamarac	State FL	Zip Code 33321		FEC Identification Number				
	Purpose of Disbursement Reimburstment				C				
	Candidate Name			Category, Type	Amount of Each Disbursement this Period				
		ement For			2000.00				
	State:	Primary Other (s	pecify) ▼		Transaction ID : SB17.60728				
Г	State: District:	、 、							
_	SUBTOTAL of Disbursements This Page (optional	,							
	TOTAL This Period (last page this line number or	ily)			··· ▶				

64	HEDULE B (FEC Form 3)]			FOR LINE NUMBER: PAGE 11 OF 31			
	· · · · ·		Use separate sch for each category	• • •	(check only one)			
11	EMIZED DISBURSEMENTS		Detailed Summar		★ 17 18 19a 19b 20a 20b 20c 21			
An	y information copied from such Reports and State	ements ma	ay not be sold or i	used by anv				
	for commercial purposes, other than using the na							
$\left \right $	NAME OF COMMITTEE (In Full)	_						
	JOE KAUFMAN FOR CONGRESS	5						
4	Full Name (Last, First, Middle Initial)							
Α.	Kaufman, Joe, , ,				Date of Disbursement			
	Molling Address 9709 NW 92 at				09 14 2016			
	Mailing Address 8708 NW 82. st.				2010			
		State	Zip Code		FEC Identification Number			
	Tamarac	FL	33321					
	Purpose of Disbursement Reimburstment							
	Candidate Name			Category/	Amount of Each Disbursement this Period			
				Туре				
	Office Sought: House Disburser Senate	ment For: Primary	2016 X General		5000.00			
	President		pecify) ▼		Transaction ID : SB17.60779			
	State: District:				Memo Item			
	Full Name (Last, First, Middle Initial)							
В.	Kaufman, Joe, , ,				Date of Disbursement			
	Mailing Address 8708 NW 82. st.				09 14 2016			
	City : Tamarac	State Zip Code FL 33321			FEC Identification Number			
	Purpose of Disbursement				С			
	Réimburstment							
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period			
	Office Sought: House Disburser	ment For:	2016	iyhe	3000.00			
	Senate	Primary	x General		Transaction ID : SB17.60780			
	President	Other (sp	pecify) 🔻		Memo Item			
	State: District: Full Name (Last, First, Middle Initial)							
C	Lakeside Executive Suits				Date of Disbursement			
υ.					M M / D D / Y Y Y			
	Mailing Address 2645 Executive Park DR				09 16 2016			
	City	State	Zip Code		FEC Identification Number			
	Weston	FL	33331					
	Purpose of Disbursement Office space			· · · ·	C			
	Candidate Name			Category/	Amount of Each Disbursement this Period			
				Туре				
	Office Sought: House Disburser Senate	ment For: Primary			112.36			
	President	Other (sp	••		Transaction ID : SB17.60781			
	State: District:	Memo Item						
	SUBTOTAL of Disbursements This Page (optional)				▶ 8112.36			
'	FOTAL This Period (last page this line number only	y)			••• • •			
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						DR LINF NUMBER: PAGE 12 OF 31		
SCHEDULE B (FEC Form 3)						FOR LINE NUMBER: PAGE 12 OF 31 (check only one)		
	ITEMIZED DISBURSEMENTS			r each category etailed Summar		✗ 17 18 19a 19b 20a 20b 20c 21		
						person for the purpose of soliciting contributions		
or	for commercial purposes, other than using the na NAME OF COMMITTEE (In Full)	ame and a	addre	ess of any point	ical commit	tee to solicit contributions from such committee.		
	JOE KAUFMAN FOR CONGRES	S						
Α.	Full Name (Last, First, Middle Initial) LCS Mailing Services				Date of Disbursement			
	Mailing Address 5055 NE 13th. Ave.					08 / D D / Y Y Y Y 2016		
	City Oakland Park	State FL		Zip Code 33334		FEC Identification Number		
	Purpose of Disbursement Shipping and Mailing Services					C		
	Candidate Name				Category/ Type	Amount of Each Disbursement this Period		
	Office Sought: House Disburse Senate X President	ement For Primary Other (s	,	General		1398.60 Transaction ID : SB17.60694		
	State: District:	Other (s	speci	iy) 🔻		Memo Item		
в.	Full Name (Last, First, Middle Initial)					Date of Disbursement		
	Mailing Address 5055 NE 13th. Ave.							
	City		Zip Code		FEC Identification Number			
	Oakland Park							
	Purpose of Disbursement Shipping and Mailing Services					C		
	Candidate Name					Amount of Each Disbursement this Period		
	Office Sought: House Disburse Senate President					3561.26 Transaction ID : SB17.60721 Memo Item		
	State: District:							
C.	Full Name (Last, First, Middle Initial) MOR PRINTING					Date of Disbursement		
	Mailing Address online					09 / 23 / Y Y Y Y 2016		
	City	State		Zip Code		FEC Identification Number		
	Purpose of Disbursement printing	1			· · · ·	С		
	Candidate Name			Category, Type	Amount of Each Disbursement this Period			
	Office Sought: House Disbursement F					315.00		
	Senate President	Primary Other (s		★ General fv)		Transaction ID : SB17.60799		
	State: District:			., ▼		Memo Item		
	SUBTOTAL of Disbursements This Page (optional	l)				> 5274.86		
	TOTAL This Period (last page this line number or	ılv)						
1	(p	.,				· · · · · · · · · · · · · · · · · · ·		

IT Ar	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS y information copied from such Reports and Stat for commercial purposes, other than using the na NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRES		y of the ry Page used by any			
A .	Full Name (Last, First, Middle Initial) Printmaster	Date of Disbursement				
	Mailing Address 5220 NE 12th Ave				08 24 2016	
	City Oakland Park	State FL	Zip Code 33334	1	FEC Identification Number	
	Purpose of Disbursement Printer					
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period	
	Office Sought: House Disburse Senate President	ement For Primary Other (s	: 2016		1770.00 Transaction ID : SB17.60812 Memo Item	
в.	State: District: Full Name (Last, First, Middle Initial) Quarterdeck Mailing Address 3155 S University Dr		Date of Disbursement			
	City Davie Purpose of Disbursement Restaurant	State FL	Zip Code 33328		FEC Identification Number	
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period	
	Office Sought: House Disburse Senate President State: District:	ement For Primary Other (s	: 2016 ✔ General specify) ▼		534.90 Transaction ID : SB17.60749 Memo Item	
C.	Full Name (Last, First, Middle Initial)				Date of Disbursement	
	Mailing Address 8550 N University Dr				08 / D D / Y Y Y Y 2016	
	City Tamarac	State FL	Zip Code 33321		FEC Identification Number	
	Purpose of Disbursement Gas Candidate Name			Category/ Type	Amount of Each Disbursement this Period	
	Office Sought: House Disburse Senate President State: District:	ement For Primary Other (s	General		34.07 Transaction ID : SB17.60690 Memo Item	
	SUBTOTAL of Disbursements This Page (optional					

SCHEDULE B (FEC Form 3)			Use separate sch	• • •	FOR LINE NUMBER: PAGE 14 OF 31 (check only one)		
	EMIZED DISBURSEMENTS	for each categor Detailed Summar	y Page	X 17 18 19a 19b 20a 20b 20c 21			
	y information copied from such Reports and State for commercial purposes, other than using the nar						
	NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS						
Α.	Full Name (Last, First, Middle Initial) SPEEDWAY				Date of Disbursement		
	Mailing Address 8550 N University Dr				09 12 2016		
	- 5	State FL	Zip Code 33321		FEC Identification Number		
	Purpose of Disbursement Gas				C		
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period		
	Office Sought: House Disburser Senate President	Primary	2016		34.05 Transaction ID : SB17.60772 Memo Item		
	State: District: Full Name (Last, First, Middle Initial)						
в.	SPEEDWAY				Date of Disbursement		
	Mailing Address 8550 N University Dr	ling Address 8550 N University Dr					
	City Stamarac	State FL	Zip Code 33321		FEC Identification Number		
	Purpose of Disbursement gas				С		
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period		
	Office Sought: House Disburser Senate President	Primary	2016		24.29 Transaction ID : SB17.60777 Memo Item		
	State: District: Full Name (Last, First, Middle Initial)				1		
C.	SPEEDWAY				Date of Disbursement		
	Mailing Address 8550 N University Dr				09 / D D / Y Y Y Y 27 2016		
	City Tamarac	State FL	Zip Code 33321		FEC Identification Number		
	Purpose of Disbursement GAS				C		
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period		
	Office Sought: House Disburser Senate President	nent For: Primary Other (sp	X General	liype	23.25 Transaction ID : SB17.60804		
_	State: District:	(° 1°	▼		Memo Item		
	SUBTOTAL of Disbursements This Page (optional).				► 81.59		
	FOTAL 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: PAGE 15 OF 31 (check only one) Image: Check only one in the second secon	
			ay not be sold or i	used by any	20a 20b 20c 21 person for the purpose of soliciting contributions form of the purpose of soliciting contributions form of the purpose of soliciting contributions form of the purpose of soliciting contributions	
or	for commercial purposes, other than using the na NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRES		ddress of any poir	tical committ	ee to solicit contributions from such committee.	
Α.	Full Name (Last, First, Middle Initial) Tmobile Postpaid Web				Date of Disbursement	
	Mailing Address Online				08 11 2016	
	City Online	State	Zip Code		FEC Identification Number	
	Purpose of Disbursement cellphone		Г		C	
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period	
	Senate X President		2016 General Decify) ▼		228.39 Transaction ID : SB17.60692 Memo Item	
В.	State: District: Full Name (Last, First, Middle Initial) Tmobile Postpaid Web Mailing Address Online				Date of Disbursement	
	City Online	State	Zip Code		FEC Identification Number	
	Purpose of Disbursement cellphone				C	
	Candidate Name			Category/ Type		
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (sp	2016 x General becify) ▼		421.33 Transaction ID : SB17.60789 Memo Item	
C.	Full Name (Last, First, Middle Initial)				Date of Disbursement	
	Mailing Address 6591 Orange Dr.				08 / D D / Y Y Y Y 2016	
	City Davie	State FL	Zip Code 33314		FEC Identification Number	
	Purpose of Disbursement Political Yard Signs Candidate Name			Category/	Amount of Each Disbursement this Period	
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (sp	General	Туре	500.00 Transaction ID : SB17.60704 Memo Item	
	SUBTOTAL of Disbursements This Page (optional)			▶ 1149.72	
	TOTAL This Period (last page this line number on					

IT Ar	SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS				y of the ry Page used by any			
A .	Full Name (Last, Firs US Post Mast	t, Middle Initial)	Date of Disbursement					
	Mailing Address 445	50 S Pine Island Rd	State	Zip Code		08 15 2016		
	Davie FL Purpose of Disbursement Permit 2277			33328		FEC Identification Number		
	Candidate Name				Category Type	Amount of Each Disbursement this Period		
	Office Sought:	ement For Primary Other (s	: 2016 ☐ General specify) ▼		5522.29 Transaction ID : SB17.60706 Memo Item			
в.	State: Di Full Name (Last, Firs WIZO Mailing Address 11t			Date of Disbursement				
		Floor	State FL	Zip Code 33154		FEC Identification Number		
	Event Candidate Name			Category Type				
	Office Sought:	House Disburse Senate President strict:	ement For Primary Other (s	: 2016 ✔ General specify) ▼		180.00 Transaction ID : SB17.60801 Memo Item		
c.	Full Name (Last, Firs	t, Middle Initial)		Date of Disbursement				
	City		State	Zip Code		FEC Identification Number		
	Purpose of Disburse	ment				C		
	Candidate Name				Category Type	Amount of Each Disbursement this Period		
	Office Sought: House Disbursement For: Senate Primary General President Other (specify)					Memo Item		
		sements This Page (optional)			> 5702.29		
	TOTAL This Period (la	ast page this line number or	ıly)			> 33393.50		

HEDULE C (FEC F ANS	orm 3)			Use separate schedul for each category of Detailed Summary Pa	the (check only one) X 13a		
ME OF COMMITTEE (In Full) DE KAUFMAN FOR C	ONGRESS			Transa	ction ID : SC/10.48978		
LOAN SOURCE Full Name JOE KAUFMAN FOR				Memo Item	Election: 2014		
Mailing Address 2645 EXECUTIVE PARK DRIV	E STE 512				Other (specify)		
City WESTON		State FL	ZIP Code 33331)	Personal Funds of the Candidat		
Original Amount of Loan		Cumulative Pa	yment To D	ate Bal	ance Outstanding at Close of This Peric		
· · · · · · · · · · · · · · · · · · ·	2000.00	9		0.00	2000.00		
TERMS Date Incurred		C	Date Due	Interest Rat (If none, ente			
M04 ^M / D24 ^D / Y	Ž014 Y		⁷ Ŭpon		0.00 % (apr) Yes X No		
List All Endorsers or Guara		Loan Source		Name of Employer			
1. Full Name (Last, First, M	iddle Initial)			Name of Employer			
Mailing Address				Occupation			
City	City State ZIP Code			Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Mi	ddle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:			
3. Full Name (Last, First, Mie	ddle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	g		
4. Full Name (Last, First, Mie	ddle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y		
JBTOTALS This Period This I					2000.00		

HEDULE C (FEC I ANS			Use separate scl for each categor Detailed Summa	y of the	PAGE 18 OF 31 FOR LINE NUMBER: (check only one) X 13a 13b	
ME OF COMMITTEE (In Ful DE KAUFMAN FOR				Tr	ansaction	ID : SC/10.48979
LOAN SOURCE Full Name				Memo	Item Ele	ection: 2014 Primary General
Mailing Address 2645 EXECUTIVE PARK DRI	VE STE 512					Other (specify)
City WESTON		State FL	ZIP Code 33331	9		Personal Funds of the Candidat
Original Amount of Loan	I	Cumulative Pa	yment To D	ate	Balance	Outstanding at Close of This Peric
· · · · · · · · · · · · · · · · · · ·	11000.00			9500.00		1500.00
TERMS Date Incurre	d	C	Date Due	Interes (If none	t Rate	Secured:
^M 04 ^M / ^D 30 ^D / ^Y	Ž014 Y		[/] Ŭpon	demană	0.00	₩ (apr) Yes X No
List All Endorsers or Gua		Loan Source		Name of Employer		
1. Full Name (Last, First, I	vilddie Initial)					
Mailing Address				Occupation		
City	State	ZIP Code	(Amount Guaranteed Outstanding:		
2. Full Name (Last, First, M	liddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
3. Full Name (Last, First, N	liddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code	(Amount Guaranteed Outstanding:		
4. Full Name (Last, First, N	1iddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code	(Amount Guaranteed Outstanding:	7	
JBTOTALS This Period This						1500.00

					PAGE 19 OF 31	
CHEDULE C (FEC F DANS	orm 3)			Use separate schedule(s) for each category of the Detailed Summary Page		
ME OF COMMITTEE (In Full) OE KAUFMAN FOR (ONGRESS	5		Transad	ction ID : SC/10.5512	
LOAN SOURCE Full Name KAUFMAN, JOE, , ,	(Last, First, Mic	ddle Initial)		Memo Item	× Primary	
Mailing Address 2645 EXECUTIVE PARK DRIV STE 512	Έ				_ General Other (specify) ▼	
City		State	ZIP Code			
WESTON		FL	33331	;	Personal Funds of the Candidate	
Original Amount of Loan		Cumulative Pa	ayment To D	vate Bali	ance Outstanding at Close of This Perio	
	3248.21	3		0.00	3248.21	
TERMS Date Incurred		[Date Due	Interest Rate (If none, ente		
M07M / D01D / Y	Ž01 ř Y	M M / D D	Úpon	Demană 0	.00 % (apr) Yes X No	
List All Endorsers or Guara	antors (if any) t	o Loan Source				
1. Full Name (Last, First, N	iddle Initial)			Name of Employer		
Mailing Address				Occupation		
				Amount		
City	State ZIP Code			Guaranteed Outstanding:	y y	
2. Full Name (Last, First, Mi	ddle Initial)			Name of Employer		
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:	y	
3. Full Name (Last, First, Mi	ddle Initial)			Name of Employer		
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:	y	
4. Full Name (Last, First, Mi	ddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1	
UBTOTALS This Period This OTALS This Period (last page					3248.21	

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

•					
HEDULE C (FEC F ANS	Form 3)			Use separate schedul for each category of t Detailed Summary Pag	he (check only one) X 13a
ME OF COMMITTEE (In Full) DE KAUFMAN FOR (;		Transad	ction ID : SC/10.9126
LOAN SOURCE Full Name	e (Last, First, Mic	Idle Initial)		Memo Item	Election: 2012
KAUFMAN, JOE, , ,					X Primary General
Mailing Address 2645 EXECUTIVE PARK DRIV STE 512	/E				Other (specify) ▼
City		State	ZIP Code	,	
WESTON		FL	33331		Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pa	yment To D	ate Bala	ance Outstanding at Close of This Perio
	5000.00		,	3800.00	1200.00
TERMS Date Incurred	ł	[Date Due	Interest Rate (If none, ente	
M12M / D31D / Y	Ž011 Y	M M / D D	Úpon ⁴		00
List All Endorsers or Guar	antors (if any) to	o Loan Source			
1. Full Name (Last, First, M	liddle Initial)		1	Name of Employer	
Mailing Address				Dccupation	
				Amount	
City	State	ZIP Code		Guaranteed Dutstanding:	y y
2. Full Name (Last, First, M	iddle Initial)		1	Name of Employer	
Mailing Address			(Dccupation	
				Amount	
City	State	ZIP Code		Amount Guaranteed	7 · · · 7 · · · ·
				s ato tan an igi	7
3. Full Name (Last, First, M	iddle Initial)			Name of Employer	
Mailing Address			(Dccupation	
				Amount	
City	State	ZIP Code		Guaranteed Dutstanding:	
4. Full Name (Last, First, M	iddle Initial)			Name of Employer	
Mailing Address			(Dccupation	
			_		
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	y y
JBTOTALS This Period This					1200.00

S ddle Initial) State FL Cumulative Pa Cumulative Pa Cumulative Pa Cumulative Pa Cumulative Pa	Date Due	Personal Funds of the Cand			
ddle Initial)	33331 yment To Da 2 Date Due	Memo Item Election: 2012 Y Primary General Other (specify) Other (specify) ✓ Personal Funds of the Cand Date Balance Outstanding at Close of This P 0.00 5000.00 Interest Rate (If none, enter 0) Secured: Pemand 0.00			
State FL Cumulative Pa	33331 yment To Da 2 Date Due	Primary General Other (specify) ▼ Personal Funds of the Cand Date Balance Outstanding at Close of This P 0.00 5000.00 Interest Rate (If none, enter 0) Demand 0.00			
FL Cumulative Pa	33331 yment To Da 2 Date Due	Personal Funds of the Cand Date Balance Outstanding at Close of This P 0.00 5000.00 Interest Rate Secured: (If none, enter 0) Demand 0.00			
FL Cumulative Pa	33331 yment To Da 2 Date Due	Personal Funds of the Cand Date Balance Outstanding at Close of This P 0.00 5000.00 Interest Rate (If none, enter 0) Demand 0.00			
M M / D D	Date Due	0.00 5000.00 Interest Rate (If none, enter 0) Demand 0.00			
M M / D D		Interest Rate (If none, enter 0)			
M M / D D		(If none, enter 0) Demand 0.00			
	Úpon ^Y				
to Loan Source					
		Name of Employer			
		Occupation			
ZIP Code		Amount Guaranteed Outstanding:			
	N	Name of Employer			
	C	Occupation			
ZIP Code		Amount Guaranteed Outstanding:			
	N	Name of Employer			
	C	Occupation			
ZIP Code	6	Amount Guaranteed Outstanding:			
	N	Name of Employer			
	C	Occupation			
ZIP Code	6	Amount Guaranteed Outstanding:			
1	ZIP Code ZIP Code ZIP Code ZIP Code	ZIP Code			

CHEDULE C (FEC	Form 3)			Use separate schedule(s) for each category of the Detailed Summary Page		
NAME OF COMMITTEE (In Fu JOE KAUFMAN FOR	,				tion ID : SC/10.22542	
KAUFMAN, JOE, , ,	•	dle Initial)		Memo Item	Election: 2012 Primary General	
Mailing Address 2645 EXECUTIVE PARK DR	IVE # 512				Other (specify)	
City WESTON		State FL	ZIP Code 33331	•	X Personal Funds of the Candidate	
Original Amount of Loan	500.00	Cumulative Pay	yment To D	ate Bala	nce Outstanding at Close of This Period 500.00	
TERMS Date Incurre	<u> </u>	, C	Date Due	Interest Rate (If none, enter	e Secured:	
M07 ^M / D05 ^D / Y	Ž01Ž Y	1 M / D D	⁷ Úpon	Demană 0.0		
List All Endorsers or Gua		Loan Source				
1. Full Name (Last, First,	Middle Initial)			Name of Employer		
Mailing Address				Occupation Amount		
City	State	ZIP Code		Guaranteed	y	
2. Full Name (Last, First, N	Middle Initial)			Name of Employer		
Mailing Address			_	Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y y	
3. Full Name (Last, First, N	Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
4. Full Name (Last, First, N	Middle Initial)	!		Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
SUBTOTALS This Period This				H	500.00	
Carry outstanding balance or	nly to LINE 3, Sch	edule D, for this	s line. If no	Schedule D, carry forw	vard to appropriate line of Summary.	

				PAGE 23 OF 31	
CHEDULE C (FEC Form 3) OANS			Use separate schedule(s) for each category of the Detailed Summary Page		
NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRES	SS		Transact	tion ID : SC/10.22543	
LOAN SOURCE Full Name (Last, First, N KAUFMAN, JOE, , ,	Middle Initial)		🗌 Memo Item	Election: 2012 Primary General	
Mailing Address 2645 EXECUTIVE PARK DRIVE # 512				Other (specify)	
City WESTON	State FL	ZIP Code 33331		Personal Funds of the Candidate	
Original Amount of Loan	Cumulative Pa	ayment To Date	e Bala	nce Outstanding at Close of This Perioc	
5000.00			0.00	5000.00	
TERMS Date Incurred	M M / D D	Date Due	Interest Rate (If none, enter emand 0.0	0)	
				% (apr) Yes X No	
List All Endorsers or Guarantors (if any 1. Full Name (Last, First, Middle Initial)) to Loan Source		me of Employer		
Mailing Address		Oc	ccupation		
City State	ZIP Code	Gu	nount Jaranteed Jtstanding:	y y	
2. Full Name (Last, First, Middle Initial)		Na	me of Employer		
Mailing Address			cupation		
City State	ZIP Code	Gu	nount iaranteed itstanding:	g 1 1 g 1 1 g 1	
3. Full Name (Last, First, Middle Initial)		Na	me of Employer		
Mailing Address		Oc	cupation		
City State	ZIP Code	Gu	nount Jaranteed Jitstanding:	7	
4. Full Name (Last, First, Middle Initial)		Na	Name of Employer		
Mailing Address		Oc	ccupation		
City State	ZIP Code	Gu	nount uaranteed utstanding:	g - 1 - g - 1 - x - 1	
SUBTOTALS This Period This Page (optiona TOTALS This Period (last page in this line o				5000.00	
Carry outstanding balance only to LINE 3, S	Schedule D, for thi	is line. If no S	Schedule D, carry forw	vard to appropriate line of Summary.	

SCHEDULE C (FEC Form 3) LOANS			Use separate schedule for each category of th Detailed Summary Pag	he (check only one) × 13a		
NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR C	ONGRESS			Transaction ID : SC/10.22544		
LOAN SOURCE Full Name (Last, First, Middle Initial) KAUFMAN, JOE, , ,				Memo Item Election: 2012 Memo Item Frimary General		
Mailing Address 2645 EXECUTIVE PARK DRIV	E # 512				Other (specify)	
City WESTON		State FL	ZIP Code 33331	e	Y Personal Funds of the Candidate	
Original Amount of Loan	1000.00	Cumulative Pay	yment To D	Date Bala	nce Outstanding at Close of This Perioc 1000.00	
TERMS Date Incurred	1000.00	, , , , , , , , , , , , , , , , , , ,	Date Due	Interest Rate	e Secured:	
M07 ^M / D16 ^D / Y	ž01ž ^Y		⁷ Úpon	(If none, enter Demand		
List All Endorsers or Guara	ntors (if any) to	Loan Source				
1. Full Name (Last, First, M	iddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	City State ZIP Code			Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Mic	ddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State ZIP Code			Amount Guaranteed Outstanding:	y y	
3. Full Name (Last, First, Mic	ddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State ZIP Code			Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Mic	ddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
SUBTOTALS This Period This F					1000.00	
Carry outstanding balance only	to LINE 3, Sch	edule D, for this	s line. If no	o Schedule D, carry forw	vard to appropriate line of Summary.	

SCHEDULE C (FEC Form 3) LOANS			Use separate schedule for each category of th Detailed Summary Pag	^{1e} (check only one) × 13a			
IAME OF COMMITTEE (In Fu	,			Transaction ID : SC/10.26611			
LOAN SOURCE Full Name (Last, First, Middle Initial) KAUFMAN, JOE, , ,				Memo Item Election: 2012 Memo Item Frimary General			
Mailing Address 2645 EXECUTIVE PARK DR	RIVE # 512				Other (specify)		
City WESTON		State FL	ZIP Code 33331	de			
Original Amount of Loan	3200.00	Cumulative Pa	yment To D	bate Bala 823.50	nce Outstanding at Close of This Period 2376.50		
	Ý Ž01Ž Ý	M M / D D	Date Due	Interest Rate (If none, enter Demand 0.			
List All Endorsers or Gua 1. Full Name (Last, First,		Loan Source		Name of Employer			
Mailing Address				Occupation			
City State ZIP Code			Amount Guaranteed Outstanding:	g			
2. Full Name (Last, First, I	Middle Initial)			Name of Employer			
Mailing Address				Occupation Amount			
City	ty State ZIP Code			Guaranteed Outstanding:			
3. Full Name (Last, First, I	Middle Initial)			Name of Employer			
Mailing Address				Occupation			
City	City State ZIP Code			Amount Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)				Name of Employer			
Mailing Address				Occupation			
City	State	State ZIP Code		Amount Guaranteed Outstanding:			
SUBTOTALS This Period Thi TOTALS This Period (last page					2376.50		
Carry outstanding balance o	nly to LINE 3, Sch	edule D, for this	s line. If no	Schedule D, carry forw	vard to appropriate line of Summary		

				PAGE 26 OF 31		
SCHEDULE C (FEC Form 3) _OANS			Use separate schedule(s) for each category of the Detailed Summary Page			
IAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRE	SS		Transac	tion ID : SC/10.50920		
LOAN SOURCE Full Name (Last, First, KAUFMAN, JOE, , ,	Middle Initial)		Memo Item Election: 2014			
Mailing Address 2645 EXECUTIVE PARK DRIVE # 512				Other (specify)		
City WESTON	State FL	ZIP Code 33331		Y Personal Funds of the Candidate		
Original Amount of Loan	Cumulative Pa	ayment To Date	Bala	nce Outstanding at Close of This Period		
6000.00			0.00	6000.00		
TERMS Date Incurred	C	Date Due	Interest Rate (If none, enter			
M08 ^M / D20 ^D / Y Ž014 Y	M M / D D	Úpon ^Y Der	ňanď 0.0			
List All Endorsers or Guarantors (if any	y) to Loan Source		a of Freedower			
1. Full Name (Last, First, Middle Initial)		Nan	Name of Employer			
Mailing Address		Occ	upation			
City State ZIP Code			Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)		Nan	ne of Employer			
Mailing Address		Occ	upation			
City	State ZIP Code			9 9 9 9 9 9 9		
3. Full Name (Last, First, Middle Initial)		Nan	ne of Employer			
Mailing Address		Occ	upation			
City State	State ZIP Code			Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address		Occ	upation			
City State	e ZIP Code		ount ranteed standing:	y 1 y 1 x 1		
SUBTOTALS This Period This Page (option			H	6000.00		
Carry outstanding balance only to LINE 3,	Schedule D, for this	is line. If no So	chedule D, carry forw	vard to appropriate line of Summar		

SCHEDULE C (FEC Form 3) LOANS			Use separate schedule for each category of th Detailed Summary Pag	(check only one) X 13a	
IAME OF COMMITTEE (In Full)	6			tion ID : SC/10.50921	
LOAN SOURCE Full Name (Last, First, Min KAUFMAN, JOE, , ,	ddle Initial)		Memo Item Election: 2014		
Mailing Address 2645 EXECUTIVE PARK DRIVE # 512				Other (specify) v	
City WESTON	State FL	ZIP Code 33331	3	X Personal Funds of the Candidate	
Original Amount of Loan 6000.00	Cumulative Pa	yment To D	0.00	nce Outstanding at Close of This Period 6000.00	
TERMS Date Incurred M08 ^M / D20 ^D / Y Ž014 Y	M M / D D	Date Due	Interest Rate (If none, enter Demand	0) 00 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
List All Endorsers or Guarantors (if any) t 1. Full Name (Last, First, Middle Initial)	to Loan Source		Name of Employer		
Mailing Address			Occupation		
City State	City State ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address			Occupation Amount		
City State	/ State ZIP Code		Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address			Occupation		
City State	City State ZIP Code		Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	State ZIP Code		Amount Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optional).			H	6000.00	
Carry outstanding balance only to LINE 3, Sci				/a	

	•					
CHEDULE C (FEC Form 3) OANS			Use separate schedule for each category of th Detailed Summary Pag	^{ne} (check only one) × 13a		
ME OF COMMITTEE (In OE KAUFMAN FO	,	5		Transac	tion ID : SC/10.58526	
LOAN SOURCE Full Name (Last, First, Middle Initial) Kaufman, Joseph, , ,				Memo Item	Election: 2016	
Mailing Address 8708 NW 82 ST.					General Other (specify) ▼	
City State ZIP Coo Tamarac FL 33321			ZIP Code 33321	le Image: Second state Image: Second state		
Original Amount of Loa	n	Cumulative Pa	ayment To D	ate Bala	nce Outstanding at Close of This Peric	
	5745.93			0.00	5745.93	
TERMS Date Inco	urred	C	Date Due	Interest Rate (If none, enter		
^M 03 ^M / ^D 05 ^D /	^ү Ž01ў́ ^ү	M M / D D	o / Yon d	lemănd ^Y 0.		
List All Endorsers or G	· • • •	o Loan Source				
1. Full Name (Last, Firs	st, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Guaranteed Outstanding:		
2. Full Name (Last, First	, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
3. Full Name (Last, First	t, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
4. Full Name (Last, First	t, Middle Initial)	Į		Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
UBTOTALS This Period T	his Page (optional)			······ .	5745.93	
OTALS This Period (last p	bage in this line only	/)		······ [39570.64	
Carry outstanding balance	only to LINE 3, Sch	nedule D, for thi	is line. If no	o Schedule D, carry forw	vard to appropriate line of Summa	

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS Excluding Loans NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR A. Full Name (Last, First, Middle Initial) of De			(Use separate schedule(s) for each numbered line) Nature of D	PAGE 29 OF 31 FOR LINE NUMBER: (check only one) 9 X 10	
BASE CONNECT, INC.			Direct Mail	Creative Fees	
Mailing Address 1155 15th St NW					
STE 410 City Washington	State DC	Zip Code 20005			
Outstanding Balance Beginning This Period			Transactio	on ID : SD10.33907	
20235.44 Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00		0.0	00	20235.44	
		y y		9	
	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CENTURY DATA SYSTEMS CORP				
Mailing Address 1155 - 15TH STREET, NW	Mailing Address 1155 - 15TH STREET, NW				
City WASHINGTON	State DC	Zip Code 20005			
Outstanding Balance Beginning This Period 6552.89					
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00		0.0	00	6552.89	
C. Full Name (Last, First, Middle Initial) of De DIRECT MAIL PROCESSORS		ditor		ebt (Purpose): Program Postage	
Mailing Address 2976 Penwick Lane					
City Dunkirk	State MD	Zip Code 20754			
Outstanding Balance Beginning This Period		1	Transact	ion ID : SD10.33909	
102.55					
Amount Incurred This Period Payment This Period				ng Balance at Close of This Period	
0.00		0.0	00	102.55	
1) SUBTOTALS This Period This Page (optional)		··· •	26890.88	
2) TOTALS This Period (last page this line number only)					
3) TOTAL OUTSTANDING LOANS from Schedu	···· •				
4) ADD 2) and 3) and carry forward to appropr	iate line of S	Summary Page (last page or	nly) 🕨		

FEC Schedule D (Form 3) (Revised 05/2016)

SCHEDULE D (FEC Form 3)			(Use separate	PAGE 30 OF 31	
			schedule(s)	FOR LINE NUMBER:	
			for each	(check only one) 9	
			numbered line)	★ 10	
NAME OF COMMITTEE (In Full)					
JOE KAUFMAN FOR	CON	GRESS			
A. Full Name (Last, First, Middle Initial) of De	btor or Credi	itor	Nature of D	ebt (Purpose):	
INTEGRAM			Direct Mai	Program Printing & Mailshop	
Mailing Address 22695 Commerce Center Co	urt				
City	State	Zip Code			
Dulles	VA	20166			
Outstanding Balance Beginning This Period			Transacti	on ID : SD10.33910	
			Tunouou		
10210.45					
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period	
	1.00				
0.00	L	0.0		10210.45	
B. Full Name (Last, First, Middle Initial) of Deb	otor or Credit	or	Nature of D	ebt (Purpose):	
LEGACY LISTS, INC BROK	ERAGE			List Rental	
Mailing Address 1155 - 15TH STREET, NW SUITE 410					
City	State	Zip Code			
WASHINGTON	DC	20005			
Outstanding Balance Beginning This Period Transaction ID : SD10.33911					
			Transacti	0110.3010.33911	
6327.81					
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00			00	6207.91	
0.00		0.0	00	6327.81	
			1		
C. Full Name (Last, First, Middle Initial) of De				ebt (Purpose):	
LEGACY LISTS, INC MANA	GEMEN	I	Direct Mai	List Management	
Mailing Address 1155 15th St NW					
	I	i			
City	State	Zip Code			
Washington	FL	20005			
Outstanding Balance Beginning This Period			Transact	ion ID : SD10.33912	
0700.75					
6769.75					
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00		0.0	0	6769.75	
9 9 9				9 9 9	
1) SUBTOTALS This Period This Page (optional)			22208 01	
				23308.01	
2) TOTALS This Period (last page this line number only)					
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)					
4) ADD 2) and 3) and carry forward to appropri	ate line of S	ummary Page (last page o	nly) 🕨		

FEC Schedule D (Form 3) (Revised 05/2016)

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS Excluding Loans NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR	CONG	GRESS	(Use separate schedule(s) for each numbered line)	PAGE31OF31FOR LINE NUMBER: (check only one)9¥10
A. Full Name (Last, First, Middle Initial) of De SIMPKINS ESCROW LLC	btor or Credito	r		ebt (Purpose): og Exp Caging & Escrow
Mailing Address 29243 St Just Dr				
City UNIONVILLE	State VA	Zip Code 22567		
Outstanding Balance Beginning This Period 93.00		1	Transacti	on ID : SD10.33913
Amount Incurred This Period	F	Payment This Period 0.0	0	ng Balance at Close of This Period 93.00
B. Full Name (Last, First, Middle Initial) of Deb	otor or Creditor		Nature of D	ebt (Purpose):
Mailing Address				
City	State	Zip Code		
Outstanding Balance Beginning This Period Amount Incurred This Period	F	Payment This Period	Outstandi	ng Balance at Close of This Period
C. Full Name (Last, First, Middle Initial) of De	btor or Credito	r	Nature of D	ebt (Purpose):
Mailing Address				
City	State	Zip Code		
Outstanding Balance Beginning This Period Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
1) SUBTOTALS This Period This Page (optional)			93.00
2) TOTALS This Period (last page this line number only)				50291.89
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				39570.64
4) ADD 2) and 3) and carry forward to appropri	ate line of Sum	nmary Page (last page or	nly) 🕨	89862.53

FEC Schedule D (Form 3) (Revised 05/2016)