

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
M. Mark Mitchell for US Congress

ADDRESS (number and street) 7220 Craig Street
Check if different than previously reported. (ACC) Fort Worth TX 76112
CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER C C00552950
3. IS THIS REPORT x NEW (N) OR AMENDED (A)
STATE DISTRICT TX 33

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) x, Runoff (12R), Convention (12C), Special (12S)
Election on 11 / 08 / 2016 in the State of TX
(c) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)
Election on / / in the State of

5. Covering Period 10 / 01 / 2016 through 10 / 19 / 2016

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 Young, Hannah, , ,
Signature of Treasurer Young, Hannah, , , [Electronically Filed] Date 10 / 26 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**M. Mark Mitchell for US Congress**

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

|   | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| <b>6. Net Contributions (other than loans)</b>  |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....   | 225.05                  | 6868.54                            |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....   | 0.00                    | 0.00                               |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)).....                              | 225.05                  | 6868.54                            |
| <b>7. Net Operating Expenditures</b>  |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....  | 14121.24                | 17358.36                           |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....  | 0.00                    | 0.00                               |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)).....  | 14121.24                | 17358.36                           |
| <b>8. Cash on Hand at Close of<br/>Reporting Period (from Line 27).....</b>                                       | 2591.42                 |                                    |
| <b>9. Debts and Obligations Owed TO<br/>the Committee (Itemize all on<br/>Schedule C and/or Schedule D).....</b>  | 0.00                    |                                    |
| <b>10. Debts and Obligations Owed BY<br/>the Committee (Itemize all on<br/>Schedule C and/or Schedule D).....</b> | 19906.24                |                                    |

**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 05/2016)

Write or Type Committee Name

M. Mark Mitchell for US Congress

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

| I. RECEIPTS   | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------------|------------------------------------|
| 11. CONTRIBUTIONS (other than loans) FROM:  |                               |                                    |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                    |
| (i) Itemized (use Schedule A).....  | 0.00                          | 5125.00                            |
| (ii) Unitemized.....  | 225.05                        | 1675.05                            |
| (iii) TOTAL of contributions from individuals ▶   | 225.05                        | 6800.05                            |
| (b) Political Party Committees.....   | 0.00                          | 0.00                               |
| (c) Other Political Committees (such as PACs).....  | 0.00                          | 0.00                               |
| (d) The Candidate.....  | 0.00                          | 68.49                              |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..              | 225.05                        | 6868.54                            |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....  | 0.00                          | 0.00                               |
| 13. LOANS:  |                               |                                    |
| (a) Made or Guaranteed by the Candidate.....  | 10000.00                      | 12731.24                           |
| (b) All Other Loans.....  | 0.00                          | 0.00                               |
| (c) TOTAL LOANS (add Lines 13(a) and (b)).....  | 10000.00                      | 12731.24                           |
| 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)..... ▶ | 10225.05                      | 19599.78                           |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 17

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....  | 14121.24                      | 17358.36                           |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:   |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....   | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:   |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 0.00                               |
| (b) Political Party Committees.....  | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs).....                        | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 0.00                               |
| 21. OTHER DISBURSEMENTS .....  | 0.00                          | 0.00                               |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 14121.24                      | 17358.36                           |

**III. CASH SUMMARY**

|   |          |
|---|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 6487.61  |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 10225.05 |
| 25. SUBTOTAL (add Line 23 and Line 24).....   | 16712.66 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 14121.24 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 2591.42  |

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 17  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
**M. Mark Mitchell for US Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mitchell, Monte, Mark, ,**

Mailing Address 7220 Craig Street

City Fort Worth State TX Zip Code 76112

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

Name of Employer Self Occupation Physician & Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
12819.73

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

Transaction ID : SA13A.4233

Amount of Each Receipt this Period  
10000.00

Memo Item  
Loan for Advertising

**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

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 10000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 10000.00 |

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

|   |   |              |  |  |  |
|---|---|--------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 6 OF 17 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br><input type="checkbox"/> 20a <input type="checkbox"/> 18<br><input type="checkbox"/> 20b <input type="checkbox"/> 19a<br><input type="checkbox"/> 20c <input type="checkbox"/> 19b<br><input type="checkbox"/> 21 |              |  |  |  |

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

NAME OF COMMITTEE (In Full)  
**M. Mark Mitchell for US Congress**

|   |  |                                    |   |  |  |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Facebook</b>   |  |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 13 / 2016 |  |  |
| Mailing Address 1601 Willow Road  |  |                                    | FEC Identification Number<br>C                                |  |  |
| City<br>Menlo Park  | State<br>CA  | Zip Code<br>94025                  | Amount of Each Disbursement this Period<br>750.73             |  |  |
| Purpose of Disbursement<br>Advertising Expenses   |  | Category/<br>Type<br>004           | Transaction ID : SB17.4231                                    |  |  |
| Candidate Name  |  | Memo Item <input type="checkbox"/> |   |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                    |   |  |  |
| State: District:  |  |                                    |   |  |  |

|   |  |                                    |   |  |  |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Gotprint</b>   |  |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 07 / 2016 |  |  |
| Mailing Address 1001 Nolen Drive  |  |                                    | FEC Identification Number<br>C                                |  |  |
| City<br>Grapevine   | State<br>TX  | Zip Code<br>76051                  | Amount of Each Disbursement this Period<br>2570.57            |  |  |
| Purpose of Disbursement<br>Advertising expenses   |  | Category/<br>Type<br>004           | Transaction ID : SB17.4230                                    |  |  |
| Candidate Name  |  | Memo Item <input type="checkbox"/> |   |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                    |   |  |  |
| State: District:  |  |                                    |   |  |  |

|   |  |                                    |   |  |  |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Metroplex Mail Company</b>   |  |                                    | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 18 / 2016 |  |  |
| Mailing Address 1352 Exchange Drive   |  |                                    | FEC Identification Number<br>C                                |  |  |
| City<br>Richardson  | State<br>TX  | Zip Code<br>75081                  | Amount of Each Disbursement this Period<br>7699.95            |  |  |
| Purpose of Disbursement<br>Advertising Expenses   |  | Category/<br>Type<br>004           | Transaction ID : SB17.4232                                    |  |  |
| Candidate Name  |  | Memo Item <input type="checkbox"/> |   |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                    |   |  |  |
| State: District:  |  |                                    |   |  |  |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 11021.25 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |          |

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

|   |   |              |  |  |  |
|---|---|--------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 7 OF 17 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |              |  |  |  |

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

NAME OF COMMITTEE (In Full)  
**M. Mark Mitchell for US Congress**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Stars and Stripes, Inc.</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 04 / 2016 |
| Mailing Address 7560 W. 100th Pl.   |  | FEC Identification Number<br>C                                |
| City<br>Bridgeview  | State<br>IL  | Zip Code<br>60455   |
| Purpose of Disbursement<br>Printing for yard signs  | Category/<br>Type<br>004   |   |
| Candidate Name  | Amount of Each Disbursement this Period<br>2700.00   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.4227                                    |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Stars and Stripes, Inc.</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 07 / 2016 |
| Mailing Address 7560 W. 100th Pl.   |  | FEC Identification Number<br>C                                |
| City<br>Bridgeview  | State<br>IL  | Zip Code<br>60455   |
| Purpose of Disbursement<br>Advertising expense  | Category/<br>Type<br>004   |   |
| Candidate Name  | Amount of Each Disbursement this Period<br>399.99  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.4229                                    |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y |
| Mailing Address   |  | FEC Identification Number<br>C              |
| City  | State  | Zip Code                                    |
| Purpose of Disbursement   | Category/<br>Type  |   |
| Candidate Name  | Amount of Each Disbursement this Period  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item          |
| State: District:  |  |   |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 3099.99  |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 14121.24 |

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **M. Mark Mitchell for US Congress** Transaction ID : **SC/10.4144**

|  |             |                                    |   |
|--|-------------|------------------------------------|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)<br>Mitchell, Monte, Mark, , |             | <input type="checkbox"/> Memo Item | Election: 2016<br><input checked="" type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address<br>7220 Craig Street   |             |                                    |   |
| City<br>Fort Worth   | State<br>TX | ZIP Code<br>76112                  | <input checked="" type="checkbox"/> Personal Funds of the Candidate   |

|                                    |                                    |  |
|------------------------------------|------------------------------------|--|
| Original Amount of Loan<br>3175.00 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>3175.00 |
|------------------------------------|------------------------------------|--|

|              |                                       |                            |  |   |
|--------------|---------------------------------------|----------------------------|--|---|
| <b>TERMS</b> | Date Incurred<br>M 11 / D 30 / Y 2015 | Date Due<br>M / D / Y none | Interest Rate (If none, enter 0)<br>0.00 % (apr) | Secured:<br><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: |
| 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, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

|   |         |
|---|---------|
| <b>SUBTOTALS</b> This Period This Page (optional).....▶       | 3175.00 |
| <b>TOTALS</b> This Period (last page in this line only).....▶ |         |

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



**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **M. Mark Mitchell for US Congress** Transaction ID : **SC/10.4148**

|  |             |                                    |   |
|--|-------------|------------------------------------|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)<br>Mitchell, Monte, Mark, , |             | <input type="checkbox"/> Memo Item | Election: 2016<br><input checked="" type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address<br>7220 Craig Street   |             |                                    |   |
| City<br>Fort Worth   | State<br>TX | ZIP Code<br>76112                  | <input checked="" type="checkbox"/> Personal Funds of the Candidate   |

|                                    |                                    |  |
|------------------------------------|------------------------------------|--|
| Original Amount of Loan<br>2000.00 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>2000.00 |
|------------------------------------|------------------------------------|--|

|              |                                       |                                |  |   |
|--------------|---------------------------------------|--------------------------------|--|---|
| <b>TERMS</b> | Date Incurred<br>M 02 / D 06 / Y 2016 | Date Due<br>M M / D D / Y none | Interest Rate (If none, enter 0)<br>0.00 % (apr) | Secured:<br><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: [ ] |
| 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, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

|   |             |
|---|-------------|
| <b>SUBTOTALS</b> This Period This Page (optional).....▶       | [ ] 2000.00 |
| <b>TOTALS</b> This Period (last page in this line only).....▶ | [ ]         |

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **M. Mark Mitchell for US Congress** Transaction ID : **SC/10.4159**

|  |             |                                    |   |
|--|-------------|------------------------------------|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)<br>Mitchell, Monte, Mark, , |             | <input type="checkbox"/> Memo Item | Election: 2016<br><input checked="" type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address<br>7220 Craig Street   |             |                                    |   |
| City<br>Fort Worth   | State<br>TX | ZIP Code<br>76112                  | <input checked="" type="checkbox"/> Personal Funds of the Candidate   |

|                                    |                                    |  |
|------------------------------------|------------------------------------|--|
| Original Amount of Loan<br>2000.00 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>2000.00 |
|------------------------------------|------------------------------------|--|

|              |                                       |                                |  |   |
|--------------|---------------------------------------|--------------------------------|--|---|
| <b>TERMS</b> | Date Incurred<br>M 02 / D 24 / Y 2016 | Date Due<br>M M / D D / Y none | Interest Rate (If none, enter 0)<br>0.00 % (apr) | Secured:<br><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: [ ] |
| 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, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

|   |             |
|---|-------------|
| <b>SUBTOTALS</b> This Period This Page (optional).....▶       | [ ] 2000.00 |
| <b>TOTALS</b> This Period (last page in this line only).....▶ | [ ]         |

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **M. Mark Mitchell for US Congress** Transaction ID : **SC/10.4160**

|  |             |                                    |   |
|--|-------------|------------------------------------|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)<br>Mitchell, Monte, Mark, , |             | <input type="checkbox"/> Memo Item | Election: 2016<br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address<br>7220 Craig Street   |             |                                    |   |
| City<br>Fort Worth   | State<br>TX | ZIP Code<br>76112                  | <input checked="" type="checkbox"/> Personal Funds of the Candidate   |

|                                   |                                    |   |
|-----------------------------------|------------------------------------|---|
| Original Amount of Loan<br>350.00 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>350.00 |
|-----------------------------------|------------------------------------|---|

|              |                                       |                                |  |   |
|--------------|---------------------------------------|--------------------------------|--|---|
| <b>TERMS</b> | Date Incurred<br>M 05 / D 19 / Y 2016 | Date Due<br>M M / D D / Y none | Interest Rate (If none, enter 0)<br>0.00 % (apr) | Secured:<br><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: |
| 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, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

|   |        |
|---|--------|
| <b>SUBTOTALS</b> This Period This Page (optional).....▶       | 350.00 |
| <b>TOTALS</b> This Period (last page in this line only).....▶ |        |

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **M. Mark Mitchell for US Congress** Transaction ID : **SC/10.4161**

|  |             |                                    |   |
|--|-------------|------------------------------------|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)<br>Mitchell, Monte, Mark, , |             | <input type="checkbox"/> Memo Item | Election: 2016<br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address<br>7220 Craig Street   |             |                                    |   |
| City<br>Fort Worth   | State<br>TX | ZIP Code<br>76112                  | <input checked="" type="checkbox"/> Personal Funds of the Candidate   |

|                                  |                                    |  |
|----------------------------------|------------------------------------|--|
| Original Amount of Loan<br>50.00 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>50.00 |
|----------------------------------|------------------------------------|--|

|              |                                       |                                |  |   |
|--------------|---------------------------------------|--------------------------------|--|---|
| <b>TERMS</b> | Date Incurred<br>M 06 / D 23 / Y 2016 | Date Due<br>M M / D D / Y none | Interest Rate (If none, enter 0)<br>0.00 % (apr) | Secured:<br><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: [ ] |
| 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, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

|   |           |
|---|-----------|
| <b>SUBTOTALS</b> This Period This Page (optional).....▶       | [ ] 50.00 |
| <b>TOTALS</b> This Period (last page in this line only).....▶ | [ ]       |

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **M. Mark Mitchell for US Congress** Transaction ID : **SC/10.4217**

|  |             |                                    |   |
|--|-------------|------------------------------------|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)<br>Mitchell, Monte, Mark, , |             | <input type="checkbox"/> Memo Item | Election: 2016<br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address<br>7220 Craig Street   |             |                                    |   |
| City<br>Fort Worth   | State<br>TX | ZIP Code<br>76112                  | <input checked="" type="checkbox"/> Personal Funds of the Candidate   |

|                                   |                                    |   |
|-----------------------------------|------------------------------------|---|
| Original Amount of Loan<br>316.40 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>316.40 |
|-----------------------------------|------------------------------------|---|

|              |                                       |                                   |   |   |
|--------------|---------------------------------------|-----------------------------------|---|---|
| <b>TERMS</b> | Date Incurred<br>M 07 / D 25 / Y 2016 | Date Due<br>M M / D D / Y Unknown | Interest Rate (If none, enter 0)<br>% (apr) | Secured:<br><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: |
| 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, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

|   |        |
|---|--------|
| <b>SUBTOTALS</b> This Period This Page (optional).....▶       | 316.40 |
| <b>TOTALS</b> This Period (last page in this line only).....▶ |        |

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **M. Mark Mitchell for US Congress** Transaction ID : **SC/10.4218**

|  |             |                   |  |   |
|--|-------------|-------------------|--|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)<br>Mitchell, Monte, Mark, , |             |                   | <input type="checkbox"/> Memo Item                       | Election: 2016<br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address<br>7220 Craig Street   |             |                   |  |   |
| City<br>Fort Worth   | State<br>TX | ZIP Code<br>76112 | <input type="checkbox"/> Personal Funds of the Candidate |   |

|                                   |                                    |   |
|-----------------------------------|------------------------------------|---|
| Original Amount of Loan<br>512.16 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>512.16 |
|-----------------------------------|------------------------------------|---|

|              |   |                                     |   |   |
|--------------|---|-------------------------------------|---|---|
| <b>TERMS</b> | Date Incurred<br>M 08 / D 08 / Y 2016 Y | Date Due<br>M M / D D / Y Unknown Y | Interest Rate (If none, enter 0)<br>% (apr) | Secured:<br><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: |
| 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, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

|   |        |
|---|--------|
| <b>SUBTOTALS</b> This Period This Page (optional).....▶       | 512.16 |
| <b>TOTALS</b> This Period (last page in this line only).....▶ |        |

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **M. Mark Mitchell for US Congress** Transaction ID : **SC/10.4219**

|  |             |                                    |   |
|--|-------------|------------------------------------|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)<br>Mitchell, Monte, Mark, , |             | <input type="checkbox"/> Memo Item | Election: 2016<br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address<br>7220 Craig Street   |             |                                    |   |
| City<br>Fort Worth   | State<br>TX | ZIP Code<br>76112                  | <input checked="" type="checkbox"/> Personal Funds of the Candidate   |

|                                    |                                    |  |
|------------------------------------|------------------------------------|--|
| Original Amount of Loan<br>1473.71 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>1473.71 |
|------------------------------------|------------------------------------|--|

|              |                                       |                                   |   |   |
|--------------|---------------------------------------|-----------------------------------|---|---|
| <b>TERMS</b> | Date Incurred<br>M 09 / D 02 / Y 2016 | Date Due<br>M M / D D / Y Unknown | Interest Rate (If none, enter 0)<br>% (apr) | Secured:<br><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: |
| 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, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

|   |         |
|---|---------|
| <b>SUBTOTALS</b> This Period This Page (optional).....▶       | 1473.71 |
| <b>TOTALS</b> This Period (last page in this line only).....▶ |         |

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

# SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **M. Mark Mitchell for US Congress** Transaction ID : **SC/10.4220**

|  |             |                                    |   |
|--|-------------|------------------------------------|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)<br>Mitchell, Monte, Mark, , |             | <input type="checkbox"/> Memo Item | Election: 2016<br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address<br>7220 Craig Street   |             |                                    |   |
| City<br>Fort Worth   | State<br>TX | ZIP Code<br>76112                  | <input checked="" type="checkbox"/> Personal Funds of the Candidate   |

|                                  |                                    |  |
|----------------------------------|------------------------------------|--|
| Original Amount of Loan<br>28.97 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>28.97 |
|----------------------------------|------------------------------------|--|

|              |                                       |                                   |   |   |
|--------------|---------------------------------------|-----------------------------------|---|---|
| <b>TERMS</b> | Date Incurred<br>M 09 / D 24 / Y 2016 | Date Due<br>M M / D D / Y Unknown | Interest Rate (If none, enter 0)<br>% (apr) | Secured:<br><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: |
| 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, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

|   |       |
|---|-------|
| <b>SUBTOTALS</b> This Period This Page (optional).....▶       | 28.97 |
| <b>TOTALS</b> This Period (last page in this line only).....▶ |       |

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



**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **M. Mark Mitchell for US Congress** Transaction ID : **SC/10.4233**

|  |             |                   |  |   |
|--|-------------|-------------------|--|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)<br>Mitchell, Monte, Mark, , |             |                   | <input type="checkbox"/> Memo Item                       | Election: 2016<br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address<br>7220 Craig Street   |             |                   |  |   |
| City<br>Fort Worth   | State<br>TX | ZIP Code<br>76112 | <input type="checkbox"/> Personal Funds of the Candidate |   |

|                                     |                                    |   |
|-------------------------------------|------------------------------------|---|
| Original Amount of Loan<br>10000.00 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>10000.00 |
|-------------------------------------|------------------------------------|---|

|              |                                       |                               |  |   |
|--------------|---------------------------------------|-------------------------------|--|---|
| <b>TERMS</b> | Date Incurred<br>M 10 / D 14 / Y 2016 | Date Due<br>M / D / Y No date | Interest Rate (If none, enter 0)<br>0.00 % (apr) | Secured:<br><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: |
| 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, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

|   |          |
|---|----------|
| <b>SUBTOTALS</b> This Period This Page (optional).....▶       | 10000.00 |
| <b>TOTALS</b> This Period (last page in this line only).....▶ | 19906.24 |

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