



**Norm Mosher**  
for **CONGRESS**

RECEIVED

2015 FEB 23 AM 11:37

FEC MAIL CENTER  
February 18, 2015

Carolina Mongeon  
Reports Analysis Division  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Reference: Response to request for more information on Amended October Quarterly Report  
Response to request for more information on Amended 30 Day Post-General Report

Identification Number: C00564617

Dear Ms. Mongeon,

Thank you for your help over the phone to verify the adequacy of my response on behalf of Norm Mosher for Congress to your letters dated January 21, 2015.

In response to your request for the missing information in the Amended October Quarterly Report, attached please find the completed employer and occupation information for each entry which previously stated: "Information Requested/Information Requested" and "None/None." In addition, any entry which previously contained a contribution made by more than one person has been changed to show the amount attributed to each contributor along with all the required contributor information. I was unable to electronically file an amended report because our subscription with the compliance software ended on December 31, 2014.

In response to your request for additional information concerning my committee's failure to file a required 48-hour notice regarding the "last minute" contribution from Norm Mosher in the amount of \$4,800.00 received on October 19, 2014, after the close of books for the 2014 12 Day Pre-General Report, it was an oversight. The contribution was given by the Candidate and the committee did not recognize the 48-hour notice requirement. The Norm Mosher for Congress committee acknowledges this oversight and has since updated our policies and procedures concerning the 48-hour reporting.

You may contact me at [samantha@normmosher.com](mailto:samantha@normmosher.com) or call 804-577-7404 if you have any further questions. Thank you again for your assistance in these matters.

Sincerely,

Samantha C. Van Saun

Treasurer

**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	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full) *Norm Mosher for Congress*

Full Name (Last, First, Middle Initial)  
*Ball, Walter*

Mailing Address  
*1088 Richmond Hill Rd*

City *Warsaw* State *VA* Zip Code *22572*

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

Name of Employer *Retired* Occupation *Retired*

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
*300.00*

Date of Receipt  
*08 / 15 / 2014*

Amount of Each Receipt this Period  
*300.00*

Full Name (Last, First, Middle Initial)  
*Bender, Margaret H.*

Mailing Address  
*6150 Farver Rd*

City *McLean* State *VA* Zip Code *22101*

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

Name of Employer *Retired* Occupation *Retired*

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
*250.00*

Date of Receipt  
*09 / 14 / 2014*

Amount of Each Receipt this Period  
*250.00*

RECEIVED  
2015 FEB 23 AM 11:35  
FEC MAIL CENTER

Full Name (Last, First, Middle Initial)  
*Mary Berg, Mary*

Mailing Address  
*4832 Clay Bank Rd*

City *Gloucester* State *VA* Zip Code *23061*

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

Name of Employer *Retired* Occupation *Retired*

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
*250.00*

Date of Receipt  
*09 / 16 / 2014*

Amount of Each Receipt this Period  
*250.00*

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

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

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

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	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full) *Norm Mosher for Congress*

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

Mailing Address  
*1852 Ocean Rd*

City *White Stone* State *VA* Zip Code *22578*

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

Name of Employer *Retired* Occupation *Retired*

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
*500.00*

Date of Receipt  
*08 / 19 / 2014*

Amount of Each Receipt this Period  
*300.00*

Full Name (Last, First, Middle Initial)  
*Brock, John*

Mailing Address  
*6370 Brookline Ct.*

City *Cumming* State *GA* Zip Code *30040*

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

Name of Employer *The Brock Company, Inc.* Occupation *CEO, President*

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
*500.00*

Date of Receipt  
*07 / 23 / 2014*

Amount of Each Receipt this Period  
*500.00*

Full Name (Last, First, Middle Initial)  
*Cardwell, John*

Mailing Address  
*PO Box 101*

City *Irrington* State *VA* Zip Code *22480*

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

Name of Employer *Retired* Occupation *Retired*

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
*750.00*

Date of Receipt

Amount of Each Receipt this Period  
*500.00*  
*5*

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

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE		OF	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14		

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NAME OF COMMITTEE (In Full) *Norm Masher for Congress*

Full Name (Last, First, Middle Initial) <i>Dorman, Craig</i>		Date of Receipt 07' 06' 2014	
Mailing Address <i>1020 Baneberry Ln</i>			
City <i>Fairbanks</i>	State <i>AK</i>	Zip Code <i>99712</i>	
FEC ID number of contributing federal political committee. <i>C</i>		Amount of Each Receipt this Period <i>250.00</i>	
Name of Employer <i>Retired</i>	Occupation <i>Retired</i>		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <i>250.00</i>		

Full Name (Last, First, Middle Initial) <i>Ebinger, Charles</i>		Date of Receipt 09' 14' 2014	
Mailing Address <i>7306 meadow Ln</i>			
City <i>Cherry Chase</i>	State <i>MD</i>	Zip Code <i>20815</i>	
FEC ID number of contributing federal political committee. <i>C</i>		Amount of Each Receipt this Period <i>1,000.00</i>	
Name of Employer <i>Brookings Institute</i>	Occupation <i>Senior Fellow</i>		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <i>1,000.00</i>		

Full Name (Last, First, Middle Initial) <i>Goonewardene, Nihal</i>		Date of Receipt 07' 10' 2014	
Mailing Address <i>8800 Twin Creek Ct.</i>			
City <i>Potomac</i>	State <i>MD</i>	Zip Code <i>20854</i>	
FEC ID number of contributing federal political committee. <i>C</i>		Amount of Each Receipt this Period <i>350.00</i>	
Name of Employer <i>Retired</i>	Occupation <i>Retired</i>		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <i>1,432.00</i>		

SUBTOTAL of Receipts This Page (optional).....	
TOTAL 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	OF
<input 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) *Norm Mosher for Congress*

Full Name (Last, First, Middle Initial) <i>Goonewardene, Nihal</i>		Date of Receipt <i>09' 14' 2014</i>
Mailing Address <i>8800 Twin Creek Ct.</i>		Amount of Each Receipt this Period <i>1,082.00</i>
City <i>Potomac</i>	State <i>MD</i> Zip Code <i>20854</i>	
FEC ID number of contributing federal political committee. <i>C</i>		* In-kind
Name of Employer <i>Retired</i>	Occupation <i>Retired</i>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <i>143200</i>	

Full Name (Last, First, Middle Initial) <i>Harris, Steve</i>		Date of Receipt <i>08' 19' 2014</i>
Mailing Address <i>PO Box 696</i>		Amount of Each Receipt this Period <i>300.00</i>
City <i>White Stone</i>	State <i>VA</i> Zip Code <i>22578</i>	
FEC ID number of contributing federal political committee. <i>C</i>		
Name of Employer <i>Retired</i>	Occupation <i>Retired</i>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <i>100000</i>	

Full Name (Last, First, Middle Initial) <i>Harris, Steve</i>		Date of Receipt <i>09' 13' 2014</i>
Mailing Address <i>PO Box 696</i>		Amount of Each Receipt this Period <i>700.00</i>
City <i>White Stone</i>	State <i>VA</i> Zip Code <i>22578</i>	
FEC ID number of contributing federal political committee. <i>C</i>		
Name of Employer <i>Retired</i>	Occupation <i>Retired</i>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <i>100000</i>	

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE	OF
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<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full) Norm Mosher for Congress

Full Name (Last, First, Middle Initial) <u>Hontz, Ted</u>		Date of Receipt <u>09</u> / <u>11</u> / <u>2014</u>	
Mailing Address <u>620 Lendall Ln</u>			
City <u>Fredericksburg</u>	State <u>VA</u>	Zip Code <u>22405</u>	
FEC ID number of contributing federal political committee. <u>C</u>		Amount of Each Receipt this Period <u>500.00</u>	
Name of Employer <u>BCI, Dahlgren</u>	Occupation <u>Vice President</u>		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <u>2500.00</u>		

Full Name (Last, First, Middle Initial) <u>Hontz, Jackie</u>		Date of Receipt <u>09</u> / <u>30</u> / <u>2014</u>	
Mailing Address <u>620 Lendall Ln</u>			
City <u>Fredericksburg</u>	State <u>VA</u>	Zip Code <u>22405</u>	
FEC ID number of contributing federal political committee. <u>C</u>		Amount of Each Receipt this Period <u>500.00</u>	
Name of Employer <u>Not employed</u>	Occupation <u>Not employed</u>		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <u>500.00</u>		

Full Name (Last, First, Middle Initial) <u>Kenley, BG</u>		Date of Receipt <u>08</u> / <u>04</u> / <u>2014</u>	
Mailing Address <u>7090 Covenant Woods Dr Apt I102</u>			
City <u>Mechanicsville</u>	State <u>VA</u>	Zip Code <u>23111</u>	
FEC ID number of contributing federal political committee. <u>C</u>		Amount of Each Receipt this Period <u>500.00</u>	
Name of Employer <u>Not employed</u>	Occupation <u>Not employed</u>		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <u>500.00</u>		

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

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

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<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full) *Norm Masher for Congress*

Full Name (Last, First, Middle Initial)  
*Kenna, Mike*

Mailing Address  
*PO Box 216*

City *Wicomco Church* State *VA* Zip Code *22579*

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

Name of Employer *Retired* Occupation *Retired*

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
*25000*

Date of Receipt  
*08' 19' 2014*

Amount of Each Receipt this Period  
*250.00*

Full Name (Last, First, Middle Initial)  
*Kimbrrell, Thomas*

Mailing Address  
*418 Collingwood Dr*

City *Fredericksburg* State *VA* Zip Code *22405*

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

Name of Employer *Retired* Occupation *Retired*

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
*30000*

Date of Receipt  
*09' 25' 2014*

Amount of Each Receipt this Period  
*100.00*

Full Name (Last, First, Middle Initial)  
*Kirkbride, Gregory*

Mailing Address  
*9308 Cedar Ln*

City *Bethesda* State *MD* Zip Code *20814*

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

Name of Employer *USCG* Occupation *Environmental Analyst*

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
*25000*

Date of Receipt  
*07' 06' 2014*

Amount of Each Receipt this Period  
*250.00*

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

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

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

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for each category of the  
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FOR LINE NUMBER: (check only one)		PAGE	OF
<input 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) *Norm Mosher for Congress*

Full Name (Last, First, Middle Initial) <i>Morissette, Laurie</i>		Date of Receipt <i>07' 17' 2014</i>	
Mailing Address <i>236 Winding Creek Ln</i>			
City <i>Heathsville</i>	State <i>VA</i>	Zip Code <i>22473</i>	
FEC ID number of contributing federal political committee. <i>C</i>		Amount of Each Receipt this Period <i>300.00</i>	
Name of Employer <i>Retired</i>	Occupation <i>Retired</i>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <i>32000</i>		

Full Name (Last, First, Middle Initial) <i>Neff, Michael</i>		Date of Receipt <i>07' 16' 2014</i>	
Mailing Address <i>116 W Mason Ave</i>			
City <i>Alexandria</i>	State <i>VA</i>	Zip Code <i>22301</i>	
FEC ID number of contributing federal political committee. <i>C</i>		Amount of Each Receipt this Period <i>250.00</i>	
Name of Employer <i>Networks Artography</i>	Occupation <i>Owner</i>		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <i>25000</i>		

Full Name (Last, First, Middle Initial) <i>Priddy, David</i>		Date of Receipt <i>07' 05' 2014</i>	
Mailing Address <i>105 Paloma Farm Ln</i>			
City <i>Afton</i>	State <i>VA</i>	Zip Code <i>22920</i>	
FEC ID number of contributing federal political committee. <i>C</i>		Amount of Each Receipt this Period <i>500.00</i>	
Name of Employer <i>Retired</i>	Occupation <i>Retired</i>		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <i>50000</i>		

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

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FOR LINE NUMBER: (check only one)		PAGE	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full) *Norm Mosher for Congress*

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

Mailing Address  
*875 Clark Point Dr.*

City *White Stone* State *VA* Zip Code *22578*

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

Name of Employer *Retired* Occupation *Retired*

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
*60000*

Date of Receipt  
*07* / *22* / *2014*

Amount of Each Receipt this Period  
*500.00*

Full Name (Last, First, Middle Initial)  
*Rowden, Margaret*

Mailing Address  
*1560 clarketown Rd*

City *Heathsville* State *VA* Zip Code *22473*

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

Name of Employer *Retired* Occupation *Retired*

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
*30000*

Date of Receipt  
*08* / *11* / *2014*

Amount of Each Receipt this Period  
*300.00*

Full Name (Last, First, Middle Initial)  
*Smith, James William*

Mailing Address  
*99 Old Mill Ln*

City *Heathsville* State *VA* Zip Code *22473*

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

Name of Employer *Retired* Occupation *Retired*

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
*22000*

Date of Receipt  
*08* / *13* / *2014*

Amount of Each Receipt this Period  
*7000*

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

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

*60000*

*50000*

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**SCHEDULE A (FEC Form 3)  
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<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full) *Norm Mosher for Congress*

Full Name (Last, First, Middle Initial) <i>Smith, Richard H.</i>		Date of Receipt <i>09' 28' 2014</i>
Mailing Address <i>13038 Champlain Dr</i>		Amount of Each Receipt this Period <i>25000</i>
City <i>Manassas</i>	State Zip Code <i>VA 20112</i>	
FEC ID number of contributing federal political committee. <i>C</i>		Amount of Each Receipt this Period <i>25000</i>
Name of Employer <i>American Banking Association</i>	Occupation <i>IT Director</i>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <i>25000</i>	

Full Name (Last, First, Middle Initial) <i>Spanholz, Rich</i>		Date of Receipt <i>07' 14' 2014</i>
Mailing Address <i>26 Oak Meadow Ln</i>		Amount of Each Receipt this Period <i>1000.00</i>
City <i>Bellport</i>	State Zip Code <i>NY 11713</i>	
FEC ID number of contributing federal political committee. <i>C</i>		Amount of Each Receipt this Period <i>1000.00</i>
Name of Employer <i>ROS Asset Management</i>	Occupation <i>Financial Consultant</i>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <i>1000.00</i>	

Full Name (Last, First, Middle Initial) <i>Stern, Suzanne</i>		Date of Receipt <i>08' 22' 2014</i>
Mailing Address <i>128 Spring Br</i>		Amount of Each Receipt this Period <i>250.00</i>
City <i>Williamsburg</i>	State Zip Code <i>VA 23185</i>	
FEC ID number of contributing federal political committee. <i>C</i>		Amount of Each Receipt this Period <i>250.00</i>
Name of Employer <i>Kynte Corporation</i>	Occupation <i>Lawyer</i>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <i>250.00</i>	

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

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**ITEMIZED RECEIPTS**

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	<input 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)

Full Name (Last, First, Middle Initial) <i>Struss, Pam</i>		Date of Receipt <i>08'19'2014</i>
Mailing Address <i>250 Main Street</i>		Amount of Each Receipt this Period <i>250.00</i>
City <i>Reedville</i>	State Zip Code <i>VA 22539</i>	
FEC ID number of contributing federal political committee. <i>C</i>		Amount of Each Receipt this Period <i>250.00</i>
Name of Employer <i>George Mason University</i>	Occupation <i>Adjunct Professor</i>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <i>250.00</i>	

Full Name (Last, First, Middle Initial) <i>Thomas, Beverly J. D.</i>		Date of Receipt <i>09'13'2014</i>
Mailing Address <i>705 Pine Crest Dr</i>		Amount of Each Receipt this Period <i>500.00</i>
City <i>Heathsville</i>	State Zip Code <i>VA 22473</i>	
FEC ID number of contributing federal political committee. <i>C</i>		Amount of Each Receipt this Period <i>500.00</i>
Name of Employer <i>Retired</i>	Occupation <i>Retired</i>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <i>500.00</i>	

Full Name (Last, First, Middle Initial) <i>Vanlaningham, Ann</i>		Date of Receipt <i>07'23'2014</i>
Mailing Address <i>PO Box 1039</i>		Amount of Each Receipt this Period <i>100.00</i>
City <i>Mathews</i>	State Zip Code <i>VA 23109</i>	
FEC ID number of contributing federal political committee. <i>C</i>		Amount of Each Receipt this Period <i>400.00</i>
Name of Employer <i>Retired</i>	Occupation <i>Retired</i>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <i>400.00</i>	

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

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**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	OF
<input 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)

Full Name (Last, First, Middle Initial) <i>Wallace, Gloria</i>		Date of Receipt <i>08' 13' 2014</i>
Mailing Address <i>132 Lancaster Dr</i>		Amount of Each Receipt this Period <i>250.00</i>
City <i>Irvington</i>	State <i>NA</i>	
Zip Code <i>22480</i>		
FEC ID number of contributing federal political committee. <i>C</i>		Amount of Each Receipt this Period <i>250.00</i>
Name of Employer <i>Retired</i>	Occupation <i>Retired</i>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <i>250.00</i>	

Full Name (Last, First, Middle Initial) <i>Warren, H. William</i>		Date of Receipt <i>07' 26' 2014</i>
Mailing Address <i>4690 Black Stump Rd</i>		Amount of Each Receipt this Period <i>250.00</i>
City <i>Weems</i>	State <i>VA</i>	
Zip Code <i>22576</i>		
FEC ID number of contributing federal political committee. <i>C</i>		Amount of Each Receipt this Period <i>250.00</i>
Name of Employer <i>Retired</i>	Occupation <i>Retired</i>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <i>250.00</i>	

Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		Amount of Each Receipt this Period
City	State	
Zip Code		
FEC ID number of contributing federal political committee. <i>C</i>		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).....	
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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

  
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