

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5
CRAIG MCMICHAEL FOR CONGRESS

ADDRESS (number and street) 2706 BERNERS-LEE AVE
 Check if different than previously reported. (ACC) THE WOODLANDS TX 77381

2. **FEC IDENTIFICATION NUMBER** C C00544379 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
TX 08

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 M M / D D / Y Y Y Y in the State of

(c) 30-Day **POST**-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y
02 / 13 / 2014 through 03 / 31 / 2014

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 Brandon Campbell

Signature of Treasurer Brandon Campbell *[Electronically Filed]* Date M M / D D / Y Y Y Y
04 / 15 / 2014

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

Office Use Only									
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
CRAIG MCMICHAEL FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	2060.00	21141.77
(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)).....	2060.00	21141.77
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	4189.32	20979.34
(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)).....	4189.32	20979.34
8. Cash on Hand at Close of Reporting Period (from Line 27).....	92.43	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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

CRAIG MCMICHAEL 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).....	1110.00	12660.80
(ii) Unitemized.....	950.00	8184.98
(iii) TOTAL of contributions from individuals ▶	2060.00	20845.78
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	295.99
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	2060.00	21141.77
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	2060.00	21141.77

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	4189.32	20979.34
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	10.00	70.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	4199.32	21049.34

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2231.75
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	2060.00
25. SUBTOTAL (add Line 23 and Line 24).....	4291.75
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	4199.32
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	92.43

**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 11
	<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)
CRAIG MCMICHAEL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mark j Keough

Mailing Address 26 Woodmere Place

City State Zip Code
The Woodlands TX 77381

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

Name of Employer Occupation
Self retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 17 / 2014

Transaction ID : SA11AI.4639

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. John Postel

Mailing Address 22553 Martin Rd.

City State Zip Code
Montgomery TX 77316

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

Name of Employer Occupation
self employed Minister

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
215.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 28 / 2014

Transaction ID : SA11AI.4697

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Mr. John Postel

Mailing Address 22553 Martin Rd.

City State Zip Code
Montgomery TX 77316

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

Name of Employer Occupation
self employed Minister

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
265.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 06 / 2014

Transaction ID : SA11AI.4696

Amount of Each Receipt this Period
50.00

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

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

1060.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 11
	<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)
CRAIG MCMICHAEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. John Postel		Date of Receipt M M / D D / Y Y Y Y 03 / 11 / 2014	
Mailing Address 22553 Martin Rd.		Transaction ID : SA11AI.4695	
City Montgomery	State TX	Zip Code 77316	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer self employed	Occupation Minister		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 315.00		

Full Name (Last, First, Middle Initial) B.		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address		Amount of Each Receipt this Period	
City	State	Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address		Amount of Each Receipt this Period	
City	State	Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

SUBTOTAL of Receipts This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	1110.00

**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 7 OF 11			
	<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)
CRAIG MCMICHAEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Chili's			Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014		
Mailing Address 6671 Woodlands Parkway			Amount of Each Disbursement this Period 184.42		
City The Woodlands	State TX	Zip Code 77384	Transaction ID : SB17.4675		
Purpose of Disbursement meal		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Cracker Barrel			Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014		
Mailing Address 1301 League Line			Amount of Each Disbursement this Period 66.34		
City Conroe	State TX	Zip Code 77301	Transaction ID : SB17.4657		
Purpose of Disbursement Meal		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) c. Cracker Barrel			Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014		
Mailing Address 1301 League Line			Amount of Each Disbursement this Period 40.68		
City Conroe	State TX	Zip Code 77301	Transaction ID : SB17.4661		
Purpose of Disbursement meal		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	291.44
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 11			
	<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)
CRAIG MCMICHAEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Facebook		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 1601 south california ave		Amount of Each Disbursement this Period 250.96
City Palo Alto	State CA	
Zip Code 94304	Purpose of Disbursement Advertising	Transaction ID : SB17.4660
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Facebook		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address 1601 south california ave		Amount of Each Disbursement this Period 502.75
City Palo Alto	State CA	
Zip Code 94304	Purpose of Disbursement advertising	Transaction ID : SB17.4662
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Facebook		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 1601 south california ave		Amount of Each Disbursement this Period 752.18
City Palo Alto	State CA	
Zip Code 94304	Purpose of Disbursement advertising	Transaction ID : SB17.4671
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1505.89
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 11			
	<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)
CRAIG MCMICHAEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Facebook		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address 1601 south california ave		Amount of Each Disbursement this Period 711.94 Transaction ID : SB17.4687
City Palo Alto	State CA	
Zip Code 94304	Purpose of Disbursement advertising	Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Main Event		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address shenand		Amount of Each Disbursement this Period 324.75 Transaction ID : SB17.4656
City Shenandoah	State TX	
Zip Code 77386	Purpose of Disbursement Facility - room rental	Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Main Event		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address shenand		Amount of Each Disbursement this Period 229.96 Transaction ID : SB17.4676
City Shenandoah	State TX	
Zip Code 77386	Purpose of Disbursement meal	Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1266.65
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 11			
	<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)
CRAIG MCMICHAEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Paypal		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 2211 North First Street		Amount of Each Disbursement this Period 22.52
City San Jose	State CA	
Zip Code 95131	Purpose of Disbursement bank fee	Transaction ID : SB17.4717
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Shell Gas Staiton		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 777 walker street		Amount of Each Disbursement this Period 15.00
City Houston	State TX	
Zip Code 77002	Purpose of Disbursement travel	Transaction ID : SB17.4677
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Shell Gas Staiton		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 777 walker street		Amount of Each Disbursement this Period 40.22
City Houston	State TX	
Zip Code 77002	Purpose of Disbursement travel	Transaction ID : SB17.4683
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	77.74
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 11	
	<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)
CRAIG MCMICHAEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mrs. Dorlana k Vann		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014
Mailing Address 3365 olympic forest dr		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4644
City Porter	State TX Zip Code 77365	
Purpose of Disbursement accounting	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Vista Print		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 95 Hayden Ave		Amount of Each Disbursement this Period 77.99 Transaction ID : SB17.4706
City Lexington	State MA Zip Code 02421	
Purpose of Disbursement Slate Cards	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) C.		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	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	577.99
TOTAL This Period (last page this line number only).....	3719.71