

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

Stockwell For Congress

ADDRESS (number and street)

5 Glendale Rod

Check if different than previously reported. (ACC)

Marblehead

MA

01945

2. FEC IDENTIFICATION NUMBER ▼

C C00565424

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

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

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

M A

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

M A

5. Covering Period

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

through

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

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 Mr. Christopher John Stockwell

Signature of Treasurer

Mr. Christopher John Stockwell

[Electronically Filed]

Date

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

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

FEC Form 3 (Revised 02/2003)

PAGE 2 / 12

Write or Type Committee Name
Stockwell For Congress

Report Covering the Period: From: / To: /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	5296.77	49340.00
(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)).....	5296.77	49340.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	20960.22	35380.63
(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)).....	20960.22	35380.63
8. Cash on Hand at Close of Reporting Period (from Line 27).....	-9879.03	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	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

Stockwell For Congress

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

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).....	1500.00	18600.00
(ii) Unitemized.....	425.00	5715.00
(iii) TOTAL of contributions from individuals ▶	1925.00	24315.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	3371.77	25025.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	5296.77	49340.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(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
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	5296.77	49340.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	20960.22	35380.63
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	20960.22	35380.63

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	5784.42
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	5296.77
25. SUBTOTAL (add Line 23 and Line 24).....	11081.19
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	20960.22
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	-9879.03

**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 12
	<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)
Stockwell For Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Jane Hunt

Mailing Address 26 Dennet Road

City Marblehead State MA Zip Code 01945

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

Name of Employer none Occupation none, retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2014

Transaction ID : SA11AI.4580

Amount of Each Receipt this Period
 1000.00
 post-election contribution - jane hunt

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

Mailing Address 21 skimmers path

City Marblehead State MA Zip Code 01945

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

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 20 / 2014

Transaction ID : SA11AI.4548

Amount of Each Receipt this Period
 500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1500.00

1500.00

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

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

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NAME OF COMMITTEE (In Full)
Stockwell For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Christopher John Stockwell

Mailing Address 5 Glendale Road

City State Zip Code
Marblehead MA 01945

FEC ID number of contributing federal political committee. **C** H4MA06124

Name of Employer Occupation
GEI Consultants, Inc. Senior Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3371.77

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 23 / 2014

Transaction ID : SA11D.4594

Amount of Each Receipt this Period
3371.77

In-kind - from candidate Stockwell

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).....

3371.77

3371.77

**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 7 OF 12			
	<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)
Stockwell For Congress

Full Name (Last, First, Middle Initial) A. mr. brian felsenthal		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 10 Flint St.		Amount of Each Disbursement this Period 590.00 Transaction ID : SB17.4578
City Marblehead	State MA	
Zip Code 01945	Purpose of Disbursement video services	Category/ Type 001
Candidate Name Stockwell For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Frank Monkiewicz Photography		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 36 hurd road		Amount of Each Disbursement this Period 1095.00 Transaction ID : SB17.4540
City belmont	State MA	
Zip Code 02478	Purpose of Disbursement photography services	Category/ Type 004
Candidate Name Stockwell For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Guarino Design		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 204-A Hampshire St.		Amount of Each Disbursement this Period 735.00 Transaction ID : SB17.4538
City Cambridge	State MA	
Zip Code 03239	Purpose of Disbursement printing 5,000 4X9 Flyers	Category/ Type 004
Candidate Name Stockwell For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2420.00
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 8 OF 12			
	<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)
Stockwell For Congress

Full Name (Last, First, Middle Initial) A. Guarino Design		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 204-A Hampshire St.		Amount of Each Disbursement this Period 968.75 Transaction ID : SB17.4582
City Cambridge	State MA	
Zip Code 03239	Purpose of Disbursement Inv. #3239, brochure, signs, online ads, poster, card revisions	Category/ Type 004
Candidate Name Stockwell For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Ms Linda Killian		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 604 Independence Ave SE		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.4542
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement editing, copy & forward to book	Category/ Type 001
Candidate Name Stockwell For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Lauren Poussard Photography		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 44 Maple Street #1		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4556
City Danvers	State MA	
Zip Code 01923	Purpose of Disbursement Poussard - social media retainer (last)	Category/ Type 001
Candidate Name Stockwell For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2068.75
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 9 OF 12	
	<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)
Stockwell For Congress

Full Name (Last, First, Middle Initial) A. Nationbuilder - 3 DNA		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 448 S Hill St Stee 201		Amount of Each Disbursement this Period 149.00 Transaction ID : SB17.4575
City Los Angeles	State CA Zip Code 90013	
Purpose of Disbursement website	Category/Type 004	
Candidate Name Stockwell For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Spinelli's Function		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address Rt. 1 South		Amount of Each Disbursement this Period 220.25 Transaction ID : SB17.4568
City Lynnfield	State MA Zip Code 01940	
Purpose of Disbursement election night party - food	Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Staples, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 17 Paradise Road		Amount of Each Disbursement this Period 84.98 Transaction ID : SB17.4576
City Salem	State MA Zip Code 01970	
Purpose of Disbursement staples - business cards - read my ebook...	Category/Type 001	
Candidate Name Stockwell For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	454.23
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 12			
	<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)
Stockwell For Congress

Full Name (Last, First, Middle Initial) A. Mr. Christopher John Stockwell			Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2014		
Mailing Address 5 Glendale Road			Amount of Each Disbursement this Period 6507.26		
City Marblehead	State MA	Zip Code 01945	Transaction ID : SB17.4584		
Purpose of Disbursement expense reimbursement, sundry expenses		Category/ Type 001			
Candidate Name Stockwell For Congress					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Mr. Christopher John Stockwell			Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2014		
Mailing Address 5 Glendale Road			Amount of Each Disbursement this Period 3371.77		
City Marblehead	State MA	Zip Code 01945	Transaction ID : SB17.4595		
Purpose of Disbursement In-kind - from candidate Stockwell		Category/ Type			
Candidate Name					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: MA District: 06					

Full Name (Last, First, Middle Initial) c. stop & shop			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014		
Mailing Address 450 Paradise Road			Amount of Each Disbursement this Period 80.35		
City Swampscott	State MA	Zip Code 01907	Transaction ID : SB17.4570		
Purpose of Disbursement election night party - food / appetizers		Category/ Type 001			
Candidate Name Stockwell For Congress					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	9959.38
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 11 OF 12	
	<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)
Stockwell For Congress

A. Thomson communications

Full Name (Last, First, Middle Initial)
Mailing Address 100 South Main St.

City Middleton State MA Zip Code 01949

Purpose of Disbursement
thomson communications - retainer last pymt

Candidate Name
Stockwell For Congress

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
11 / 04 / 2014

Amount of Each Disbursement this Period
1750.00

Transaction ID : SB17.4555

Category/Type
001

B. vinnin square liquors

Full Name (Last, First, Middle Initial)
Mailing Address 371 Paradise Road

City Swampscott State MA Zip Code 01907

Purpose of Disbursement
election night party

Candidate Name
Stockwell For Congress

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
11 / 04 / 2014

Amount of Each Disbursement this Period
163.27

Transaction ID : SB17.4560

Category/Type
001

C. Mr. Kevin whitaker

Full Name (Last, First, Middle Initial)
Mailing Address 10 Liberty Road

City Marblehead State MA Zip Code 01945

Purpose of Disbursement
whitaker - contractor weekly wages

Candidate Name
Stockwell For Congress

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
10 / 17 / 2014

Amount of Each Disbursement this Period
1000.00

Transaction ID : SB17.4539

Category/Type
001

SUBTOTAL of Disbursements This Page (optional)..... 2913.27

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 12 OF 12	
	<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)
Stockwell For Congress

Full Name (Last, First, Middle Initial) A. Mr. Kevin whitaker		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 10 Liberty Road		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.4543
City Marblehead	State MA	
Zip Code 01945	Purpose of Disbursement whitaker - contractor, wages	Category/ Type 001
Candidate Name Stockwell For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Mr. Kevin whitaker		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 10 Liberty Road		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.4544
City Marblehead	State MA	
Zip Code 01945	Purpose of Disbursement whitaker, contractor - wages	Category/ Type 001
Candidate Name Stockwell For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Mr. Kevin whitaker		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 10 Liberty Road		Amount of Each Disbursement this Period 800.00 Transaction ID : SB17.4554
City Marblehead	State MA	
Zip Code 01945	Purpose of Disbursement whitaker -contractor wages	Category/ Type 001
Candidate Name Stockwell For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2800.00
TOTAL This Period (last page this line number only).....	20615.63