

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
VAUGHN FOR CONGRESS

ADDRESS (number and street) 2465 CENTREVILLE RD #J17-729
 Check if different than previously reported. (ACC)
HERNDON VA 20171

2. **FEC IDENTIFICATION NUMBER** C00492702
CITY **STATE** **ZIP CODE**
VA 11
3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on _____ in the State of _____
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 04 01 2011 through 06 30 2011

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 Ciindy P. Kinney

Signature of Treasurer Electronically Filed by Ciindy P. Kinney Date 07 14 2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

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Write or Type Committee Name

VAUGHN FOR CONGRESS

Report Covering the Period:

From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	1

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	1663.86	30654.10
(b) Total Contribution Refunds (from Line 20(d)).....	100.00	100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	1563.86	30554.10
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	25708.90	36317.99
(b) Total Offsets to Operating Expenditures (from Line 14).....	600.00	800.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	25108.90	35517.99
8. Cash on Hand at Close of Reporting Period (from Line 27).....	75036.11	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	80000.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
VAUGHN FOR CONGRESS

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	0.00	7700.00
(i) Itemized (use Schedule A).....	1663.86	2954.10
(ii) Unitemized.....	1663.86	10654.10
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACS).....	0.00	20000.00
(d) The Candidate.....	1663.86	30654.10
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	80000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	80000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	600.00	800.00
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)..... ▶	2263.86	111454.10

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	25708.90	36317.99
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	100.00	100.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	100.00	100.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	25808.90	36417.99

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	98581.15
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	2263.86
25. SUBTOTAL (add Line 23 and Line 24).....	100845.01
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	25808.90
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	75036.11

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5 / 15
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input checked="" type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
VAUGHN FOR CONGRESS

A.

Full Name (Last, First, Middle Initial) Luke R. Whitis		Date of Receipt
Mailing Address 5997 Upland Meadow Ct		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2011"/>
City	State	Zip Code
Gainesville	VA	20155
FEC ID number of contributing federal political committee.		Transaction ID: SA14.4355
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="600.00"/>
Occupation		sound system, set up, vid- eography services
Receipt For: 2012	Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary		<input type="text" value="600.00"/>
<input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="600.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="600.00"/>

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
VAUGHN FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Color Service Printing and Grpahics, Inc.

Transaction ID: SB17.4329

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	1	1

Mailing Address 2927 Gallows Rd

Amount of Each Disbursement this Period

602.90

City Falls Church State VA Zip Code 22042

Purpose of Disbursement
printing

004
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Color Service Printing and Grpahics, Inc.

Transaction ID: SB17.4331

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	1	1

Mailing Address 2927 Gallows Rd

Amount of Each Disbursement this Period

602.90

City Falls Church State VA Zip Code 22042

Purpose of Disbursement
printing

004
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Color Service Printing and Grpahics, Inc.

Transaction ID: SB17.4333

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	1	1

Mailing Address 2927 Gallows Rd

Amount of Each Disbursement this Period

36.75

City Falls Church State VA Zip Code 22042

Purpose of Disbursement
printing

004
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

1242.55

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
VAUGHN FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Color Service Printing and Grpahics, Inc.

Transaction ID: SB17.4334

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	1	1

Mailing Address 2927 Gallows Rd

Amount of Each Disbursement this Period

36.75

City Falls Church State VA Zip Code 22042

Purpose of Disbursement
printing

004
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Facebook.com

Transaction ID: SB17.4336

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	1	1

Mailing Address 1601 S California Ave

Amount of Each Disbursement this Period

250.00

City Palo Alto State CA Zip Code 94304

Purpose of Disbursement
social media

004
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Facebook.com

Transaction ID: SB17.4338

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	1	1

Mailing Address 1601 S California Ave

Amount of Each Disbursement this Period

108.39

City Palo Alto State CA Zip Code 94304

Purpose of Disbursement
social media

004
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

395.14

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
VAUGHN FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Fairfax County Park Authority <hr/> Mailing Address 12055 Government Ctr. Pkwy Suite 927 <hr/> City Fairfax State VA Zip Code 22035 <hr/> Purpose of Disbursement shelter permit Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4339 Date of Disbursement 06 / 01 / 2011 <hr/> Amount of Each Disbursement this Period 350.00
B.	Full Name (Last, First, Middle Initial) Fairfax County Park Authority <hr/> Mailing Address 12055 Government Ctr. Pkwy Suite 927 <hr/> City Fairfax State VA Zip Code 22035 <hr/> Purpose of Disbursement fundraising permit Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4342 Date of Disbursement 06 / 01 / 2011 <hr/> Amount of Each Disbursement this Period 50.00
C.	Full Name (Last, First, Middle Initial) JML Strategies <hr/> Mailing Address <hr/> City Washington State DC Zip Code <hr/> Purpose of Disbursement consultant Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4242 Date of Disbursement 05 / 30 / 2011 <hr/> Amount of Each Disbursement this Period 500.00

SUBTOTAL of Disbursements This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
VAUGHN FOR CONGRESS

<p>A.</p> <p>Full Name (Last, First, Middle Initial) JML Strategies</p> <p>Mailing Address</p> <p>City: Washington State: DC Zip Code</p> <p>Purpose of Disbursement: signage and banners</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.4350</p> <p>Date of Disbursement: 06 / 26 / 2011</p> <p>Amount of Each Disbursement this Period: 907.50</p> <p>Category/Type: 004</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) JML Strategies</p> <p>Mailing Address</p> <p>City: Washington State: DC Zip Code</p> <p>Purpose of Disbursement: consultant</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.4351</p> <p>Date of Disbursement: 06 / 26 / 2011</p> <p>Amount of Each Disbursement this Period: 500.00</p> <p>Category/Type: 001</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Nicholas O'Boyle</p> <p>Mailing Address: 5810 Heming Ave</p> <p>City: Springfield State: VA Zip Code: 22151</p> <p>Purpose of Disbursement: consultant</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.4240</p> <p>Date of Disbursement: 05 / 30 / 2011</p> <p>Amount of Each Disbursement this Period: 1600.00</p> <p>Category/Type: 001</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3007.50

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

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

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
VAUGHN FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Nicholas O'Boyle Mailing Address 5810 Heming Ave City Springfield State VA Zip Code 22151 Purpose of Disbursement consultant Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17.4354 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 1 1	Amount of Each Disbursement this Period 1500.00
B.	Full Name (Last, First, Middle Initial) Political Media Inc Mailing Address 406 First Street, SE City Washington State DC Zip Code 20003 Purpose of Disbursement website development Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17.4229 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 1 1	Amount of Each Disbursement this Period 349.00
C.	Full Name (Last, First, Middle Initial) Political Media Inc Mailing Address 406 First Street, SE City Washington State DC Zip Code 20003 Purpose of Disbursement postcards Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17.4237 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 1 1	Amount of Each Disbursement this Period 408.20

SUBTOTAL of Disbursements This Page (optional) ▶

2257.20

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 11 / 15

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
VAUGHN FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Joshua Pratt <hr/> Mailing Address 168 Russell Springs Dr. <hr/> City Lynchburg State VA Zip Code 24501 <hr/> Purpose of Disbursement campaign manager Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4214 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 3000.00
B.	Full Name (Last, First, Middle Initial) Joshua Pratt <hr/> Mailing Address 168 Russell Springs Dr. <hr/> City Lynchburg State VA Zip Code 24501 <hr/> Purpose of Disbursement campaign manager Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4228 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 7500.00
C.	Full Name (Last, First, Middle Initial) Joshua Pratt <hr/> Mailing Address 168 Russell Springs Dr. <hr/> City Lynchburg State VA Zip Code 24501 <hr/> Purpose of Disbursement reimburse dinner expenses Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4236 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 3 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 248.00

SUBTOTAL of Disbursements This Page (optional) ▶

10748.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 15

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
VAUGHN FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Joshua Pratt

Transaction ID: SB17.4238
Date of Disbursement

Mailing Address 168 Russell Springs Dr.

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	1	1

City Lynchburg State VA Zip Code 24501

Amount of Each Disbursement this Period

Purpose of Disbursement
campaign manager

001
Category/ Type

2500.00

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
Prince William County

Transaction ID: SB17.4343
Date of Disbursement

Mailing Address

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	1	1

City Prince William State VA Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement
Chamber of commerce Membership

001
Category/ Type

310.00

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

C.

Full Name (Last, First, Middle Initial)
Prince William County

Transaction ID: SB17.4346
Date of Disbursement

Mailing Address

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

City Prince William State VA Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement
Chamber of Commerce Reception

001
Category/ Type

55.00

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)

2865.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
VAUGHN FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Reagan Institute</p> <p>Mailing Address</p> <p>City Washington State DC Zip Code</p> <p>Purpose of Disbursement Reagan dinner: candidate, candidate's wife, treasurer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4205</p> <p>Date of Disbursement 04 / 02 / 2011</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Robert Kenyon</p> <p>Mailing Address 4410 Flintstone Rd.</p> <p>City Groveton State VA Zip Code 22306</p> <p>Purpose of Disbursement Fundraiser</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4226</p> <p>Date of Disbursement 05 / 01 / 2011</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>001 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Shirley's Catering Gourmet Gift Baskets</p> <p>Mailing Address 5799 Burke Centre Pkwy</p> <p>City Burke State VA Zip Code 22015</p> <p>Purpose of Disbursement catering for kickoff</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4347</p> <p>Date of Disbursement 06 / 23 / 2011</p> <p>Amount of Each Disbursement this Period 787.50</p> <p>007 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2587.50

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 14 / 15

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
VAUGHN FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Shirley's Catering Gourmet Gift Baskets <hr/> Mailing Address 5799 Burke Centre Pkwy <hr/> City State Zip Code Burke VA 22015 <hr/> Purpose of Disbursement catering for kickoff Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4349 Date of Disbursement 06 / 27 / 2011 <hr/> Amount of Each Disbursement this Period 787.50
B.	Full Name (Last, First, Middle Initial) UPS Store <hr/> Mailing Address 2645 Centreville Rd. #J17-729 <hr/> City State Zip Code Herndon VA 20171 <hr/> Purpose of Disbursement stamps, envelopes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4235 Date of Disbursement 05 / 13 / 2011 <hr/> Amount of Each Disbursement this Period 33.46
C.	Full Name (Last, First, Middle Initial) Vistaprint <hr/> Mailing Address 95 Hayden Ave. <hr/> City State Zip Code Lexington MA 02421 <hr/> Purpose of Disbursement printing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4224 Date of Disbursement 04 / 26 / 2011 <hr/> Amount of Each Disbursement this Period 89.22

SUBTOTAL of Disbursements This Page (optional) ▶

910.18

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

24913.07

SCHEDULE C (FEC Form 3)

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

LOANS

NAME OF COMMITTEE (In Full)
 VAUGHN FOR CONGRESS

Transaction ID: SC/10.4154

LOAN SOURCE Full Name (Last, First, Middle Initial) Kenneth L. Vaughn - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 12906 Pinecrest Rd.	
City Herndon State VA ZIP Code 20171	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
80000.00	0.00	80000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 03 D D 31 Y Y Y Y 2011	02/28/2013	0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional)	80000.00
TOTALS This Period (last page in this line only)	80000.00

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