

# 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.   
**Matt McCall for Congress**

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

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

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  10 / 01 / 2015 through  12 / 31 / 2015

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 Brian Matthew McCall

Signature of Treasurer Brian Matthew McCall [Electronically Filed] Date  02 / 18 / 2016

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

Write or Type Committee Name

**Matt McCall for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	35936.53	83902.53
(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)).....	35936.53	83902.53
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	56458.52	89373.04
(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)).....	56458.52	89373.04
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	10697.22	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	50975.00	

**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

**Matt McCall for Congress**

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	33350.00	77746.00
(ii) Unitemized.....	2586.53	6151.53
(iii) TOTAL of contributions from individuals ▶	35936.53	83897.53
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	5.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	35936.53	83902.53
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	10000.00	14975.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	10000.00	14975.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	1.97	6.19
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	45938.50	98883.72

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	56458.52	89373.04
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	56458.52	89373.04

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	21217.24
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	45938.50
25. SUBTOTAL (add Line 23 and Line 24).....	67155.74
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	56458.52
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	10697.22

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Full Name (Last, First, Middle Initial) <b>Edward Anderson</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 01 / 2015
Mailing Address 829 Terrell Rd.		<b>Transaction ID : SA11AI.5324</b>
City San Antonio	State TX	Zip Code 78209
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer USAF	Occupation Physician	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>Rob Bondurant</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 02 / 2015
Mailing Address 231 Larkwood		<b>Transaction ID : SA11AI.5749</b>
City San Antonio	State TX	Zip Code 78209
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 750.00	
Name of Employer Self-Employed	Occupation Lawyer	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1446.00	

Full Name (Last, First, Middle Initial) <b>Sarah Bosse</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 23 / 2015
Mailing Address P.O. Box 1788		<b>Transaction ID : SA11AI.5356</b>
City Fredericksburg	State TX	Zip Code 78624
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer None	Occupation Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert W Curtis**

Mailing Address 611 Candy Rd

City State Zip Code  
Pipe Creek TX 78063

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

Name of Employer Self Occupation Manufacturer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 03 / 2015

**Transaction ID : SA11AI.5327**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Richard A Estenson**

Mailing Address 17365 FM 2093

City State Zip Code  
Fredericksburg TX 78624

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

Name of Employer Self Occupation Business Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 12 / 2015

**Transaction ID : SA11AI.5752**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Ron Gillet**

Mailing Address 112 Cut Off Rd.

City State Zip Code  
Fredericksburg TX 78624

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

Name of Employer Retired Occupation Retired

Receipt For: 2015  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 08 / 2015

**Transaction ID : SA11AI.5742**

Amount of Each Receipt this Period  
100.00

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ron Gillet</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 02 / 2015
Mailing Address 112 Cut Off Rd.		<b>Transaction ID : SA11AI.5750</b>
City Fredericksburg	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1100.00	

Full Name (Last, First, Middle Initial) <b>B. Ron Gillet</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 01 / 2015
Mailing Address 112 Cut Off Rd.		<b>Transaction ID : SA11AI.5365</b>
City Fredericksburg	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1200.00	

Full Name (Last, First, Middle Initial) <b>C. Ron Gillet</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2015
Mailing Address 112 Cut Off Rd.		<b>Transaction ID : SA11AI.5377</b>
City Fredericksburg	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**H Glenn Huddleston**

Mailing Address 4901 Broadway

City San Antonio State TX Zip Code 78209

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2015

**Transaction ID : SA11AI.5342**

Amount of Each Receipt this Period  
 2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Therese M. Huddleston**

Mailing Address 4901 Broadway

City San Antonio State TX Zip Code 78209

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2015

**Transaction ID : SA11AI.5340**

Amount of Each Receipt this Period  
 2700.00

**C.** Full Name (Last, First, Middle Initial)  
**I-10 Building Materials**

Mailing Address 7193 Heuermann Rd.

City San Antonio State TX Zip Code 78256

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2015

**Transaction ID : SA11AI.5344**

Amount of Each Receipt this Period  
 2500.00

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

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

7900.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Alan Johnson**

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 15 / 2015

**Transaction ID : SA11AI.5508**

Amount of Each Receipt this Period  
 2700.00

In-kind - Printing

**B.** Full Name (Last, First, Middle Initial)  
**Chana J Johnson**

Mailing Address P.O. Box 979

City State Zip Code  
 Ingram TX 78025

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 15 / 2015

**Transaction ID : SA11AI.5507**

Amount of Each Receipt this Period  
 2700.00

In-kind - Printing

**C.** Full Name (Last, First, Middle Initial)  
**Charles Bruce Lee**

Mailing Address 13 La Escalera

City State Zip Code  
 San Antonio TX 78261

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

Name of Employer Occupation  
 QCO Limited Real Estate Development

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 23 / 2015

**Transaction ID : SA11AI.5352**

Amount of Each Receipt this Period  
 500.00

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

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

5900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Craig Leeder**

Mailing Address 7193 Heuermann Rd.

City San Antonio	State TX	Zip Code 78256
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FEC ID number of contributing federal political committee. **C**

Name of Employer I-10 Bldg Materials	Occupation Owner
---	---------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 15 / 2015

**Transaction ID : SA11AI.5345**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Andrew Lewis**

Mailing Address 678 Rosewood Ave.

City Boerne	State TX	Zip Code 78006
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FEC ID number of contributing federal political committee. **C**

Name of Employer McCall International Medical	Occupation Sales
--	---------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1050.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2015

**Transaction ID : SA11AI.5336**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Debbi M McCurdy**

Mailing Address 4088 N State Highway 16

City Fredericksburg	State TX	Zip Code 78624
------------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 12 / 2015

**Transaction ID : SA11AI.5751**

Amount of Each Receipt this Period  
1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bruce McNabb**

Mailing Address 703 Main St.

City State Zip Code  
Comfort TX 78013

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

Name of Employer Occupation  
Airtronics USA CFO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 01 / 2015

**Transaction ID : SA11AI.5322**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**John Meadors**

Mailing Address 301 W. Travis

City State Zip Code  
Fredericksburg TX 78624

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 13 / 2015

**Transaction ID : SA11AI.5755**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**John Meadors**

Mailing Address 301 W. Travis

City State Zip Code  
Fredericksburg TX 78624

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 13 / 2015

**Transaction ID : SA11AI.5757**

Amount of Each Receipt this Period  
1000.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Margaret J Nattinger**

Mailing Address 16159 Old Stable Rd.

City San Antonio	State TX	Zip Code 78247
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
12		27		2015

**Transaction ID : SA11AI.5378**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
**Denis Pantle**

Mailing Address 2739 John Charles Rd.

City Bulverde	State TX	Zip Code 78163
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation Retired
------------------	-----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		07		2015

**Transaction ID : SA11AI.5308**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Mark W Roll**

Mailing Address 88 Granadilla

City Boerne	State TX	Zip Code 78006
----------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
12		05		2015

**Transaction ID : SA11AI.5370**

Amount of Each Receipt this Period  
500.00

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

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

1050.00

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

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

FOR LINE NUMBER: PAGE 13 OF 49  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ralph E Rydell**

Mailing Address 2911 Safe Harbor Dr.

City Tampa State FL Zip Code 33618

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 17 / 2015

**Transaction ID : SA11AI.5337**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Stephen Schoppe**

Mailing Address 14804 Brown Bluff

City Leander State TX Zip Code 78641

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

Name of Employer Process Sciences Inc. Occupation Owner

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : SA11AI.5311**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Rose Scott**

Mailing Address 27 Bristol Green

City San Antonio State TX Zip Code 78209

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

Name of Employer Jackson Walker LLP Occupation Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 10 / 2015

**Transaction ID : SA11AI.5314**

Amount of Each Receipt this Period  
 500.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Angela Smith**

Mailing Address 483 Ranch Rd. 1376

City Fredericksburg	State TX	Zip Code 78624
------------------------	-------------	-------------------

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

Name of Employer Smith Ranch	Occupation Owner
---------------------------------	---------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1050.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 05 / 2015

**Transaction ID : SA11AI.5330**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Mark P Stevenson**

Mailing Address 659 Sandy Oaks Ranch Rd.

City Johnson City	State TX	Zip Code 78636
----------------------	-------------	-------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 21 / 2015

**Transaction ID : SA11AI.5351**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Mark P Stevenson**

Mailing Address 659 Sandy Oaks Ranch Rd.

City Johnson City	State TX	Zip Code 78636
----------------------	-------------	-------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 26 / 2015

**Transaction ID : SA11AI.5379**

Amount of Each Receipt this Period  
500.00

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Maureen Sutherland**

Mailing Address 104 Mosswood

City Boerne State TX Zip Code 78006

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 05 / 2015

**Transaction ID : SA11AI.5368**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Jason Underwood**

Mailing Address 390 Hermann Sons Road

City Comfort State TX Zip Code 78013

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

Name of Employer Occupation  
 Self Investor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2015

**Transaction ID : SA11AI.5333**

Amount of Each Receipt this Period  
 2700.00

**C.** Full Name (Last, First, Middle Initial)  
**Lynn W Wakefield**

Mailing Address 1722 Cactus Bluff

City San Antonio State TX Zip Code 78258

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

Name of Employer Occupation  
 Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 27 / 2015

**Transaction ID : SA11AI.5743**

Amount of Each Receipt this Period  
 1000.00

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

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

4200.00

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

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

FOR LINE NUMBER: (check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15  
 PAGE 16 OF 49

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Raymond L Wilkinson**

Mailing Address 81 Reynosa

City San Antonio State TX Zip Code 78261

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

Name of Employer Texas Allied Industries Occupation Owner/CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 2250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2015

**Transaction ID : SA11A1.5748**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

500.00

33350.00



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

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

FOR LINE NUMBER: PAGE 17 OF 49  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Brian Matthew McCall**

Mailing Address 678 Rosewood

City State Zip Code  
Boerne TX 78006

FEC ID number of contributing federal political committee. **C** H4TX21041

Name of Employer Occupation  
Self Sales

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
14980.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 20 / 2015

**Transaction ID : SA13A.5494**

Amount of Each Receipt this Period  
 10000.00  
 loan from candidate

**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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

10000.00

10000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Full Name (Last, First, Middle Initial) <b>A. Allied Advertising Agency, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015
Mailing Address 3700 Blanco Rd.		Amount of Each Disbursement this Period 6000.00 <b>Transaction ID : SB17.5398</b>
City San Antonio State TX Zip Code 78212	Purpose of Disbursement signage 004 Category/Type	
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 21		

Full Name (Last, First, Middle Initial) <b>B. Allied Advertising Agency, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 3700 Blanco Rd.		Amount of Each Disbursement this Period 6048.23 <b>Transaction ID : SB17.5424</b>
City San Antonio State TX Zip Code 78212	Purpose of Disbursement advertising 004 Category/Type	
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 21		

Full Name (Last, First, Middle Initial) <b>c. Elena Castoreno</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2015
Mailing Address		Amount of Each Disbursement this Period 325.00 <b>Transaction ID : SB17.5418</b>
City Boerne State TX Zip Code 78006	Purpose of Disbursement block walker 003 Category/Type	
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 21		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	12373.23
<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: (check only one)	PAGE 19 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Full Name (Last, First, Middle Initial) <b>A. Elena Castoreno</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2015
Mailing Address		Amount of Each Disbursement this Period 741.00 <b>Transaction ID : SB17.5443</b>
City Boerne	State TX	
Zip Code 78006	Purpose of Disbursement campaign worker	Category/ Type 003
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

Full Name (Last, First, Middle Initial) <b>B. Elena Castoreno</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2015
Mailing Address		Amount of Each Disbursement this Period 1040.00 <b>Transaction ID : SB17.5451</b>
City Boerne	State TX	
Zip Code 78006	Purpose of Disbursement campaign workere	Category/ Type 003
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

Full Name (Last, First, Middle Initial) <b>c. Elena Castoreno</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2015
Mailing Address		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : SB17.5463</b>
City Boerne	State TX	
Zip Code 78006	Purpose of Disbursement campaign worker	Category/ Type 003
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1831.00
<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: (check only one)	PAGE 20 OF 49		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Full Name (Last, First, Middle Initial) <b>A. Alicia Colon</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2015
Mailing Address		Amount of Each Disbursement this Period 325.00 <b>Transaction ID : SB17.5428</b>
City	State Zip Code	
Purpose of Disbursement block walker	Category/ Type 003	
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

Full Name (Last, First, Middle Initial) <b>B. Alicia Colon</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2015
Mailing Address		Amount of Each Disbursement this Period 1001.00 <b>Transaction ID : SB17.5452</b>
City	State Zip Code	
Purpose of Disbursement campaign worker	Category/ Type 003	
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

Full Name (Last, First, Middle Initial) <b>c. Alicia Colon</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2015
Mailing Address		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.5464</b>
City	State Zip Code	
Purpose of Disbursement campaign worker	Category/ Type 003	
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1426.00
<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: (check only one)	PAGE 21 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Full Name (Last, First, Middle Initial) <b>A. Charlie Davila</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address		Amount of Each Disbursement this Period 290.00 <b>Transaction ID : SB17.5386</b>
City San Antonio	State TX	
Zip Code 78229	Purpose of Disbursement block walker	Category/ Type 003
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

Full Name (Last, First, Middle Initial) <b>B. Charlie Davila</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015
Mailing Address		Amount of Each Disbursement this Period 237.25 <b>Transaction ID : SB17.5390</b>
City San Antonio	State TX	
Zip Code 78229	Purpose of Disbursement block walker	Category/ Type 003
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

Full Name (Last, First, Middle Initial) <b>c. Charlie Davila</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2015
Mailing Address		Amount of Each Disbursement this Period 331.50 <b>Transaction ID : SB17.5406</b>
City San Antonio	State TX	
Zip Code 78229	Purpose of Disbursement block walker	Category/ Type 003
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	858.75
<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: (check only one)	PAGE 22 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Full Name (Last, First, Middle Initial) <b>A. Charlie Davila</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2015
Mailing Address		Amount of Each Disbursement this Period 221.00 <b>Transaction ID : SB17.5413</b>
City San Antonio	State TX	
Zip Code 78229	Purpose of Disbursement block walker	Category/ Type 003
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

Full Name (Last, First, Middle Initial) <b>B. Charlie Davila</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address		Amount of Each Disbursement this Period 425.75 <b>Transaction ID : SB17.5438</b>
City San Antonio	State TX	
Zip Code 78229	Purpose of Disbursement campaign worker	Category/ Type 003
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

Full Name (Last, First, Middle Initial) <b>c. Charlie Davila</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address		Amount of Each Disbursement this Period 428.00 <b>Transaction ID : SB17.5453</b>
City San Antonio	State TX	
Zip Code 78229	Purpose of Disbursement campaign worker	Category/ Type 003
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1074.75
<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: (check only one)	PAGE 23 OF 49		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Full Name (Last, First, Middle Initial) <b>A. Lacey Gonzales</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address		Amount of Each Disbursement this Period 832.20 <b>Transaction ID : SB17.5434</b>
City	State Zip Code	
Purpose of Disbursement campaign worker	003 Category/Type	
Candidate Name <b>Matt McCall for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 21		

Full Name (Last, First, Middle Initial) <b>B. Nicholas Gonzales</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015
Mailing Address		Amount of Each Disbursement this Period 455.00 <b>Transaction ID : SB17.5450</b>
City	State Zip Code	
Purpose of Disbursement campaign worker	003 Category/Type	
Candidate Name <b>Matt McCall for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 21		

Full Name (Last, First, Middle Initial) <b>c. Nicholas Gonzales</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address		Amount of Each Disbursement this Period 884.00 <b>Transaction ID : SB17.5454</b>
City	State Zip Code	
Purpose of Disbursement campaign worker	003 Category/Type	
Candidate Name <b>Matt McCall for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 21		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2171.20
<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: (check only one)	PAGE 24 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Full Name (Last, First, Middle Initial) <b>A. Tery Gonzales</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address		Amount of Each Disbursement this Period 806.00 <b>Transaction ID : SB17.5458</b>
City	State Zip Code	
Purpose of Disbursement campaign worker	Category/Type 003	
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

Full Name (Last, First, Middle Initial) <b>B. Gringolet LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 816 Big Woods Rd.		Amount of Each Disbursement this Period 267.38 <b>Transaction ID : SB17.5420</b>
City	State Zip Code Longview TX 75605	
Purpose of Disbursement internet services	Category/Type 004	
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

Full Name (Last, First, Middle Initial) <b>c. Gringolet LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 816 Big Woods Rd.		Amount of Each Disbursement this Period 764.08 <b>Transaction ID : SB17.5421</b>
City	State Zip Code Longview TX 75605	
Purpose of Disbursement internet services	Category/Type 004	
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1837.46
<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: (check only one)	PAGE 25 OF 49		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Full Name (Last, First, Middle Initial) <b>A. HEB #195</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2015
Mailing Address 11551 West Ave.		Amount of Each Disbursement this Period 318.50 <b>Transaction ID : SB17.5445</b>
City San Antonio State TX Zip Code 78213	Purpose of Disbursement campaign event 007 Category/Type	
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 21		

Full Name (Last, First, Middle Initial) <b>B. Andres Holliday</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address 678 Rosewood		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : SB17.5384</b>
City Boerne State TX Zip Code 78006	Purpose of Disbursement campagin manager 001 Category/Type	
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 21		

Full Name (Last, First, Middle Initial) <b>c. Andres Holliday</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2015
Mailing Address 678 Rosewood		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : SB17.5400</b>
City Boerne State TX Zip Code 78006	Purpose of Disbursement campaign manager 001 Category/Type	
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 21		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5318.50
<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: (check only one)	PAGE 26 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Full Name (Last, First, Middle Initial) <b>A. Andres Holliday</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address 678 Rosewood		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : SB17.5441</b>
City Boerne State TX Zip Code 78006	Purpose of Disbursement campaign manager 001 Category/Type	
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 21		

Full Name (Last, First, Middle Initial) <b>B. Jack Hoyle</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address		Amount of Each Disbursement this Period 440.00 <b>Transaction ID : SB17.5387</b>
City San Antonio State TX Zip Code 78209	Purpose of Disbursement block walker 003 Category/Type	
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 21		

Full Name (Last, First, Middle Initial) <b>c. Jack Hoyle</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address		Amount of Each Disbursement this Period 533.00 <b>Transaction ID : SB17.5397</b>
City San Antonio State TX Zip Code 78209	Purpose of Disbursement block walker 003 Category/Type	
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 21		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3473.00
<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: (check only one)	PAGE 27 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jack Hoyle</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2015
Mailing Address		Amount of Each Disbursement this Period 520.00 <b>Transaction ID : SB17.5432</b>
City San Antonio	State TX	
Zip Code 78209	Purpose of Disbursement block walker	Category/ Type 003
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

Full Name (Last, First, Middle Initial) <b>B. Jack Hoyle</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2015
Mailing Address		Amount of Each Disbursement this Period 520.00 <b>Transaction ID : SB17.5433</b>
City San Antonio	State TX	
Zip Code 78209	Purpose of Disbursement campaign worker	Category/ Type 003
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

Full Name (Last, First, Middle Initial) <b>c. Jack Hoyle</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address		Amount of Each Disbursement this Period 520.00 <b>Transaction ID : SB17.5437</b>
City San Antonio	State TX	
Zip Code 78209	Purpose of Disbursement campaign worker	Category/ Type 003
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1560.00
<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: (check only one)	PAGE 28 OF 49		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jack Hoyle</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address		Amount of Each Disbursement this Period 520.00 <b>Transaction ID : SB17.5462</b>
City San Antonio	State TX	
Zip Code 78209	Purpose of Disbursement campaign worker	Category/ Type 003
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

Full Name (Last, First, Middle Initial) <b>B. Alecia Jimenez</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2015
Mailing Address		Amount of Each Disbursement this Period 832.20 <b>Transaction ID : SB17.5448</b>
City	State	
Zip Code	Purpose of Disbursement campaign worker	Category/ Type 003
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

Full Name (Last, First, Middle Initial) <b>c. Alan Johnson</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2015
Mailing Address		Amount of Each Disbursement this Period 2700.00 <b>Transaction ID : SB17.5510</b>
City	State	
Zip Code	Purpose of Disbursement In-kind - Printing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4052.20
<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: (check only one)	PAGE 29 OF 49		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Full Name (Last, First, Middle Initial) <b>A. Chana J Johnson</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2015
Mailing Address P.O. Box 979		Amount of Each Disbursement this Period 2700.00 <b>Transaction ID : SB17.5511</b>
City Ingram	State TX	
Purpose of Disbursement In-kind - Printing	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sheana Miller</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2015
Mailing Address		Amount of Each Disbursement this Period 900.00 <b>Transaction ID : SB17.5430</b>
City	State	
Purpose of Disbursement block walker	Candidate Name <b>Matt McCall for Congress</b>	Category/ Type 003
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 21		

Full Name (Last, First, Middle Initial) <b>c. Sheana Miller</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2015
Mailing Address		Amount of Each Disbursement this Period 600.00 <b>Transaction ID : SB17.5468</b>
City	State	
Purpose of Disbursement campaign worker	Candidate Name <b>Matt McCall for Congress</b>	Category/ Type 003
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 21		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4200.00
<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: (check only one)	PAGE 30 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mitch Idol Photography</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address 2522 Wild Turkey E.		Amount of Each Disbursement this Period 2872.00 <b>Transaction ID : SB17.5473</b>
City San Antonio State TX Zip Code 78232	Purpose of Disbursement videos/shoot/edit 004 Category/Type	
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 21		

Full Name (Last, First, Middle Initial) <b>B. Ashlie Montemayor</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address		Amount of Each Disbursement this Period 285.00 <b>Transaction ID : SB17.5385</b>
City San Antonio State TX Zip Code 78228	Purpose of Disbursement Admin work 001 Category/Type	
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 21		

Full Name (Last, First, Middle Initial) <b>c. Ashlie Montemayor</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2015
Mailing Address		Amount of Each Disbursement this Period 403.00 <b>Transaction ID : SB17.5394</b>
City San Antonio State TX Zip Code 78228	Purpose of Disbursement block walker 003 Category/Type	
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 21		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3560.00
<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: (check only one)	PAGE 31 OF 49		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ashlie Montemayor</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address		Amount of Each Disbursement this Period 292.50 <b>Transaction ID : SB17.5409</b>
City San Antonio	State TX	
Zip Code 78228	Purpose of Disbursement admin work	Category/ Type 001
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

Full Name (Last, First, Middle Initial) <b>B. Ashlie Montemayor</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2015
Mailing Address		Amount of Each Disbursement this Period 598.00 <b>Transaction ID : SB17.5427</b>
City San Antonio	State TX	
Zip Code 78228	Purpose of Disbursement admin	Category/ Type 001
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

Full Name (Last, First, Middle Initial) <b>c. Ashlie Montemayor</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2015
Mailing Address		Amount of Each Disbursement this Period 988.44 <b>Transaction ID : SB17.5446</b>
City San Antonio	State TX	
Zip Code 78228	Purpose of Disbursement Administraton	Category/ Type 001
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1878.94
<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: (check only one)	PAGE 32 OF 49			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Full Name (Last, First, Middle Initial) <b>A. David Nabour</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2015
Mailing Address		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB17.5401</b>
City	State Zip Code	
Purpose of Disbursement research	Category/Type 005	
Candidate Name <b>Matt McCall for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 21		

Full Name (Last, First, Middle Initial) <b>B. Megan Otten</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address		Amount of Each Disbursement this Period 247.00 <b>Transaction ID : SB17.5460</b>
City	State Zip Code	
Purpose of Disbursement campaign worker	Category/Type 003	
Candidate Name <b>Matt McCall for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 21		

Full Name (Last, First, Middle Initial) <b>c. Raise the Money, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address P.O. Box 26466		Amount of Each Disbursement this Period 121.75 <b>Transaction ID : SB17.5487</b>
City	State Zip Code	
Little Rock	AR 72221	
Purpose of Disbursement service fee	Category/Type	
Candidate Name <b>Matt McCall for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 21		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	618.75
<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: (check only one)	PAGE 33 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Full Name (Last, First, Middle Initial) <b>A. Raise the Money, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2015
Mailing Address P.O. Box 26466		Amount of Each Disbursement this Period 2.50 <b>Transaction ID : SB17.5488</b>
City Little Rock	State AR	
Zip Code 72221	Purpose of Disbursement service fee	Category/ Type 001
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

Full Name (Last, First, Middle Initial) <b>B. Raise the Money, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2015
Mailing Address P.O. Box 26466		Amount of Each Disbursement this Period 45.25 <b>Transaction ID : SB17.5489</b>
City Little Rock	State AR	
Zip Code 72221	Purpose of Disbursement service fee	Category/ Type 003
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

Full Name (Last, First, Middle Initial) <b>c. Raise the Money, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2015
Mailing Address P.O. Box 26466		Amount of Each Disbursement this Period 90.25 <b>Transaction ID : SB17.5490</b>
City Little Rock	State AR	
Zip Code 72221	Purpose of Disbursement service fee	Category/ Type 001
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	138.00
<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: (check only one)	PAGE 34 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Full Name (Last, First, Middle Initial) <b>A. Republican Party of Texas</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015
Mailing Address 1108 Lavaca Suite 500		Amount of Each Disbursement this Period 3125.00 <b>Transaction ID : SB17.5426</b>
City Austin State TX Zip Code 78701	Purpose of Disbursement 011 Category/Type	
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 21		

Full Name (Last, First, Middle Initial) <b>B. Scherle Specialties</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2015
Mailing Address P. O. Box 1221		Amount of Each Disbursement this Period 1440.00 <b>Transaction ID : SB17.5469</b>
City Solvang State CA Zip Code 93464	Purpose of Disbursement t-shirts 006 Category/Type	
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 21		

Full Name (Last, First, Middle Initial) <b>c. Aldric Segura</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address		Amount of Each Disbursement this Period 227.50 <b>Transaction ID : SB17.5439</b>
City State Zip Code	Purpose of Disbursement campaign worker 003 Category/Type	
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 21		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4792.50
<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: (check only one)	PAGE 35 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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)  
**Matt McCall for Congress**

Full Name (Last, First, Middle Initial) <b>A. Aldric Segura</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address		Amount of Each Disbursement this Period 104.00 <b>Transaction ID : SB17.5457</b>
City	State Zip Code	
Purpose of Disbursement campaign worker	003 Category/Type	
Candidate Name <b>Matt McCall for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 21		

Full Name (Last, First, Middle Initial) <b>B. Melanie Stoval</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.5470</b>
City	State Zip Code	
Purpose of Disbursement campaign worker	003 Category/Type	
Candidate Name <b>Matt McCall for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 21		

Full Name (Last, First, Middle Initial) <b>c. Gerald Thibodeaux</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.5383</b>
City	State Zip Code	
San Antonio TX 78216		
Purpose of Disbursement Block walker	003 Category/Type	
Candidate Name <b>Matt McCall for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 21		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1004.00
<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: (check only one)	PAGE 36 OF 49		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Full Name (Last, First, Middle Initial) <b>A. Gerald Thibodeaux</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2015
Mailing Address		Amount of Each Disbursement this Period 410.00 <b>Transaction ID : SB17.5391</b>
City San Antonio	State TX	
Zip Code 78216	Purpose of Disbursement block walker	Category/ Type 003
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

Full Name (Last, First, Middle Initial) <b>B. Gerald Thibodeaux</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2015
Mailing Address		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.5403</b>
City San Antonio	State TX	
Zip Code 78216	Purpose of Disbursement block walker	Category/ Type 003
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

Full Name (Last, First, Middle Initial) <b>c. Gerald Thibodeaux</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015
Mailing Address		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.5425</b>
City San Antonio	State TX	
Zip Code 78216	Purpose of Disbursement block walker	Category/ Type 003
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1210.00
<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: (check only one)	PAGE 37 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Full Name (Last, First, Middle Initial) <b>A. Gerald Thibodeaux</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.5447</b>
City San Antonio	State TX	
Zip Code 78216	Purpose of Disbursement campaign worker	Category/ Type 003
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

Full Name (Last, First, Middle Initial) <b>B. Gerald Thibodeaux</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2015
Mailing Address		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.5465</b>
City San Antonio	State TX	
Zip Code 78216	Purpose of Disbursement campaign worker	Category/ Type 003
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

Full Name (Last, First, Middle Initial) <b>c. Jessica Tovar</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address		Amount of Each Disbursement this Period 325.00 <b>Transaction ID : SB17.5455</b>
City	State	
Zip Code	Purpose of Disbursement campaign worker	Category/ Type 003
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1125.00
<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: (check only one)	PAGE 38 OF 49		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Full Name (Last, First, Middle Initial) <b>A. Willow Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.5380</b>
City	State Zip Code	
Purpose of Disbursement Consulting	Category/Type 003	
Candidate Name <b>Matt McCall for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 21	

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	55503.28

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Transaction ID : **SC/10.4128**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**Brian Matthew McCall**

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
678 Rosewood

City State ZIP Code  
Boerne TX 78006

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
500.00 0.00 500.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
02 / 26 / 2013 M M / D D / 12/31/2016 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)..... 500.00

**TOTALS** 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) **Matt McCall for Congress** Transaction ID : **SC/10.4129**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2014  
**Brian Matthew McCall**  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
678 Rosewood  
 City State ZIP Code  
 Boerne TX 78006

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

**TERMS**  
 Date Incurred: M 03 / D 11 / Y 2013  
 Date Due: M / D / Y 12/31/2016  
 Interest Rate: 0.00 % (apr)  
 Secured:  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)..... ▶ 10000.00  
**TOTALS** 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**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Transaction ID : **SC/10.4449**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**Brian Matthew McCall**

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
678 Rosewood

City State ZIP Code  
Boerne TX 78006

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
3000.00 0.00 3000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
11 / 26 / 2013 M M / D D / 12/31/2016 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)..... ▶ 3000.00

**TOTALS** 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**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Transaction ID : **SC/10.4436**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**Brian Matthew McCall**

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
678 Rosewood

City State ZIP Code  
Boerne TX 78006

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
20000.00 0.00 20000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
12/18/2013 M M / D D / Y Y Y Y 12/31/2016 Y Y Y 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)..... ▶ 20000.00

**TOTALS** 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**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Transaction ID : **SC/10.4918**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**Brian Matthew McCall**

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
678 Rosewood

City State ZIP Code  
Boerne TX 78006

Original Amount of Loan 1000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1000.00
------------------------------------	------------------------------------	--

**TERMS**

Date Incurred: M 03 / D 03 / Y 2014  
Date Due: M / D / Y 12/31/2016  
Interest Rate: 0.00 % (apr)  
Secured:  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)..... ▶ 1000.00

**TOTALS** 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**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Transaction ID : **SC/10.4919**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**Brian Matthew McCall**

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
678 Rosewood

City State ZIP Code  
Boerne TX 78006

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
1000.00 0.00 1000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
03 / 03 / 2014 M M / D D / 12/31/2016 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)..... ▶ 1000.00

**TOTALS** 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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Transaction ID : **SC/10.5007**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**Brian Matthew McCall**

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
678 Rosewood

City State ZIP Code  
Boerne TX 78006

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
500.00 0.00 500.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
03 / 03 / 2014 M M / D D / 12/31/2016 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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

**SUBTOTALS** This Period This Page (optional).....

**TOTALS** 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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Transaction ID : **SC/10.5047**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**Brian Matthew McCall**

**[PERSONAL FUNDS]**

Election: 2016

Primary  
 General  
 Other (specify) ▼

Mailing Address  
678 Rosewood

City State ZIP Code  
Boerne TX 78006

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
225.00 0.00 225.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
03 / 31 / 2015 M M / D D / 12/31/2016 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)..... ▶ 225.00

**TOTALS** 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**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Transaction ID : **SC/10.5137**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**Brian Matthew McCall**

**[PERSONAL FUNDS]**

Election: 2016

Primary  
 General  
 Other (specify) ▼

Mailing Address  
678 Rosewood

City State ZIP Code  
Boerne TX 78006

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
2000.00 0.00 2000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
04 / 07 / 2015 M M / D D / 12/31/2016 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)..... ▶ 2000.00

**TOTALS** 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**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Matt McCall for Congress**

Transaction ID : **SC/10.5280**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**Brian Matthew McCall**

**[PERSONAL FUNDS]**

Election: 2016

Primary  
 General  
 Other (specify) ▼

Mailing Address  
678 Rosewood

City State ZIP Code  
Boerne TX 78006

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
2750.00 0.00 2750.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
09 / 29 / 2015 M M / D D / 12/31/2016 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)..... ▶ 2750.00

**TOTALS** 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) **Matt McCall for Congress** Transaction ID : **SC/10.5494**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **Brian Matthew McCall** *[PERSONAL FUNDS]* Election: 2016  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
678 Rosewood

City State ZIP Code  
Boerne TX 78006

Original Amount of Loan 10000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 10000.00
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**TERMS**

Date Incurred M 11 / D 20 / Y 2015	Date Due M / D / Y 12/31/2016	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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).....	▶	50975.00

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