FFC I	ND DIS	OF RECEIPTS BURSEMENTS uthorized Committee	Office	Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT	▼ Example: If typing, type over the lines.	12FE4M5	
ADDRESS (number and street)	PO BOX 654			
Check if different				
than previously reported. (ACC)			FL 33922	
2. FEC IDENTIFICATION N	JMBER ▼		STATE	
C C00556464		3. IS THIS NEW REPORT (N) OR	AMENDED (A)	STATE ▼ DISTRICT
 4. TYPE OF REPORT (Charles) (a) Quarterly Reports: April 15 Quarterly R July 15 Quarterly R October 15 Quarterly January 31 Year-En Termination Report 	Report (Q1) Report (Q2) Ny Report (Q3) d Report (YE)	 (b) 12-Day PRE-Election Report for the Primary (12P) Convention (12C) Election on General (30G) Election on 	General (12G) Special (12S)	Runoff (12R) in the State of Special (30S) in the State of
5. Covering Period	M / D D / 01	Y Y Y Y Y 2014 through 0		2014 Y
I certify that I have examined th Type or Print Name of Treasure		the best of my knowledge and belief it is	s true, correct and comp	olete.
Signature of Treasurer	ene Soler	[Electronically Filed]	Date	2010 / Y Y Y Y 2014
NOTE: Submission of false, errone	eous, or incomplet	e information may subject the person signi	ng this Report to the pen	alties of 2 U.S.C. §437g.
Office Use Only			FE	EC FORM 3 Revised 02/2003)

Image# 14970779350

09/16/2014 13 : 20 PAGE 1 / 35 **SUMMARY PAGE** of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 35

Write or Type Committee Name DREIKORN FOR CONGRESS

R	epor	t Covering the Period: From:	07 / 01 / Y Y Y Y 01 To:	M M / D D / Y Y Y Y 09 / 2014
			COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net	t Contributions (other than loans)		
	(a)	Total Contributions (other than loans) (from Line 11(e))	0.00	15745.00
	(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))	0.00	15745.00
7.	Net	t Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	102.80	23129.20
	(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))	102.80	23129.20
8.		sh on Hand at Close of porting Period (from Line 27)	2279.17	
9.	the	ots and Obligations Owed TO Committee (Itemize all on nedule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed BY Committee (Itemize all on nedule C and/or Schedule D)	9663.37	

For further information contact:

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

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

Image# 14970779352		
Г	DETAILED SUMMARY PAGE	
FEC Form 3 (Revised 12/2003)	of Receipts	PAGE 3 / 35
Write or Type Committee Name		
DREIKORN FOR CONGRESS		
Report Covering the Period: From:	07 / 01 / Y Y Y Y 07 To:	M M / D D / Y Y Y Y 09 09 2014
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM	1:	
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	0.00	12875.00
(ii) Uniternized	0.00	2870.00
(iii) TOTAL of contributions		
from individuals	0.00	15745.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) The Candidate (e) TOTAL CONTRIBUTIONS	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans)		
(add Lines 11(a)(iii), (b), (c), and (d))	0.00	15745.00
12. TRANSFERS FROM OTHER		
AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the	0.00	10639.17
Candidate		
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	10639.17
		7
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)	0.00	26384.17

FE5AN018

FEC Form 3 (Revised 02/2003) COLUMN A COLUMN B **II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 102.80 23129.20 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 70.80 975.80 by the Candidate..... 0.00 0.00 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 70.80 975.80 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other (a) 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees..... Other Political Committees (c) 0.00 0.00 (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS 0.00 0.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 173.60 24105.00 (add Lines 17, 18, 19(c), 20(d), and 21) **III. CASH SUMMARY** 2452.77 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD

24	TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)		_	7		7	0.00	
25.	SUBTOTAL (add Line 23 and Line 24)	[7		7	2452.77	
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	[7		,	173.60	1
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)			7		7	2279.17	

DETAILED SUMMARY PAGE

of Disbursements

PAGE 4 / 35

		(FEC Form 3) SBURSEMENTS		Use separate sch for each category Detailed Summar	/ of the	FOR LINE NUMBER: (check only one) PAGE 5 OF 35 X 17 18 19a 19b 20a 20b 20c 21
						person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMM	ITTEE (In Full)	6			
Α.	Full Name (Last, I Bank of Am	First, Middle Initial) erica				Date of Disbursement
	Mailing Address	PO Box 15290				09 / D D / Y Y Y Y 09 02 2014
	City Wilmington		State DE	Zip Code 19850-5290		Amount of Each Disbursement this Period
	Purpose of Disbu Bank Service Cha				001	29.95 Transaction ID : SB17.4436
	Candidate Name				Category/ Type	
	Office Sought:	House Dis Senate President	bursement For Primary X Other (s	: 2014 General specify) Special-Pri	mary	
	State: Full Name (Last, I	District: First, Middle Initial)				
В.						Date of Disbursement
	Mailing Address					M M / D D / Y Y Y Y
	City		State	Zip Code		Amount of Each Disbursement this Period
	Purpose of Disbu	rsement				
	Candidate Name				Category/ Type	<i></i>
	Office Sought:	House Dis Senate President	bursement For Primary Other (s	General		
	State: Full Name (Last 1	District: First, Middle Initial)				
C.	Fuil Harris (Last, I					Date of Disbursement
	Mailing Address					M M / D D / Y Y Y Y
	City		State Zi	p Code		Amount of Each Disbursement this Period
	Purpose of Disbu	rsement				
	Candidate Name				Category/ Type	
	Office Sought: State:	House Dis Senate President District:	bursement For Primary Other (s	General		
			onal)			29.95
		lursements This Page (option) (last page this line numbe				29.95

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sch for each category Detailed Summar	of the	FOR LINE NUMBER: PAGE 6 0F 35 (check only one) 17 18 X 19a 19b 20a 20b 20c 21		
	ny information copied from such Reports and Statements m for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) DREIKORN FOR CONGRESS					
A.	Full Name (Last, First, Middle Initial) MICHAEL JOHN DREIKORN			Date of Disbursement		
	Mailing Address 5697 Bay Point Road			09 09 2014		
	City State BOKEELIA FL Purpose of Disbursement	Zip Code 33922		Amount of Each Disbursement this Period 70.80		
	Candidate Name		Category/	Transaction ID : SB19A.4439		
	Office Sought: K House Disbursement For Senate President X Other (s State: FL District: 19	: 2014 General pecify) Special-Prin	Type mary			
B.	Full Name (Last, First, Middle Initial)			Date of Disbursement		
	Mailing Address			M M / D D / Y Y Y Y		
	City State	Zip Code		Amount of Each Disbursement this Period		
	Purpose of Disbursement Candidate Name		Category/			
	Office Sought: House Disbursement For Senate President Other (s State: District:	General	Туре			
c.	Full Name (Last, First, Middle Initial)			Date of Disbursement		
	Mailing Address			M M / D D / Y Y Y Y		
	City State Zij	p Code		Amount of Each Disbursement this Period		
	Purpose of Disbursement Candidate Name		Category/			
	Office Sought: House Disbursement For Senate President Other (s State: District:	General	Туре			
s	UBTOTAL of Disbursements This Page (optional)			70.80		
т	OTAL This Period (last page this line number only)			,,		

ıge# 14970779356							
HEDULE C (FEC Form ANS	3)			Use separate schedu for each category of Detailed Summary P	the (chec	PAGE 7 LINE NUMBER: ck only one)	
ME OF COMMITTEE (In Full)	SS			Trans	action ID : SC	/10.4218	
LOAN SOURCE Full Name (Last, MICHAEL JOHN DREIKO		dle Initial)		[PERSONAL FUNDS]	Election:	ry	
Mailing Address 5697 Bay Point Road						(specify) 🔻	
City	:	State	ZIP Code	9			
BOKEELIA		FL	33922				
Original Amount of Loan	_	Cumulative Pag	yment To D	Date Ba	lance Outstan	iding at Close o	f This P
47	7.94			0.00	7		47.94
TERMS Date Incurred		C	Date Due	Interest Ra	te	Secu	red:
^M 12 ^M / ^D 26 ^D / ^Y Ž013	Y	10 ^M / ^D 05 ^D	/ Y	0005 ^Y 0.	00 %	(apr)	/es
List All Endorsers or Guarantors		Loan Source					
1. Full Name (Last, First, Middle II	nitial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	7	
2. Full Name (Last, First, Middle In	itial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	y	
3. Full Name (Last, First, Middle In	itial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	y	
4. Full Name (Last, First, Middle In	iitial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	9	y	
JBTOTALS This Period This Page (c	optional)		I	····· •			47.94
DTALS This Period (last page in this						ropriate line of	

age# 14970779357						
HEDULE C (FEC Form	n 3)			Use separate sche for each category Detailed Summary	of the	PAGE 8 OF FOR LINE NUMBER: (check only one) 11 (check only one) 11
ME OF COMMITTEE (In Full)	ESS			Tran	saction	ID : SC/10.4244
LOAN SOURCE Full Name (Las MICHAEL JOHN DREIK		ddle Initial)		[PERSONAL FUNDS	SJ Ele	ction: 2014 Primary General
Mailing Address 5697 Bay Point Road						Other (specify) v pecial-Primary
City		State	ZIP Cod	e		
BOKEELIA		FL	33922			
Original Amount of Loan		Cumulative Pa	ayment To [Date	Balance	Outstanding at Close of This Pe
7	50.00			0.00		750.00
TERMS Date Incurred			Date Due	Interest I	Rate	Secured:
M01 ^M / D22 ^D / Y Ž01	¥ Y	^M 09 ^M / ^D 01	D / Y		0.00	% (apr)
List All Endorsers or Guarantor		o Loan Source				
1. Full Name (Last, First, Middle	e 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:	7	· · · · · · · · ·
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:	7	· · · · · · · ·
IBTOTALS This Period This Page	(optional).			•••••		750.00
OTALS This Period (last page in the approximation of the approximation o					forward	to appropriate line of Summa

age# 14970779358						
HEDULE C (FEC For ANS	m 3)			Use separate sch for each category Detailed Summar	/ of the	PAGE 9 OF FOR LINE NUMBER: (check only one) X 1 1 1
ME OF COMMITTEE (In Full)	RESS			Tra	ansaction	ID : SC/10.4235
LOAN SOURCE Full Name (La MICHAEL JOHN DREI		ddle Initial)		[PERSONAL FUND	DSJ Ele	ection: 2014 Primary General
Mailing Address 5697 Bay Point Road						Other (specify) ▼ pecial-Primary
City		State	ZIP Cod	e		
BOKEELIA		FL	33922			
Original Amount of Loan		Cumulative Pa	ayment To D	Date	Balance	Outstanding at Close of This Po
	35.00			0.00		35.00
TERMS Date Incurred			Date Due	Interest	t Rate	Secured:
M01 ^M / D27 ^D / Y Ž0	14 Y	^M 09 ^M / ^D 01	D / Y	0011 Y	0.00	% (apr)
List All Endorsers or Guaranto		o Loan Source				
1. Full Name (Last, First, Midd	le Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		· · · · · · · ·
2. Full Name (Last, First, Middle	e Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Middle	e Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	
4. Full Name (Last, First, Middle	e Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
JBTOTALS This Period This Pag	e (optional).			•••••		35.00
OTALS This Period (last page in arry outstanding balance only to				-		

age# 14970779359			
HEDULE C (FEC Form 3 ANS	3)	Use separate schedule for each category of th Detailed Summary Pag	^{ne} (check only one) X 13
ME OF COMMITTEE (In Full) REIKORN FOR CONGRES	S	Transac	tion ID : SC/10.4236
LOAN SOURCE Full Name (Last, F MICHAEL JOHN DREIKOF		[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 5697 Bay Point Road			X Other (specify) ▼ Special-Primary
City		P Code	
BOKEELIA	FL 33	3922	
Original Amount of Loan	Cumulative Payme		nce Outstanding at Close of This Pe
11.	20	0.00	11.20
TERMS Date Incurred	Date	Due Interest Rate	Secured:
M01 ^M / D30 ^D / Y Ž01Ă	Y 09 / 01 /	Ý Ŏ011 Ý 0.00	₩ (apr) Ves X
List All Endorsers or Guarantors (i			
1. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	y y
2. Full Name (Last, First, Middle Init	al)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · ·
3. Full Name (Last, First, Middle Init	al)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	y
4. Full Name (Last, First, Middle Init	al)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	y
JBTOTALS This Period This Page (or	otional)	······ ·	11.20
OTALS This Period (last page in this arry outstanding balance only to LIN			

age# 14970779360					
HEDULE C (FEC F ANS	orm 3)			Use separate schedul for each category of t Detailed Summary Pag	the (check only one) X 13a
ME OF COMMITTEE (In Full)	GRESS			Transad	ction ID : SC/10.4228
LOAN SOURCE Full Name MICHAEL JOHN DR		ddle Initial)		[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 5697 Bay Point Road					Other (specify) ▼ Special-Primary
City		State	ZIP Code	e	
BOKEELIA		FL	33922		
Original Amount of Loan		Cumulative Pa	ayment To D		ance Outstanding at Close of This Peri
	51.89			0.00	51.89
TERMS Date Incurred	Ž01Ă Y		Date Due	Interest Rate	
List All Endorsers or Guara		o Loan Source			
1. Full Name (Last, First, M	iddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	-y
2. Full Name (Last, First, Mi	ddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1
3. Full Name (Last, First, Mi	ddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y
4. Full Name (Last, First, Mi	ddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 (x 1
JBTOTALS This Period This DTALS This Period (last page				· _	51.89
					ward to appropriate line of Summar

SCHEDULE C (FEC Form 3) LOANS	Image: Page 12 OF 35 Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER: (check only one) Image: Transaction ID : SC/10.4245 [PERSONAL FUNDS] Election: 2014 Primary General
DREIKORN FOR CONGRESS	[PERSONAL FUNDS] Election: 2014
	Primary
LOAN SOURCE Full Name (Last, First, Middle Initial) MICHAEL JOHN DREIKORN	
Mailing Address 5697 Bay Point Road	XOther (specify)Special-Primary
City State ZIP Co	ode
BOKEELIA FL 33922	
Original Amount of Loan Cumulative Payment To 109.70	De Date Balance Outstanding at Close of This Period
TERMS Date Incurred Date Due M 02 ^M / D05 ^D / Y 2014 M 09 ^M / D01 ^D / Y	Interest Rate Secured: 0011 0.00 % (apr) Yes
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:
SUBTOTALS This Period This Page (optional) TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If	

age# 14970779362			
HEDULE C (FEC Form 3 ANS		Use separate schedule for each category of th Detailed Summary Pag	(check only one)
ME OF COMMITTEE (In Full) REIKORN FOR CONGRES	S	Transact	tion ID : SC/10.4226
LOAN SOURCE Full Name (Last, Fi MICHAEL JOHN DREIKOR		[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 5697 Bay Point Road			Other (specify) ▼ Special-Primary
City	State ZIP C		
BOKEELIA	FL 3392		
Original Amount of Loan 14.5	Cumulative Payment	To Date Balar	nce Outstanding at Close of This Pe 14.52
<u> </u>	2		14.02
Date Incurred	Date Du Y 09 M / D 01 / Y	e Interest Rate	
		0011	Yes
List All Endorsers or Guarantors (if 1. Full Name (Last, First, Middle Init		Name of Employer	
Mailing Address		Occupation	
		Amount	
City S	State ZIP Code	Guaranteed Outstanding:	g
2. Full Name (Last, First, Middle Initia	al)	Name of Employer	
Mailing Address		Occupation	
City S	State ZIP Code	Amount Guaranteed Outstanding:	y
3. Full Name (Last, First, Middle Initia	al)	Name of Employer	
Mailing Address		Occupation	
City S	state ZIP Code	Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Middle Initia	al)	Name of Employer	
Mailing Address		Occupation	
City S	state ZIP Code	Amount Guaranteed Outstanding:	
JBTOTALS This Period This Page (op	tional)	······· ►	14.52
OTALS This Period (last page in this li arry outstanding balance only to LINE			7 7 7 *

age# 14970779363			
CHEDULE C (FEC Form 3) DANS		Use separate schedule for each category of th Detailed Summary Pag	ie (check only one)
ME OF COMMITTEE (In Full)		Transac	tion ID : SC/10.4248
LOAN SOURCE Full Name (Last, First MICHAEL JOHN DREIKORN	, ,	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 5697 Bay Point Road			Other (specify) ▼ Special-Primary
City	State ZIP C	ode	
BOKEELIA	FL 33922	2	
Original Amount of Loan	Cumulative Payment T	o Date Bala	nce Outstanding at Close of This Pe
75.00		0.00	75.00
TERMS Date Incurred	Date Due	e Interest Rate	Secured:
M02 ^M / D07 ^D / Y Ž014 Y	M10 M / D31 / Y	0.00 × × 0.00	₩ (apr) □ _{Yes} ×
List All Endorsers or Guarantors (if a			
1. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City Sta	te ZIP Code	Amount Guaranteed Outstanding:	y y
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City Sta	te ZIP Code	Amount Guaranteed Outstanding:	y y
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City Sta	te ZIP Code	Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City Sta	te ZIP Code	Amount Guaranteed Outstanding:	9 1 1 9 1 1 1 1
JBTOTALS This Period This Page (optic	nal)	······ ►	75.00
OTALS This Period (last page in this line arry outstanding balance only to LINE 3			

age# 14970779364			
CHEDULE C (FEC Form 3) DANS		Use separate schedule for each category of th Detailed Summary Pag	(check only one)
ME OF COMMITTEE (In Full)		Transac	tion ID : SC/10.4249
LOAN SOURCE Full Name (Last, Firs MICHAEL JOHN DREIKORN		[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 5697 Bay Point Road			Other (specify) ▼ Special-Primary
City	State ZIP C		
BOKEELIA	FL 33922	2	
Original Amount of Loan 5.00	Cumulative Payment T	To Date Bala	nce Outstanding at Close of This Pe
<u> </u>			
Date Incurred	Date Due	e Interest Rate	Secured:
M02 ^M / D08 ^D / Y Ž014 ^Y	M10 M / D31 / Y	0.00 Č00 Š	₩ (apr) × Yes
List All Endorsers or Guarantors (if a			
1. Full Name (Last, First, Middle Initia	l)	Name of Employer	
Mailing Address		Occupation	
City Sta	ate ZIP Code	Amount Guaranteed Outstanding:	л
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City Sta	te ZIP Code	Amount Guaranteed Outstanding:	7 7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City Sta	te ZIP Code	Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City Sta	te ZIP Code	Amount Guaranteed Outstanding:	
JBTOTALS This Period This Page (optic	onal)	······ ►	5.00
OTALS This Period (last page in this line arry outstanding balance only to LINE 3			

Image# 14970779365	
SCHEDULE C (FEC Form 3) LOANS	Use separate schedule(s) FOR LINE NUMBER: for each category of the Check only one) Detailed Summary Page X
NAME OF COMMITTEE (In Full) DREIKORN FOR CONGRESS	Transaction ID : SC/10.4234
LOAN SOURCE Full Name (Last, First, Middle Initial) MICHAEL JOHN DREIKORN	[PERSONAL FUNDS] Election: 2014 Primary General
Mailing Address 5697 Bay Point Road	Other (specify) ▼ Special-Primary
City State ZIP Co	de
BOKEELIA FL 33922	
Original Amount of Loan Cumulative Payment To	Date Balance Outstanding at Close of This Period
TERMS Date Incurred Date Due M 02 / D 10 / Y 2014 09 / 01 / Y	Interest Rate Secured: 0011 Y 0.00 % (apr) Yes 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:
SUBTOTALS This Period This Page (optional) TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If	

age# 14970779366						
HEDULE C (FEC For ANS	m 3)			Use separate sched for each category o Detailed Summary F	f the	PAGE 17 OF FOR LINE NUMBER: (check only one) X 1 1 1 1
ME OF COMMITTEE (In Full) REIKORN FOR CONGI	RESS			Trans	action II	D : SC/10.4231
LOAN SOURCE Full Name (La MICHAEL JOHN DREI		ddle Initial)		[PERSONAL FUNDS]		tion: 2014 Primary General
Mailing Address 5697 Bay Point Road						Other (specify) ▼ ecial-Primary
City			ZIP Code	•		
BOKEELIA		FL	33922			
Original Amount of Loan	6.77	Cumulative Payn	ment To D	ate B	alance O	Outstanding at Close of This P 6.77
	0.77	9	9	0.00		
Date Incurred		Da	ate Due	Interest R	ate	Secured:
	o1Ă Y	^M 09 ^M [/] ^D 01 ^D	/ Y Y	011 ^Y	.00	% (apr)
List All Endorsers or Guarante		o Loan Source				
1. Full Name (Last, First, Mido	lle Initial)		1	Name of Employer		
Mailing Address			(Dccupation		
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	9	
2. Full Name (Last, First, Middl	e Initial)		1	Name of Employer		
Mailing Address			(Dccupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:		
3. Full Name (Last, First, Middl	e Initial)		1	Name of Employer		
Mailing Address			(Occupation		
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	9	
4. Full Name (Last, First, Middl	e Initial)		1	Name of Employer		
Mailing Address			(Occupation		
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	7	
JBTOTALS This Period This Pa	ge (optional).		I	······		6.77
DTALS This Period (last page in		-				o appropriate line of Summa

Image# 14970779367				
SCHEDULE C (FEC	C Form 3)		Use separate schedul for each category of Detailed Summary Pa	the (check only one) X 13a
NAME OF COMMITTEE (IN I DREIKORN FOR CO	,		Transa	ction ID : SC/10.4237
LOAN SOURCE Full Na MICHAEL JOHN [•	Idle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 5697 Bay Point Road				Other (specify) ▼ Special-Primary
City		State ZIP	Code	
BOKEELIA		FL 339	22	
Original Amount of Loan	n 330.72	Cumulative Payment	To Date Bal	ance Outstanding at Close of This Period 330.72
TERMS Date Incu		Date D		te Secured:
M 02 / D 11 /		M09 / D01 /	Y 0011 0.0	
List All Endorsers or G		b Loan Source		
1. Full Name (Last, Firs	t, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	y
2. Full Name (Last, First	, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	y
3. Full Name (Last, First	, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	y
4. Full Name (Last, First	, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	y 1 y 1 x 1
SUBTOTALS This Period T	bage in this line only)	······	330.72
Carry outstanding balance	only to LINE 3, Sch	edule D, for this line.	. It no Schedule D, carry for	ward to appropriate line of Summary.

age# 14970779368			
HEDULE C (FEC Form 3) ANS		Use separate schedule for each category of th Detailed Summary Pag	^{ne} (check only one) X 13
ME OF COMMITTEE (In Full) REIKORN FOR CONGRESS		Transac	tion ID : SC/10.4227
LOAN SOURCE Full Name (Last, First, MICHAEL JOHN DREIKORN	Middle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 5697 Bay Point Road			Other (specify) ▼ Special-Primary
City	State ZIP Co		
BOKEELIA	FL 33922		
Original Amount of Loan	Cumulative Payment To		nce Outstanding at Close of This Po
24.06		0.00	24.06
TERMS Date Incurred	Date Due	e Interest Rate	Secured:
^M 02 ^M / ^D 12 ^D / ^Y Ž014 ^Y	M09 M / D01 D / Y	0.00	₩ (apr) × Yes
List All Endorsers or Guarantors (if an	y) to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	e ZIP Code	Amount Guaranteed Outstanding:	y y
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	e ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · ·
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	e ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	e ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 7 1
JBTOTALS This Period This Page (option	al)	······	24.06
OTALS This Period (last page in this line	only)	······ ·	

age# 14970779369			
HEDULE C (FEC Form 3) ANS)	Use separate schedule for each category of th Detailed Summary Pag	(check only one)
ME OF COMMITTEE (In Full) REIKORN FOR CONGRESS	6	Transac	tion ID : SC/10.4239
LOAN SOURCE Full Name (Last, Fin MICHAEL JOHN DREIKOR	, ,	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 5697 Bay Point Road			X Other (specify) ▼ Special-Primary
City	State ZIP C		
BOKEELIA	FL 33922	2	
Original Amount of Loan	Cumulative Payment T		nce Outstanding at Close of This Pe
16.00		0.00	16.00
TERMS Date Incurred	Date Due	e Interest Rate	Secured:
^M 02 ^M / ^D 18 ^D / ^Y Ž014 ^Y		0.00	₩ (apr) × Yes
List All Endorsers or Guarantors (if			
1. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
City St	tate ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initia	l)	Name of Employer	
Mailing Address		Occupation	
City St	ate ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 1 7 1
3. Full Name (Last, First, Middle Initia	l)	Name of Employer	
Mailing Address		Occupation	
City St	tate ZIP Code	Amount Guaranteed Outstanding:	y
4. Full Name (Last, First, Middle Initia	l)	Name of Employer	
Mailing Address		Occupation	
City St	ate ZIP Code	Amount Guaranteed Outstanding:	9 1 1 9 1 1 1 1
JBTOTALS This Period This Page (opt	ional)	······· ►	16.00
OTALS This Period (last page in this lir arry outstanding balance only to LINE			

age# 14970779370		·	I
HEDULE C (FEC Form 3) DANS		Use separate schedule for each category of th Detailed Summary Pag	(check only one)
ME OF COMMITTEE (In Full)	5	Transac	tion ID : SC/10.4242
LOAN SOURCE Full Name (Last, Firs MICHAEL JOHN DREIKOR)	,	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 5697 Bay Point Road			X Other (specify) ▼ Special-Primary
City	State ZIP C		
BOKEELIA	FL 33922	2	
Original Amount of Loan 19.00	Cumulative Payment 1	To Date Balar 0.00	nce Outstanding at Close of This Po
19.00		0.00	19.00
Date Incurred	Date Du	e Interest Rate	Secured:
^M 02 ^M / ^D 20 ^D / ^Y 2014 ^Y	M09 M / D01 D / Y	0.00 0011 V	₩ (apr) × Yes
List All Endorsers or Guarantors (if a			
1. Full Name (Last, First, Middle Initia	al)	Name of Employer	
Mailing Address		Occupation	
City Sta	ate ZIP Code	Amount Guaranteed Outstanding:	y
2. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City Sta	ate ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·
3. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City Sta	ate ZIP Code	Amount Guaranteed Outstanding:	y
4. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City Sta	ate ZIP Code	Amount Guaranteed Outstanding:	
IBTOTALS This Period This Page (opti	onal)	· · · · ·	19.00
OTALS This Period (last page in this lin arry outstanding balance only to LINE			

age# 14970779371			-				
HEDULE C (FEC Fo	orm 3)			Use separate sc for each categor Detailed Summa	y of the	FOR LINE NUMBER: (check only one)	_
ME OF COMMITTEE (In Full)	BRESS			Tr	ansaction	ID : SC/10.4250	
LOAN SOURCE Full Name (MICHAEL JOHN DRE		ddle Initial)		[PERSONAL FUN	DSJ Ele	ection: 2014 Primary General	
Mailing Address 5697 Bay Point Road						Other (specify) ▼ Other Primary	
City		State	ZIP Code				
BOKEELIA		FL	33922				
Original Amount of Loan		Cumulative Pay	yment To Da	te	Balance	Outstanding at Close of This	s Pe
2	3000.00			0.00		3000.0	00
TERMS Date Incurred		Da	ate Due	Interes	at Rate	Secured:	
M 02 ^M / D 21 ^D / Y	2014 ^Y	^M 12 ^M / ^D 01 ^D	Ý Ý ŎC	00 [°] [°]	0.00	% (apr)	X
List All Endorsers or Guarar		o Loan Source					
1. Full Name (Last, First, Mic	ddle Initial)		N	ame of Employer			
Mailing Address			0	ccupation			
City	State	ZIP Code	G	mount uaranteed utstanding:		· · · · · · · ·	
2. Full Name (Last, First, Mid	dle Initial)		N	ame of Employer			
Mailing Address			0	ccupation			
City	State	ZIP Code	G	mount uaranteed utstanding:	- 7	· · · · · · · · ·	
3. Full Name (Last, First, Mid	dle Initial)		N	ame of Employer			
Mailing Address			0	ccupation			
City	State	ZIP Code	G	mount uaranteed utstanding:	7		
4. Full Name (Last, First, Mid	dle Initial)		N	ame of Employer			
Mailing Address			0	ccupation			
City	State	ZIP Code	G	mount uaranteed utstanding:	7	· · · · · · ·	
JBTOTALS This Period This P	age (optional).			•		3000.0	00
OTALS This Period (last page i arry outstanding balance only		-			y forward	to appropriate line of Sum	ma

age# 14970779372			
HEDULE C (FEC Form 3) ANS		Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 23 OF 35 FOR LINE NUMBER: (check only one) X 13a 13b
ME OF COMMITTEE (In Full) REIKORN FOR CONGRESS		Transaction	n ID : SC/10.4230
LOAN SOURCE Full Name (Last, First, M MICHAEL JOHN DREIKORN	Middle Initial)	[PERSONAL FUNDS]	lection: 2014 Primary General
Mailing Address 5697 Bay Point Road			X Other (specify) ▼ Special-Primary
City	State ZIP Cod	de	
BOKEELIA	FL 33922		
Original Amount of Loan 4.02	Cumulative Payment To	Date Balance	• Outstanding at Close of This Perio 4.02
TERMS Date Incurred	Date Due	Interest Rate	Secured:
	M09 M / D01 D / Y	0.00 V 0.00	₩ (apr) Yes X
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:	y 1 (m. 1
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:	· · · · · · · ·
JBTOTALS This Period This Page (optiona DTALS This Period (last page in this line o			4.02

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SCHEDULE C (FE LOANS	C Form 3)			Use separate schedule for each category of th Detailed Summary Pag	10 (check only one) X 13a
NAME OF COMMITTEE (Ir DREIKORN FOR C	,			Transac	tion ID : SC/10.4251
LOAN SOURCE Full MICHAEL JOHN	•	Idle Initial)		[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 5697 Bay Point Road					X Other (specify) ▼ Special-Primary
City		State Z	ZIP Code	e	
BOKEELIA		FL	33922		
Original Amount of Lo	an 3000.00	Cumulative Paym	nent To D	Date Bala	nce Outstanding at Close of This Period 3000.00
TERMS					
Date In		Dat 12 ^M / ^D 01 ^D	e Due	Interest Rate	
List All Endorsers or		o Loan Source			
1. Full Name (Last, Fi	rst, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y
2. Full Name (Last, Fir	st, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
3. Full Name (Last, Fir	st, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
4. Full Name (Last, Fir	st, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	9 1 9 1 4
SUBTOTALS This Period	page in this line only	ʻ)			3000.00
Carry outstanding balance	e only to LINE 3, Sch	edule D, for this I	ine. If no	o Schedule D, carry forw	vard to appropriate line of Summary.

age# 14970779374								
HEDULE C (FEC ANS	Form 3)			Use separate schedul for each category of t Detailed Summary Pa	he (c	PAGE 25 DR LINE NUMBER heck only one)	-	35 13a 13b
ME OF COMMITTEE (In FI		Transa	ction ID : 3	SC/10.4238				
LOAN SOURCE Full Nam MICHAEL JOHN D		Idle Initial)		[PERSONAL FUNDS]	Prir	n: 2014 mary neral		
Mailing Address 5697 Bay Point Road					X Oth	ner (specify) v al-Primary		
City		State	ZIP Code	e				
BOKEELIA		FL	33922					
Original Amount of Loan		Cumulative Pay	vment To D		ance Outs	tanding at Close o		
	8.00			0.00	9		8.00)
TERMS Date Incur M02 / 27 /		D 09 / 01 0	ate Due	Interest Rat)	Secu % (apr)	ured: Ves	K N
List All Endorsers or Gu		o Loan Source						
1. Full Name (Last, First,	Middle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	7			
2. Full Name (Last, First,	Middle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	7			
3. Full Name (Last, First,	Middle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	7			
4. Full Name (Last, First,	Middle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	9			
JBTOTALS This Period Th				Ľ			8.00)
DTALS This Period (last pa arry outstanding balance of					ward to a	appropriate line of	f Sum	

age# 14970779375							
HEDULE C (FEC F ANS	⁻ orm 3)			Use separate schedu for each category of Detailed Summary Pa	the	PAGE 26 FOR LINE NUMBER: (check only one)	OF
ME OF COMMITTEE (In Full)		Transa	ction ID) : SC/10.4241			
LOAN SOURCE Full Name MICHAEL JOHN DR		Idle Initial)		[PERSONAL FUNDS]	F	ion: 2014 Primary General	
Mailing Address 5697 Bay Point Road						Other (specify) ▼ cial-Primary	
City		State	ZIP Code	e			
BOKEELIA		FL	33922				
Original Amount of Loan		Cumulative Pay	yment To D	Date Bal	ance O	utstanding at Close of	This Pe
<u> </u>	32.00		7	0.00		9 9	32.00
Date Incurred M 02 ^M		C 09 / 01 0	Date Due	Interest Rat 0011 Y 0.0		Secur % (apr)	red: /es
List All Endorsers or Guar		o Loan Source					
1. Full Name (Last, First, N	/liddle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	9		
2. Full Name (Last, First, M	iddle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	9		
3. Full Name (Last, First, M	iddle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	9		
4. Full Name (Last, First, M	iddle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	- 7		
JBTOTALS This Period This						<u>7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 </u>	32.00
DTALS This Period (last page arry outstanding balance on	-				ward to	o appropriate line of	Summ

CHEDULE C (FEC Form 3) OANS AME OF COMMITTEE (In Full) DREIKORN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) MICHAEL JOHN DREIKORN Mailing Address 5697 Bay Point Road City State ZIP C BOKEELIA FL 33922	Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER: (check only one) X Transaction ID : SC/10.4252 [PERSONAL FUNDS] Election: 2014 Primary General Vother (specify) Other (specify) V
DREIKORN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) MICHAEL JOHN DREIKORN Mailing Address 5697 Bay Point Road City State ZIP C	[PERSONAL FUNDS] Election: 2014 Primary General
MICHAEL JOHN DREIKORN Mailing Address 5697 Bay Point Road City State ZIP C	Primary General
5697 Bay Point Road City State	
- ,	Special-Primary
BUKEELIA FL 33922	
Original Amount of Loan Cumulative Payment T 280.00	To Date Balance Outstanding at Close of This F 0.00 280.00
TERMS Date Incurred Date Due	le Interest Rate Secured:
Date Incurred Date Dute M_{03}^{M} / D_{07}^{D} / Y_{2014}^{Y} M_{12}^{M} / D_{01}^{D} / Y_{2014}^{Y}	Y OOO6 Y O.00 % (apr) Yes
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:
JBTOTALS This Period This Page (optional) DTALS This Period (last page in this line only)	

age# 14970779377				
HEDULE C (FEC Form 3 ANS	3)		Use separate schedu for each category of Detailed Summary Pa	the (check only one) X 13
ME OF COMMITTEE (In Full)	SS	Transa	action ID : SC/10.4225	
LOAN SOURCE Full Name (Last, F MICHAEL JOHN DREIKOR		al)	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 5697 Bay Point Road				Other (specify) ▼ Special-Primary
City	State	ZIP Co	ode	
BOKEELIA	FL	33922		
Original Amount of Loan		lative Payment To		lance Outstanding at Close of This Po
130.	37	9	0.00	130.37
TERMS Date Incurred		Date Due	Interest Rat	te Secured:
M 03 ^M / D 14 ^D / Y Ž014	Y 09 M	/ D01 D / Y	Ŏ011 ^Ŷ 0.0	00 % (apr) Ves
List All Endorsers or Guarantors (Source		
1. Full Name (Last, First, Middle In	itial)		Name of Employer	
Mailing Address			Occupation	
City	State ZIP C	Code	Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1
2. Full Name (Last, First, Middle Init	ial)		Name of Employer	
Mailing Address			Occupation	
City	State ZIP C	Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Init	ial)		Name of Employer	
Mailing Address			Occupation	
City	State ZIP (Code	Amount Guaranteed Outstanding:	-y
4. Full Name (Last, First, Middle Init	tial)		Name of Employer	
Mailing Address			Occupation	
City	State ZIP (Code	Amount Guaranteed Outstanding:	- y
JBTOTALS This Period This Page (o	ptional)		······ >	130.37
OTALS This Period (last page in this arry outstanding balance only to LIN				

age# 14970779378			
HEDULE C (FEC Form 3 ANS		Use separate schedule for each category of th Detailed Summary Pag	(check only one)
ME OF COMMITTEE (In Full) REIKORN FOR CONGRES	S	Transact	tion ID : SC/10.4240
LOAN SOURCE Full Name (Last, Fi MICHAEL JOHN DREIKOR	· · ·	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 5697 Bay Point Road			Other (specify) ▼ Special-Primary
City		Code	
BOKEELIA	FL 3392	22	
Original Amount of Loan	Cumulative Payment		nce Outstanding at Close of This Po
6.3		0.00	6.36
TERMS Date Incurred	Date Du	ue Interest Rate	Secured:
M03 ^M / D15 ^D / Y Ž014	Y M09 M / D01 D /	Y Ŏ011 Y O.00	₩ (apr) × Yes
List All Endorsers or Guarantors (if			100
1. Full Name (Last, First, Middle Init	ial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · ·
2. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
City S	State ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · ·
3. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	y
4. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
City S	State ZIP Code	Amount Guaranteed Outstanding:	
JBTOTALS This Period This Page (op	tional)	······································	6.36
OTALS This Period (last page in this I arry outstanding balance only to LINE			

age# 14970779379						
HEDULE C (FEC Form ANS	3)			Use separate schedu for each category of Detailed Summary Pa	the	PAGE 30 OF 35 FOR LINE NUMBER: (check only one) X 13a
ME OF COMMITTEE (In Full) REIKORN FOR CONGRE			Transa	action I	D : SC/10.4224	
LOAN SOURCE Full Name (Last, MICHAEL JOHN DREIKC		ddle Initial)		[PERSONAL FUNDS]	Elec	ction: 2014 Primary General
Mailing Address 5697 Bay Point Road						Other (specify) ▼ pecial-Primary
City		State	ZIP Coo	le		
BOKEELIA		FL	33922			
Original Amount of Loan		Cumulative	Payment To	Date Ba	lance (Dutstanding at Close of This Peri
13	0.37			0.00		130.37
TERMS Date Incurred	Y	M09 / D(Date Due	Interest Ra 0011 Y 0.0		Secured:
List All Endorsers or Guarantors	(if any) t	o Loan Sour	rce			Yes N
1. Full Name (Last, First, Middle	Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	y
2. Full Name (Last, First, Middle Ir	nitial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	· · · · · · · · ·
3. Full Name (Last, First, Middle In	nitial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	
4. Full Name (Last, First, Middle In	nitial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	
JBTOTALS This Period This Page ((optional)			······ [, 130.37
OTALS This Period (last page in thi					rward 1	to appropriate line of Summary

ge# 14970779380				
HEDULE C (FEC Form ANS	3)		Use separate schedule for each category of t Detailed Summary Pag	he (check only one) X 13
ME OF COMMITTEE (In Full) REIKORN FOR CONGRE	SS		Transac	ction ID : SC/10.4233
LOAN SOURCE Full Name (Last, MICHAEL JOHN DREIKC		1)	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 5697 Bay Point Road				X Other (specify) ▼ Special-Primary
City	State	ZIP Cod	e	
BOKEELIA	FL	33922		
Original Amount of Loan	Cumula	tive Payment To I	Date Bala	ance Outstanding at Close of This Po
2	9.27		0.00	29.27
TERMS Date Incurred		Date Due	Interest Rate	e Secured:
M ₀₃ M / D ₂₀ D / Y Ž01Ž	Y M09 M /	D 01 D / Y	0.00	9 % (apr) □Yes ⊠
List All Endorsers or Guarantors				
1. Full Name (Last, First, Middle	initial)		Name of Employer	
Mailing Address			Occupation	
City	State ZIP Co	ode	Amount Guaranteed Outstanding:	y y
2. Full Name (Last, First, Middle Ir	nitial)		Name of Employer	
Mailing Address			Occupation	
City	State ZIP Co	ode	Amount Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·
3. Full Name (Last, First, Middle Ir	nitial)		Name of Employer	
Mailing Address			Occupation	
City	State ZIP Co	ode	Amount Guaranteed Outstanding:	y
4. Full Name (Last, First, Middle Ir	nitial)		Name of Employer	
Mailing Address			Occupation	
City	State ZIP Co		Amount Guaranteed Outstanding:	y y
JBTOTALS This Period This Page (optional)		······ ►	29.27
TALS This Period (last page in this	s line only)			· · · · · · · · · ·

ge# 14970779381			
HEDULE C (FEC Form 3) ANS		Use separate schedule for each category of th Detailed Summary Pag	(check only one)
ME OF COMMITTEE (In Full) REIKORN FOR CONGRESS	6	Transac	tion ID : SC/10.4243
LOAN SOURCE Full Name (Last, Fire MICHAEL JOHN DREIKORI	,	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 5697 Bay Point Road			X Other (specify) ▼ Special-Primary
City	State ZIP 0	Code	
BOKEELIA	FL 3392	22	
Original Amount of Loan	Cumulative Payment	To Date Bala	nce Outstanding at Close of This Pe
19.00)	0.00	19.00
TERMS Date Incurred	Date Du	ie Interest Rate	Secured:
M 03 ^M / D 20 ^D / Y 2014 Y	M09 M / D01 /	^Y 0011 ^Y 0.00	₩ (apr) Hes
List All Endorsers or Guarantors (if			
1. Full Name (Last, First, Middle Initia	al)	Name of Employer	
Mailing Address		Occupation	
City St	ate ZIP Code	Amount Guaranteed Outstanding:	y y
2. Full Name (Last, First, Middle Initia	I)	Name of Employer	
Mailing Address		Occupation	
City St	ate ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · ·
3. Full Name (Last, First, Middle Initia	1)	Name of Employer	
Mailing Address		Occupation	
City St	ate ZIP Code	Amount Guaranteed Outstanding:	y
4. Full Name (Last, First, Middle Initia	1)	Name of Employer	
Mailing Address		Occupation	
City St	ate ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 7 1
JBTOTALS This Period This Page (opt	ional)	· · · · · ·	19.00
TALS This Period (last page in this lir	ne only)	······ [· · · · · · · · · · · · ·

age# 14970779382						
HEDULE C (FEC For ANS	m 3)			Use separate schedu for each category of Detailed Summary Pa	the	PAGE 33 OF 35 FOR LINE NUMBER: (check only one) X 13a 13b
ME OF COMMITTEE (In Full)			Transa	action I	D : SC/10.4257	
LOAN SOURCE Full Name (La MICHAEL JOHN DREI		ddle Initial)		[PERSONAL FUNDS]	Elec	ction: 2014 Primary General
Mailing Address 5697 Bay Point Road						Other (specify) ▼ ecial-Primary
City		State	ZIP Cod	e		
BOKEELIA		FL	33922			
Original Amount of Loan		Cumulative	Payment To [Date Ba	llance C	Dutstanding at Close of This Peri
<u> </u>	2000.00		7 7	905.00		1095.00
Date Incurred M03 / 20 / Y 20	p14 Y	^M 12 ^M / ^D 0	Date Due	Interest Ra		Secured: % (apr) Yes N
List All Endorsers or Guarante		o Loan Sour	се			
1. Full Name (Last, First, Mido	lle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	
2. Full Name (Last, First, Middl	e Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	· · · · · · · · ·
3. Full Name (Last, First, Middl	e Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	
4. Full Name (Last, First, Middl	e Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	
JBTOTALS This Period This Pa	ge (optional).			······ •		1095.00
OTALS This Period (last page in					rward 1	to appropriate line of Summary

age# 14970779383							
HEDULE C (FEC F ANS	orm 3)			Use separate schedul for each category of t Detailed Summary Pa	the (check only one) X 13a		
ME OF COMMITTEE (In Full) REIKORN FOR CON	GRESS			Transaction ID : SC/10.4229			
LOAN SOURCE Full Name MICHAEL JOHN DRI		Idle Initial)		[PERSONAL FUNDS]	Election: 2014 Primary General		
Mailing Address 5697 Bay Point Road					X Other (specify) ▼ Special-Primary		
City		State	ZIP Code	e			
BOKEELIA		FL	33922				
Original Amount of Loan		Cumulative Pa	iyment To D	Date Bala	ance Outstanding at Close of This Peri		
	131.43			0.00	131.43		
TERMS Date Incurred		09 ^M / 01 ^D	Date Due	Interest Rat			
List All Endorsers or Guara	antors (if anv) t	o Loan Source			Yes N		
1. Full Name (Last, First, M				Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1		
2. Full Name (Last, First, Mi	ddle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1		
3. Full Name (Last, First, Mie	ddle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y		
4. Full Name (Last, First, Mie	ddle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	g 1 1 g 1 1 m 1		
JBTOTALS This Period This I				Ľ	131.43		
OTALS This Period (last page					ward to appropriate line of Summar		

HEDULE C (FEC Form 3 ANS)	Use separate schedule(s for each category of the Detailed Summary Page	(check only one) X 13a		
ME OF COMMITTEE (In Full) REIKORN FOR CONGRES	S	Transaction ID : SC/10.4223			
LOAN SOURCE Full Name (Last, Fin MICHAEL JOHN DREIKOR	. ,	[PERSONAL FUNDS]	Election: 2014 Primary General		
Mailing Address 5697 Bay Point Road			Other (specify) ▼ Special-Primary		
City BOKEELIA	State ZIP C FL 33922				
Original Amount of Loan	Cumulative Payment T		ce Outstanding at Close of This Peri		
133.5	5	70.80	62.75		
Date Incurred M04 / O2 / Y 2014	Date Due 09 M / D01 D / Y		Secured:		
List All Endorsers or Guarantors (if					
1. Full Name (Last, First, Middle Init	ial)	Name of Employer			
Mailing Address		Occupation			
City S	tate ZIP Code	Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1		
2. Full Name (Last, First, Middle Initia	al)	Name of Employer			
Mailing Address		Occupation			
City S	tate ZIP Code	Amount Guaranteed Outstanding:	y		
3. Full Name (Last, First, Middle Initia	al)	Name of Employer			
Mailing Address		Occupation			
City S	tate ZIP Code	Amount Guaranteed Outstanding:	y		
4. Full Name (Last, First, Middle Initia	al)	Name of Employer			
Mailing Address		Occupation			
City S	tate ZIP Code	Amount Guaranteed Outstanding:	9 9 9 9 9 9		
JBTOTALS This Period This Page (op DTALS This Period (last page in this li			62.75 9663.37		