

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
Ella Ward 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))....	20465.00	9065.00
(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)).....	20465.00	9065.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	13575.62	4296.80
(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)).....	13575.62	4296.80
8. Cash on Hand at Close of Reporting Period (from Line 27).....	12542.58	
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).....	680.00	

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

Ella Ward 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).....	16175.00	4650.00
(ii) Unitemized.....	4040.00	3790.00
(iii) TOTAL of contributions from individuals ▶	20215.00	8440.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	250.00	625.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	20465.00	9065.00
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	680.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	680.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	205.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	20465.00	9950.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	13575.62	4296.80
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) ▶	13575.62	4296.80

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	5653.20
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	20465.00
25. SUBTOTAL (add Line 23 and Line 24).....	26118.20
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	13575.62
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	12542.58

**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 21
	<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)
Ella Ward for Congress

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

Mailing Address 1326 Club House Drive

City Chesapeake State VA Zip Code 23322

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

Name of Employer Self Employed 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
 05 / 11 / 2016

Transaction ID : SA11AI.4236

Amount of Each Receipt this Period
250.00

Memo Item
 Campaign donation

B. Full Name (Last, First, Middle Initial)
Issam H Baraki

Mailing Address 1530 Shenandoah Parkway

City Chesapeake State VA Zip Code 23320

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

Name of Employer Owner Occupation Site Improvement Engineering Firm

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
 05 / 06 / 2016

Transaction ID : SA11AI.4238

Amount of Each Receipt this Period
500.00

Memo Item
 Campaign donation

C. Full Name (Last, First, Middle Initial)
Dr. Kim W. Brown

Mailing Address 2444 Ballahack Road

City Chesapeake State VA Zip Code 23322

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

Name of Employer Self Employed Occupation Minister

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
 05 / 20 / 2016

Transaction ID : SA11AI.4240

Amount of Each Receipt this Period
1000.00

Memo Item
 Campaign contribution

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 21
	<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)
Ella Ward for Congress

A. Full Name (Last, First, Middle Initial)
Willie L Brown

Mailing Address 1301 Masters Court

City Chesapeake State VA Zip Code 23320

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

Name of Employer In Home Health Care Occupation Business Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 19 / 2016

Transaction ID : SA11AI.4401

Amount of Each Receipt this Period
 100.00

Memo Item
 Campaign donation

B. Full Name (Last, First, Middle Initial)
Gwendolyn I. Byrd

Mailing Address 889 Royal Grove Court

City Chesapeake State VA Zip Code 23320

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

Name of Employer Not employed Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 19 / 2016

Transaction ID : SA11AI.4243

Amount of Each Receipt this Period
 300.00

Memo Item
 Refund for Riverwalk Club Rental

C. Full Name (Last, First, Middle Initial)
Gwendolyn I. Byrd

Mailing Address 889 Royal Grove Court

City Chesapeake State VA Zip Code 23320

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

Name of Employer Not employed Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 19 / 2016

Transaction ID : SA11AI.4390

Amount of Each Receipt this Period
 25.00

Memo Item
 Campaign donation

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

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

425.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 21
	<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)
Ella Ward for Congress

A. Full Name (Last, First, Middle Initial)
Chesapeake Financial Services

Mailing Address P.O. Box 2860

City Chesapeake State VA Zip Code 23327-1685

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

Name of Employer Occupation

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
 05 / 18 / 2016

Transaction ID : SA11AI.4245

Amount of Each Receipt this Period
 250.00

Memo Item
 Campaign contribution

B. Full Name (Last, First, Middle Initial)
Chesapeake Financial Services

Mailing Address P.O. Box 2860

City Chesapeake State VA Zip Code 23327-1685

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 25 / 2016

Transaction ID : SA11AI.4246

Amount of Each Receipt this Period
 200.00

Memo Item
 Campaign donation

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

Mailing Address 435 E. 79th Street

City New York State NY Zip Code 10075

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

Name of Employer Occupation
 Not employed Not employed

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
 05 / 11 / 2016

Transaction ID : SA11AI.4248

Amount of Each Receipt this Period
 250.00

Memo Item
 Campaign donation

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 21
	<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)
Ella Ward for Congress

A. Full Name (Last, First, Middle Initial)
Douglas W. Fuller

Mailing Address 400 Justin Quay

City Chesapeake State VA Zip Code 23322

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

Name of Employer Precon Development Group Occupation Builder/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
 04 / 21 / 2016

Transaction ID : SA11AI.4250

Amount of Each Receipt this Period
2000.00

Memo Item
Campaign donation

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

Mailing Address 2 Jorrock Lane

City Malvern State PA Zip Code 19355

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

Name of Employer Sugartown Partners Occupation Executive

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
 05 / 11 / 2016

Transaction ID : SA11AI.4252

Amount of Each Receipt this Period
2700.00

Memo Item
Campaign donation

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

Mailing Address 216 Sparrow Road

City Chesapeake State VA Zip Code 23325

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

Name of Employer Marine Systems Corp Occupation Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 11 / 2016

Transaction ID : SA11AI.4255

Amount of Each Receipt this Period
300.00

Memo Item
Campaign 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 9 OF 21
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Ella Ward for Congress

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

Mailing Address 621 Blackwater Road

City State Zip Code
Chesapeake VA 23322

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

Name of Employer Occupation
Self Employed Attorney

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
 05 / 06 / 2016

Transaction ID : SA11AI.4257

Amount of Each Receipt this Period
 1000.00

Memo Item
Campaign donation

B. Full Name (Last, First, Middle Initial)
L. Louise Lucas

Mailing Address 1 Eleanor Court

City State Zip Code
Portsmouth VA 23701

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

Name of Employer Occupation
Commonwealth of Virginia Senator

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
 05 / 25 / 2016

Transaction ID : SA11AI.4258

Amount of Each Receipt this Period
 250.00

Memo Item
Campaign donation

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

Mailing Address 3901 Meeting House Road

City State Zip Code
Virginia Beach VA 23455

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

Name of Employer Occupation
Cox Communications Retired Vice 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 Y
 04 / 07 / 2016

Transaction ID : SA11AI.4260

Amount of Each Receipt this Period
 1000.00

Memo Item
Campaign donation

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 21
	<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)
Ella Ward for Congress

A. New Chesapeake Men for Progress

Full Name (Last, First, Middle Initial)
New Chesapeake Men for Progress

Mailing Address 1508 Sams Cir, Suite B 145

City Chesapeake State VA Zip Code 23320-4589

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.4262

Amount of Each Receipt this Period
 400.00

Memo Item
 Campaign donation

B. Grady Palmer

Full Name (Last, First, Middle Initial)
Grady Palmer

Mailing Address 1105 Rockland Court

City Chesapeake State VA Zip Code 23322

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
 Williams Mullen Law Firm Attorney

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
 05 / 19 / 2016

Transaction ID : SA11AI.4264

Amount of Each Receipt this Period
 500.00

Memo Item
 Campaign donation

C. John Powell

Full Name (Last, First, Middle Initial)
John Powell

Mailing Address 102 Campbell Ave SW unit 4

City Roanoke State VA Zip Code 24011

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
 Self Employed Self Employed

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
 05 / 11 / 2016

Transaction ID : SA11AI.4266

Amount of Each Receipt this Period
 500.00

Memo Item
 Campaign donation

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

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

1400.00

**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 21
	<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)
Ella Ward for Congress

Full Name (Last, First, Middle Initial) A. James Reeder		Date of Receipt M M / D D / Y Y Y Y 04 / 25 / 2016	
Mailing Address 23236 Jay Street		Transaction ID : SA11AI.4268	
City State Zip Code Franklin VA 23851	Amount of Each Receipt this Period _____ 250.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item Campaign contribution		
Name of Employer Occupation Travel Incorporated Travel Agent	Election Cycle-to-Date _____ 250.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) B. Rahul Sharma		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2016	
Mailing Address 268 Mountain Avenue		Transaction ID : SA11AI.4270	
City State Zip Code Ridgewood NJ 07450	Amount of Each Receipt this Period _____ 500.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item Campaign donation		
Name of Employer Occupation Schafer Cullen Capital Mgmt Portfolio Manager	Election Cycle-to-Date _____ 500.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) C. Roland C Smith		Date of Receipt M M / D D / Y Y Y Y 04 / 29 / 2016	
Mailing Address 1944 Lancing Crest Lane		Transaction ID : SA11AI.4272	
City State Zip Code Chesapeake VA 23323-6648	Amount of Each Receipt this Period _____ 1000.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item Campaign donation		
Name of Employer Occupation Hearndon Construction Company Self Employed	Election Cycle-to-Date _____ 1000.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional).....	_____ 1750.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 21
	<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)
Ella Ward for Congress

Full Name (Last, First, Middle Initial) Terri Thompson		Date of Receipt MM / DD / YYYY 05 / 11 / 2016
Mailing Address 316 Clydes Way		Transaction ID : SA11AI.4274
City Chesapeake	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer State Farm	Occupation Claims Manager	<input type="checkbox"/> Memo Item Campaign donation
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Emil Viola		Date of Receipt MM / DD / YYYY 05 / 06 / 2016
Mailing Address 4001 South Military Highway		Transaction ID : SA11AI.4276
City Chesapeake	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1100.00
Name of Employer VICO Construction Company	Occupation Self Employed Developer	<input type="checkbox"/> Memo Item Campaign donation
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1100.00	

Full Name (Last, First, Middle Initial) Torilus Ortell Ward		Date of Receipt MM / DD / YYYY 05 / 25 / 2016
Mailing Address 800 Montauk Lane Apt 101		Transaction ID : SA11AI.4277
City Chesapeake	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer Norfolk State University	Occupation Facilities Manager	<input type="checkbox"/> Memo Item Campaign donation
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

SUBTOTAL of Receipts This Page (optional).....	1950.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 13 OF 21
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ella Ward for Congress

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

Mailing Address 1432 Waterside Drive

City State Zip Code
Chesapeake VA 23320

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

Name of Employer Occupation
Self Employed Advisor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 19 2016

Transaction ID : SA11AI.4279

Amount of Each Receipt this Period
200.00

Memo Item
Campaign donation

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

Mailing Address 21 Shamrock Drive

City State Zip Code
Portsmouth VA 23701

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

Name of Employer Occupation
Not employed Not employed

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
 05 11 2016

Transaction ID : SA11AI.4281

Amount of Each Receipt this Period
250.00

Memo Item
Campaign donation

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

Mailing Address 21 Shamrock Drive

City State Zip Code
Portsmouth VA 23701

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

Name of Employer Occupation
Dominion Power Retired

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
 04 19 2016

Transaction ID : SA11AI.4283

Amount of Each Receipt this Period
500.00

Memo Item
Campaign donation

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

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

950.00

16175.00

**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 21
	<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)
Ella Ward for Congress

A. Full Name (Last, First, Middle Initial)
Chesapeake Democratic Women

Mailing Address P.O. Box 2042

City Chesapeake State VA Zip Code 23327

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

Name of Employer Occupation

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
04 / 14 / 2016

Transaction ID : SA11C.4285

Amount of Each Receipt this Period
250.00

Memo Item
 Campaign 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

Memo Item

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

Memo Item

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

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

250.00

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 21			
	<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)
Ella Ward for Congress

A. 3 Degrees Designs

Full Name (Last, First, Middle Initial)
Mailing Address 3806D Banister River Reach

City Portsmouth State VA Zip Code 23703

Purpose of Disbursement Website maintenance

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 27 / 2016

Amount of Each Disbursement this Period: 438.38

Memo Item

Transaction ID : SB17.4287

B. Barrett Enterprises

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 6363

City Portsmouth State VA Zip Code 23703

Purpose of Disbursement 3000 business cards and 1000 lapel stickers

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 08 / 2016

Amount of Each Disbursement this Period: 300.90

Memo Item

Transaction ID : SB17.4288

C. Barrett Enterprises

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 6363

City Portsmouth State VA Zip Code 23703

Purpose of Disbursement Campaign materials - business cards, palm cards

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 22 / 2016

Amount of Each Disbursement this Period: 437.00

Memo Item

Transaction ID : SB17.4289

SUBTOTAL of Disbursements This Page (optional) 1176.28

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 16 OF 21	
	<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)
Ella Ward for Congress

Full Name (Last, First, Middle Initial) A. Barrett Enterprises		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2016
Mailing Address P.O. Box 6363		Amount of Each Disbursement this Period 689.70
City Portsmouth	State VA	Zip Code 23703
Purpose of Disbursement Campaign materials - palm cards, business cards, bottle labels		<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : SB17.4290
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. Barrett Enterprises		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2016
Mailing Address P.O. Box 6363		Amount of Each Disbursement this Period 110.00
City Portsmouth	State VA	Zip Code 23703
Purpose of Disbursement 500 remittance envelopes		<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : SB17.4291
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:	Category/Type	

Full Name (Last, First, Middle Initial) c. Gwendolyn I. Byrd		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2016
Mailing Address 889 Royal Grove Court		Amount of Each Disbursement this Period 600.00
City Chesapeake	State VA	Zip Code 23320
Purpose of Disbursement Riverwalk Club House rental and deposit		<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : SB17.4292
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1399.70
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 17 OF 21	
	<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)
Ella Ward for Congress

A. Comcast Spotlight

Full Name (Last, First, Middle Initial)
Mailing Address 3957 Westerre Parkway, Ste 300

City Richmond State VA Zip Code 23233

Purpose of Disbursement
Cable schedules for Richmond, Tri Cities and Direct TV

Candidate Name

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

State: District:

Date of Disbursement: 05 / 18 / 2016

Amount of Each Disbursement this Period: 3266.25

Memo Item

Transaction ID : SB17.4294

B. Michael Leon Malone

Full Name (Last, First, Middle Initial)
Mailing Address 1512 Burrowin Drive

City Chesapeake State VA Zip Code 23321

Purpose of Disbursement
FEC filing and 1st financial report filing

Candidate Name

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

State: District:

Date of Disbursement: 04 / 14 / 2016

Amount of Each Disbursement this Period: 500.00

Memo Item

Transaction ID : SB17.4295

C. Michael Leon Malone

Full Name (Last, First, Middle Initial)
Mailing Address 1512 Burrowin Drive

City Chesapeake State VA Zip Code 23321

Purpose of Disbursement
Postage Stamps reimbursement

Candidate Name

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

State: District:

Date of Disbursement: 04 / 21 / 2016

Amount of Each Disbursement this Period: 9.40

Memo Item

Transaction ID : SB17.4296

SUBTOTAL of Disbursements This Page (optional) 3775.65

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 18 OF 21			
	<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)
Ella Ward for Congress

Full Name (Last, First, Middle Initial) A. Post Net		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2016
Mailing Address 1508 Sams Circle		Amount of Each Disbursement this Period 342.33
City Chesapeake	State VA Zip Code 23320	
Purpose of Disbursement Car magnets and 2X6 foot banner		<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : SB17.4298
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. Post Net		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2016
Mailing Address 1508 Sams Circle		Amount of Each Disbursement this Period 3231.94
City Chesapeake	State VA Zip Code 23320	
Purpose of Disbursement 1000 Poly bag signs and 500 wire stakes		<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : SB17.4299
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. Post Net		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2016
Mailing Address 1508 Sams Circle		Amount of Each Disbursement this Period 1463.86
City Chesapeake	State VA Zip Code 23320	
Purpose of Disbursement 25 4X4 signs		<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : SB17.4300
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	5038.13
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 19 OF 21	
	<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)
Ella Ward for Congress

Full Name (Last, First, Middle Initial) A. Post Net		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2016
Mailing Address 1508 Sams Circle		Amount of Each Disbursement this Period 85.86
City Chesapeake	State VA Zip Code 23320	
Purpose of Disbursement 18 Cut vinyl for signs	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17.4301
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. Southern Cuisine Restaurant		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2016
Mailing Address 2616 East Main Street		Amount of Each Disbursement this Period 300.00
City Richmond	State VA Zip Code 23223	
Purpose of Disbursement Food for Richmond reception	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17.4303
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) c. Tim Ferguson / Elements		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2016
Mailing Address 710 Sail Fish Quay		Amount of Each Disbursement this Period 300.00
City Chesapeake	State VA Zip Code 23320	
Purpose of Disbursement Band for campaign event	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17.4305
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	685.86
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 20 OF 21			
	<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)
Ella Ward for Congress

Full Name (Last, First, Middle Initial) A. Jermayne Wright			Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2016	
Mailing Address 1900 King Henry Court, Apt 1			Amount of Each Disbursement this Period 500.00	
City Virginia Beach	State VA	Zip Code 23454	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Campaign manager fee		Candidate Name	Transaction ID : SB17.4307	
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:		Category/Type		

Full Name (Last, First, Middle Initial) B. Jermayne Wright			Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2016	
Mailing Address 1900 King Henry Court, Apt 1			Amount of Each Disbursement this Period 500.00	
City Virginia Beach	State VA	Zip Code 23454	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Campaign manager fee		Candidate Name	Transaction ID : SB17.4308	
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:		Category/Type		

Full Name (Last, First, Middle Initial) c. Jermayne Wright			Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2016	
Mailing Address 1900 King Henry Court, Apt 1			Amount of Each Disbursement this Period 500.00	
City Virginia Beach	State VA	Zip Code 23454	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Campaign manager fee		Candidate Name	Transaction ID : SB17.4309	
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:		Category/Type		

SUBTOTAL of Disbursements This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	13575.62

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Ella Ward for Congress** Transaction ID : **SC/10.4222**

LOAN SOURCE Full Name (Last, First, Middle Initial) Committee to Elect Ella P. Ward	<input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1517 Pine Grove Lane		

City	State	ZIP Code
Chesapeake	VA	23321

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
680.00	0.00	680.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 22 / Y 2016	M / D / Y 8/31/16	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....	680.00
TOTALS This Period (last page in this line only).....	680.00

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