

# 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  
**Stockwell For Congress**

ADDRESS (number and street) 5 Glendale Rod  
 Check if different than previously reported. (ACC) Marblehead MA 01945

2. **FEC IDENTIFICATION NUMBER** ▼ C C00565424 CITY ▲ STATE ▲ ZIP CODE ▲  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A) 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 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 07 / 01 / 2014 through M M / D D / Y Y Y Y 09 / 30 / 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 Mr. Christopher John Stockwell  
Signature of Treasurer Mr. Christopher John Stockwell [Electronically Filed] Date M M / D D / Y Y Y Y 01 / 12 / 2015

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  
**Stockwell For Congress**

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

|   | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)   |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....   | 51940.00                | 54540.00                           |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....   | 0.00                    | 0.00                               |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)).....                            | 51940.00                | 54540.00                           |
| 7. Net Operating Expenditures   |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....  | 37789.23                | 40291.57                           |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....  | 0.00                    | 0.00                               |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)).....                                      | 37789.23                | 40291.57                           |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27).....   | 14248.43                |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D).....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>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

**Stockwell For Congress**

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

| <b>I. RECEIPTS</b>   | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Election Cycle-to-Date</b> |
|--|---------------------------------------|--|
| <b>11. CONTRIBUTIONS (other than loans) FROM:</b>  |                                       |  |
| (a) Individuals/Persons Other Than Political Committees  |                                       |  |
| (i) Itemized (use Schedule A).....   | 21200.00                              | 23800.00                                   |
| (ii) Unitemized.....   | 5715.00                               | 5715.00                                    |
| (iii) TOTAL of contributions from individuals ▶  | 26915.00                              | 29515.00                                   |
| (b) Political Party Committees.....  | 0.00                                  | 0.00                                       |
| (c) Other Political Committees (such as PACs).....   | 0.00                                  | 0.00                                       |
| (d) The Candidate.....   | 25025.00                              | 25025.00                                   |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..                     | 51940.00                              | 54540.00                                   |
| <b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>  | 0.00                                  | 0.00                                       |
| <b>13. LOANS:</b>  |                                       |  |
| (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                                       |
| <b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>                                | 0.00                                  | 0.00                                       |
| <b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>  | 0.00                                  | 0.00                                       |
| <b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b> | 51940.00                              | 54540.00                                   |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....  | 37789.23                      | 40291.57                           |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:   |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....   | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:   |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 0.00                               |
| (b) Political Party Committees.....  | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs).....                        | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 0.00                               |
| 21. OTHER DISBURSEMENTS .....  | 0.00                          | 0.00                               |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 37789.23                      | 40291.57                           |

**III. CASH SUMMARY**

|   |          |
|---|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 97.66    |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 51940.00 |
| 25. SUBTOTAL (add Line 23 and Line 24).....   | 52037.66 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 37789.23 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 14248.43 |

**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 32 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>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)  
**Stockwell For Congress**

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>Erwin Aulis</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>08 / 27 / 2014 |  |
| Mailing Address 2133 N. Magnolia Ave  |  | <b>Transaction ID : SA11AI.4281</b>                      |  |
| City Chicago State IL Zip Code 60614  | Amount of Each Receipt this Period<br>2600.00                              |  |  |
| FEC ID number of contributing federal political committee. C  | Name of Employer Northwood Investors Occupation Real Estate Private Equity |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>2600.00  |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>Mr. John Finn</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>09 / 30 / 2014 |  |
| Mailing Address 132 Indian Creek Rd   |  | <b>Transaction ID : SA11AI.4315</b>                      |  |
| City Ithaca State NY Zip Code 14850   | Amount of Each Receipt this Period<br>250.00         |  |  |
| FEC ID number of contributing federal political committee. C  | Name of Employer GEI Consultants Occupation Engineer |  |  |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>250.00                     |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>Mr. Fred Forsgard</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>07 / 21 / 2014 |  |
| Mailing Address 7 Harris Court  |  | <b>Transaction ID : SA11AI.4233</b>                      |  |
| City marblehead State MA Zip Code 01945   | Amount of Each Receipt this Period<br>250.00           |  |  |
| FEC ID number of contributing federal political committee. C  | Name of Employer Standard Electric Occupation VP Sales |  |  |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>250.00                       |  |  |

|   |             |
|---|-------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 3100.00     |
| <b>TOTAL</b> This Period (last page this line number only)..... | [Empty Box] |

**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 32 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. John A Forster**

Mailing Address 166 Grovers Ave

City Bridgeport State CT Zip Code 06605

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

Name of Employer Self Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 11 / 2014

**Transaction ID : SA11AI.4221**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 14 Summit Rd.

City Marblehead State MA Zip Code 01945

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

Name of Employer Self Occupation Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 10 / 2014

**Transaction ID : SA11AI.4295**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 16 humboldt

City Providence State RI Zip Code 12906

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

Name of Employer Consigli Occupation business development

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 28 / 2014

**Transaction ID : SA11AI.4256**

Amount of Each Receipt this Period  
 500.00

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

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

4100.00

**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 32 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Michael Gatzow**

Mailing Address 5008 Bonnie View Road

City State Zip Code  
Florence WI 54121

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

Name of Employer Occupation  
GEI Consultants Civil Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.4309**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 2113 Oak Hollow Dr.

City State Zip Code  
Plano TX 75093

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

Name of Employer Occupation  
Gerlach & Gerlach, DDS Dentistry

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 05 / 2014

**Transaction ID : SA11AI.4266**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 204-A Hampshire St.

City State Zip Code  
Cambridge MA 03239

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2014

**Transaction ID : SA11AI.4659**

Amount of Each Receipt this Period  
2600.00  
In-kind -

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

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

3100.00

**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 8 OF 32 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Linda L. Hanratty**

Mailing Address 10 Churchill

City State Zip Code  
marblehead MA 01945

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

Name of Employer Occupation  
Self Marketing

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 05 / 2014

**Transaction ID : SA11AI.4192**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Timothy J. Hunt**

Mailing Address 26 Dennet Road

City State Zip Code  
Marblehead MA 01945

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

Name of Employer Occupation  
retired Financial Services

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 16 / 2014

**Transaction ID : SA11AI.4163**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Errol S. Kitt**

Mailing Address 7 Heather Ln.

City State Zip Code  
Lloyd Harbor NY 11743

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

Name of Employer Occupation  
GEI Consultants Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 18 / 2014

**Transaction ID : SA11AI.4178**

Amount of Each Receipt this Period  
250.00

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

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

1000.00

**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 32 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Frank Leathers**

Mailing Address 24 Tufts St.

City Winchester State MA Zip Code 01890

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

Name of Employer GEI Consultants Occupation Civil Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 07 / 2014

**Transaction ID : SA11AI.4319**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 20 Brookdale

City Milford State TN Zip Code 06460

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

Name of Employer Self Occupation Training

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 20 / 2014

**Transaction ID : SA11AI.4229**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 343 Grant Ct.

City Libertyville State IL Zip Code 60048

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

Name of Employer GEI Consultants Occupation Engineering

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 05 / 2014

**Transaction ID : SA11AI.4268**

Amount of Each Receipt this Period  
 250.00

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

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

3100.00

**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 32 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Cary Perry**

Mailing Address 2 Turkey Shore Drive

City Ipswich State MA Zip Code 01945

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

Name of Employer retired Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 25 / 2014

**Transaction ID : SA11AI.4245**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Paul F. Romano**

Mailing Address 44 Highwood Rd

City Farmington State CT Zip Code 06032

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

Name of Employer The Hartford Occupation Insurance

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 25 / 2014

**Transaction ID : SA11AI.4104**

Amount of Each Receipt this Period  
 500.00  
 contribution

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

Mailing Address 635 E Mendocino St

City Altadena State CA Zip Code 91001

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

Name of Employer GEI Consultants Occupation Civil Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.4313**

Amount of Each Receipt this Period  
 250.00

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

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

1250.00

**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 32 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

|   |   |  |   |
|---|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Mr. Frank Schmitz</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>07 / 24 / 2014 |   |
| Mailing Address 3743 N. Greenview   |   | <b>Transaction ID : SA11AI.4237</b>                      |   |
| City<br>Chicago   | State<br>IL                             | Zip Code<br>60613  | Amount of Each Receipt this Period<br>_____ 2600.00 |
| FEC ID number of contributing federal political committee.  |   | C  |   |
| Name of Employer<br>Blackstone Group  | Occupation<br>Real Estate               |  |   |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>_____ 2600.00 |  |   |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Mr. Rex Sessions</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>07 / 21 / 2014 |  |
| Mailing Address 843 West George St.   |  | <b>Transaction ID : SA11AI.4231</b>                      |  |
| City<br>Chicago   | State<br>IL                            | Zip Code<br>60657  | Amount of Each Receipt this Period<br>_____ 250.00 |
| FEC ID number of contributing federal political committee.  |  | C  |  |
| Name of Employer<br>Winston & Strawn  | Occupation<br>Lawyer                   |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>_____ 250.00 |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Mrs. Jay Siegrist</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>09 / 01 / 2014 |  |
| Mailing Address 7 Glendale  |  | <b>Transaction ID : SA11AI.4287</b>                      |  |
| City<br>Marblehead  | State<br>MA                            | Zip Code<br>01945  | Amount of Each Receipt this Period<br>_____ 250.00 |
| FEC ID number of contributing federal political committee.  |  | C  |  |
| Name of Employer<br>State Street Global Advisors  | Occupation<br>Investment Management    |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>_____ 250.00 |  |  |

|   |               |
|---|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | _____ 3100.00 |
| <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 12 OF 32 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Beatrice C. Stockwell**

Mailing Address 26 Waterville Road

City Farmington State CT Zip Code 06032

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

Name of Employer retired Occupation 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  
 07 / 29 / 2014

**Transaction ID : SA11AI.4330**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Philip H. Stockwell**

Mailing Address 32 Melrose Ave.

City Barrington State RI Zip Code 02806

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

Name of Employer Lifespan Occupation MD

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 24 / 2014

**Transaction ID : SA11AI.4279**

Amount of Each Receipt this Period  
450.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Christoher P. Vernon**

Mailing Address 844 polk Blvd

City Des moines State IA Zip Code 50312

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

Name of Employer Vernon Company Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 10 / 2014

**Transaction ID : SA11AI.4219**

Amount of Each Receipt this Period  
500.00

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

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

1950.00

**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 13 OF 32 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. daniel waslo**

Mailing Address 1 Mohawk Road

City State Zip Code  
marblehead MA 01945

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

Name of Employer Occupation  
General Electric Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 21 / 2014

**Transaction ID : SA11AI.4173**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Roger J. Wise**

Mailing Address 28 Churchill Road

City State Zip Code  
Marblehead MA 01945

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

Name of Employer Occupation  
PERICO, INC. Dentist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 18 / 2014

**Transaction ID : SA11AI.4176**

Amount of Each Receipt this Period  
250.00

**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

Amount of Each Receipt this Period

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

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

500.00

21200.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 14 OF 32 |
|   | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Christopher John Stockwell**

Mailing Address 5 Glendale Road

City Marblehead State MA Zip Code 01945

FEC ID number of contributing federal political committee. **C H4MA06124**

Name of Employer GEI Consultants, Inc. Occupation Senior Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
25.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2014

**Transaction ID : SA11D.4216**

Amount of Each Receipt this Period  
 25.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Christopher John Stockwell**

Mailing Address 5 Glendale Road

City Marblehead State MA Zip Code 01945

FEC ID number of contributing federal political committee. **C H4MA06124**

Name of Employer GEI Consultants, Inc. Occupation Senior Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
20025.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2014

**Transaction ID : SA11D.4328**

Amount of Each Receipt this Period  
 20000.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Christopher John Stockwell**

Mailing Address 5 Glendale Road

City Marblehead State MA Zip Code 01945

FEC ID number of contributing federal political committee. **C H4MA06124**

Name of Employer GEI Consultants, Inc. Occupation Senior Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
25025.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11D.4329**

Amount of Each Receipt this Period  
 5000.00

contribution

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

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

25025.00

25025.00

**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 15 OF 32                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. community newspaper</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 11 / 2014                          |
| Mailing Address 254 2nd ave<br>ste 1   |   | Amount of Each Disbursement this Period<br>275.00<br><b>Transaction ID : SB17.4377</b> |
| City<br>needham heights  | State<br>MA   |  |
| Zip Code<br>02494  | Purpose of Disbursement<br>online ad  | Category/<br>Type<br>004   |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Dolphin Yacht Club</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 15 / 2014                         |
| Mailing Address 17 Allerton Place  |   | Amount of Each Disbursement this Period<br>88.20<br><b>Transaction ID : SB17.4349</b> |
| City<br>marblehead   | State<br>MA   |   |
| Zip Code<br>01945  | Purpose of Disbursement<br>Team mtg lunch - chris jason steven dave kevin   | Category/<br>Type<br>001  |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Graphic Group</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 09 / 2014                          |
| Mailing Address 65 Middlesex   |   | Amount of Each Disbursement this Period<br>988.13<br><b>Transaction ID : SB17.4383</b> |
| City<br>Burlington   | State<br>MA   |  |
| Zip Code<br>01803  | Purpose of Disbursement<br>campaign leaflets  | Category/<br>Type<br>004   |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 1351.13 |
| <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:<br>(check only one)  | PAGE 16 OF 32 |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Graphic Group</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 16 / 2014                          |
| Mailing Address 65 Middlesex   |  | Amount of Each Disbursement this Period<br>743.75<br><b>Transaction ID : SB17.4473</b> |
| City<br>Burlington   | State<br>MA  |  |
| Zip Code<br>01803  | Purpose of Disbursement<br>printing, flyers  | Category/<br>Type<br>004   |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Guarino Design</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 10 / 2014                          |
| Mailing Address 204-A Hampshire St.  |  | Amount of Each Disbursement this Period<br>712.50<br><b>Transaction ID : SB17.4426</b> |
| City<br>Cambridge  | State<br>MA  |  |
| Zip Code<br>03239  | Purpose of Disbursement<br>branding design services  | Category/<br>Type<br>006   |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:   |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Guarino Design</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 10 / 2014                           |
| Mailing Address 204-A Hampshire St.  |   | Amount of Each Disbursement this Period<br>2600.00<br><b>Transaction ID : SB17.4660</b> |
| City<br>Cambridge  | State<br>MA   |   |
| Zip Code<br>03239  | Purpose of Disbursement<br>In-kind -  | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 4056.25 |
| <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:<br>(check only one)  | PAGE 17 OF 32 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Guarino Design</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 15 / 2014                          |
| Mailing Address 204-A Hampshire St.  |  | Amount of Each Disbursement this Period<br>712.50<br><b>Transaction ID : SB17.4453</b> |
| City<br>Cambridge  | State<br>MA  |  |
| Purpose of Disbursement<br>brand design fee for services   |  | Category/<br>Type<br>006   |
| Candidate Name<br><b>Stockwell For Congress</b>  |  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: _____   | District: _____  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Guarino Design</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 17 / 2014                          |
| Mailing Address 204-A Hampshire St.  |  | Amount of Each Disbursement this Period<br>250.00<br><b>Transaction ID : SB17.4474</b> |
| City<br>Cambridge  | State<br>MA  |  |
| Purpose of Disbursement<br>graphic design  |  | Category/<br>Type<br>004   |
| Candidate Name<br><b>Stockwell For Congress</b>  |  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: _____   | District: _____  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Jos A Bank</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 15 / 2014                          |
| Mailing Address 450 Paradise   |  | Amount of Each Disbursement this Period<br>308.75<br><b>Transaction ID : SB17.4395</b> |
| City<br>Swampscott   | State<br>MA  |  |
| Purpose of Disbursement<br>clothing candidate, events & canvassings  |  | Category/<br>Type<br>007   |
| Candidate Name<br><b>Stockwell For Congress</b>  |  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: _____   | District: _____  |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 1271.25 |
| <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:<br>(check only one)  | PAGE 18 OF 32 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Ms Linda Killian</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 03 / 2014                                |
| Mailing Address 604 Independence Ave SE   |  | Amount of Each Disbursement this Period<br>1000.00<br><b>Transaction ID : SB17.4433</b> |
| City Washington State DC Zip Code 20003   | Purpose of Disbursement consulting - contractor  |   |
| Candidate Name <b>Stockwell For Congress</b>  |  | Category/Type<br>001  |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Ms. Pam Peak</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 15 / 2014                                |
| Mailing Address 52 manor Avenue Ste. 100  |  | Amount of Each Disbursement this Period<br>1000.00<br><b>Transaction ID : SB17.4454</b> |
| City Wellesley State MA Zip Code 02402  | Purpose of Disbursement retainer, fundraising consulting, \$250/hour   |   |
| Candidate Name <b>Stockwell For Congress</b>  |  | Category/Type<br>001  |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Mr. Richard Rubino</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 09 / 2014                               |
| Mailing Address 1 Abbot St  |  | Amount of Each Disbursement this Period<br>500.00<br><b>Transaction ID : SB17.4463</b> |
| City Marblehead State MA Zip Code 01945   | Purpose of Disbursement copy editing, coaching retainer, \$50 / hour   |  |
| Candidate Name <b>Stockwell For Congress</b>  |  | Category/Type<br>001   |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 2500.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 19 OF 32                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

**A. Sign Depot**

Full Name (Last, First, Middle Initial)  
Mailing Address 1813 E colonial Dr

City Orlando State FL Zip Code 32803

Purpose of Disbursement  
Lawn signs, 2nd purchase (300)

Candidate Name  
**Stockwell For Congress**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
09 / 05 / 2014

Amount of Each Disbursement this Period  
900.00

Transaction ID : SB17.4380

Category/Type  
004

**B. Sign Depot**

Full Name (Last, First, Middle Initial)  
Mailing Address 1813 E colonial Dr

City Orlando State FL Zip Code 32803

Purpose of Disbursement  
campaign signs,

Candidate Name  
**Stockwell For Congress**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
09 / 15 / 2014

Amount of Each Disbursement this Period  
900.00

Transaction ID : SB17.4373

Category/Type  
004

**c. Andrew Smith**

Full Name (Last, First, Middle Initial)  
Mailing Address Ballast way

City Marblehead State MA Zip Code 01945

Purpose of Disbursement  
Contractor, hours July (\$25/hour)

Candidate Name  
**Stockwell For Congress**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
08 / 02 / 2014

Amount of Each Disbursement this Period  
1200.00

Transaction ID : SB17.4437

Category/Type  
001

**SUBTOTAL** of Disbursements This Page (optional)..... 3000.00

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

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

|   |   |               |  |  |  |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 20 OF 32 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Staples, Inc.</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 03 / 2014                         |
| Mailing Address 17 Paradise Road   |  | Amount of Each Disbursement this Period<br>10.61<br><b>Transaction ID : SB17.4420</b> |
| City<br>Salem  | State<br>MA  |   |
| Zip Code<br>01970  | Purpose of Disbursement<br>paper   | Category/<br>Type<br>006  |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:   |   |

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|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Staples, Inc.</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 22 / 2014                         |
| Mailing Address 17 Paradise Road   |  | Amount of Each Disbursement this Period<br>36.21<br><b>Transaction ID : SB17.4398</b> |
| City<br>Salem  | State<br>MA  |   |
| Zip Code<br>01970  | Purpose of Disbursement<br>BW SS P@22 ltr lgl (2)  | Category/<br>Type<br>004  |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:   |   |

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|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Staples, Inc.</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 28 / 2014                         |
| Mailing Address 17 Paradise Road   |  | Amount of Each Disbursement this Period<br>16.79<br><b>Transaction ID : SB17.4414</b> |
| City<br>Salem  | State<br>MA  |   |
| Zip Code<br>01970  | Purpose of Disbursement<br>BW SS P@SS Ltr/LGL - envelopes / pape   | Category/<br>Type<br>004  |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:   |   |

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|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 63.61 |
| <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 32                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Staples, Inc.</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 28 / 2014                              |
| Mailing Address 17 Paradise Road   |  | Amount of Each Disbursement this Period<br>81.32<br><b>Transaction ID : SB17.4422</b> |
| City<br>Salem  | State<br>MA  |   |
| Zip Code<br>01970  | Purpose of Disbursement<br>251-500 BW2 LGL   | Category/<br>Type<br>006  |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:   |   |

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| Full Name (Last, First, Middle Initial)<br><b>B. Staples, Inc.</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 02 / 2014                             |
| Mailing Address 17 Paradise Road   |  | Amount of Each Disbursement this Period<br>7.96<br><b>Transaction ID : SB17.4415</b> |
| City<br>Salem  | State<br>MA  |  |
| Zip Code<br>01970  | Purpose of Disbursement<br>binder  | Category/<br>Type<br>001   |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:   |  |

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|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Staples, Inc.</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 13 / 2014                              |
| Mailing Address 17 Paradise Road   |  | Amount of Each Disbursement this Period<br>43.23<br><b>Transaction ID : SB17.4362</b> |
| City<br>Salem  | State<br>MA  |   |
| Zip Code<br>01970  | Purpose of Disbursement<br>business services   | Category/<br>Type<br>006  |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:   |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 132.51 |
| <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 32                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Staples, Inc.</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 14 / 2014                          |
| Mailing Address 17 Paradise Road   |  | Amount of Each Disbursement this Period<br>521.32<br><b>Transaction ID : SB17.4389</b> |
| City<br>Salem  | State<br>MA  |  |
| Zip Code<br>01970  | Purpose of Disbursement<br>b-cards special, CLR2 premium, copying, labels, envs  | Category/<br>Type<br>003   |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:   |  |

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| Full Name (Last, First, Middle Initial)<br><b>B. Staples, Inc.</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 25 / 2014                          |
| Mailing Address 17 Paradise Road   |  | Amount of Each Disbursement this Period<br>144.44<br><b>Transaction ID : SB17.4397</b> |
| City<br>Salem  | State<br>MA  |  |
| Zip Code<br>01970  | Purpose of Disbursement<br>cards for town events   | Category/<br>Type<br>004   |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:   |  |

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|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Staples, Inc.</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 29 / 2014                          |
| Mailing Address 17 Paradise Road   |  | Amount of Each Disbursement this Period<br>191.40<br><b>Transaction ID : SB17.4370</b> |
| City<br>Salem  | State<br>MA  |  |
| Zip Code<br>01970  | Purpose of Disbursement<br>Invite env, 100qt cutting, 500 clr crd  | Category/<br>Type<br>003   |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 857.16 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 23 OF 32                      |                                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Staples, Inc.</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 09 / 2014                          |
| Mailing Address 17 Paradise Road   |   | Amount of Each Disbursement this Period<br>246.33<br><b>Transaction ID : SB17.4352</b> |
| City<br>Salem  | State<br>MA   |  |
| Zip Code<br>01970  | Purpose of Disbursement<br>OVS semigloss; mount standard, roll...   | Category/<br>Type<br>006   |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

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|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Staples, Inc.</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 10 / 2014                        |
| Mailing Address 17 Paradise Road   |   | Amount of Each Disbursement this Period<br>8.28<br><b>Transaction ID : SB17.4343</b> |
| City<br>Salem  | State<br>MA   |  |
| Zip Code<br>01970  | Purpose of Disbursement<br>Duct Tape  | Category/<br>Type  |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

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|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Staples, Inc.</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 13 / 2014                         |
| Mailing Address 17 Paradise Road   |   | Amount of Each Disbursement this Period<br>19.11<br><b>Transaction ID : SB17.4355</b> |
| City<br>Salem  | State<br>MA   |   |
| Zip Code<br>01970  | Purpose of Disbursement<br>1 Inst. lg pster semi gloss  | Category/<br>Type<br>006  |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 273.72 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 24 OF 32                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Staples, Inc.</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 14 / 2014                          |
| Mailing Address 17 Paradise Road   |   | Amount of Each Disbursement this Period<br>122.36<br><b>Transaction ID : SB17.4354</b> |
| City<br>Salem  | State<br>MA   |  |
| Zip Code<br>01970  | Purpose of Disbursement<br>business cards, 3 sets   | Category/<br>Type<br>006   |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

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| Full Name (Last, First, Middle Initial)<br><b>B. Staples, Inc.</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 25 / 2014                         |
| Mailing Address 17 Paradise Road   |   | Amount of Each Disbursement this Period<br>49.99<br><b>Transaction ID : SB17.4339</b> |
| City<br>Salem  | State<br>MA   |   |
| Zip Code<br>01970  | Purpose of Disbursement<br>Targus 2-in-1 AC-L   | Category/<br>Type<br>006  |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

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|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Staples, Inc.</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 25 / 2014                        |
| Mailing Address 17 Paradise Road   |   | Amount of Each Disbursement this Period<br>2.53<br><b>Transaction ID : SB17.4340</b> |
| City<br>Salem  | State<br>MA   |  |
| Zip Code<br>01970  | Purpose of Disbursement<br>Posterboard 12X22  | Category/<br>Type<br>006   |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 174.88 |
| <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 32                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Mr. Christopher John Stockwell</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 15 / 2014   |
| Mailing Address 5 Glendale Road  |   | Amount of Each Disbursement this Period<br>9,999.99 4549.85<br><b>Transaction ID : SB17.4452</b> |
| City<br>Marblehead   | State<br>MA   |  |
| Zip Code<br>01945  | Purpose of Disbursement<br>Stockwell, expense reimbursement various expenses  | Category/<br>Type<br>001   |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

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| Full Name (Last, First, Middle Initial)<br><b>B. Thomson communications</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 28 / 2014   |
| Mailing Address 100 South Main St.   |   | Amount of Each Disbursement this Period<br>9,999.99 2250.00<br><b>Transaction ID : SB17.4460</b> |
| City<br>Middleton  | State<br>MA   |  |
| Zip Code<br>01949  | Purpose of Disbursement<br>PR firm retainer fee, b-weekly   | Category/<br>Type<br>004   |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Thomson communications</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>09 / 12 / 2014   |
| Mailing Address 100 South Main St.   |   | Amount of Each Disbursement this Period<br>9,999.99 2250.00<br><b>Transaction ID : SB17.4471</b> |
| City<br>Middleton  | State<br>MA   |  |
| Zip Code<br>01949  | Purpose of Disbursement<br>PR firm bi-weekly retainer   | Category/<br>Type<br>004   |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 14<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 9049.85 |
| <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 32                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Ms. Julie Tremmel</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>07 / 19 / 2014                               |
| Mailing Address 12 Messenger ST. Apt 3   |   | Amount of Each Disbursement this Period<br>500.00<br><b>Transaction ID : SB17.4447</b> |
| City<br>Providence   | State<br>RI   |  |
| Zip Code<br>02903-1543   | Purpose of Disbursement<br>contractor   | Category/<br>Type<br>001   |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

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|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Ms. Julie Tremmel</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 02 / 2014                                |
| Mailing Address 12 Messenger ST. Apt 3   |   | Amount of Each Disbursement this Period<br>2000.00<br><b>Transaction ID : SB17.4439</b> |
| City<br>Providence   | State<br>RI   |   |
| Zip Code<br>02903-1543   | Purpose of Disbursement<br>\$50/hour 40 hours, July 2014  | Category/<br>Type<br>001  |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Ms. Julie Tremmel</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 15 / 2014                                |
| Mailing Address 12 Messenger ST. Apt 3   |   | Amount of Each Disbursement this Period<br>1000.00<br><b>Transaction ID : SB17.4450</b> |
| City<br>Providence   | State<br>RI   |   |
| Zip Code<br>02903-1543   | Purpose of Disbursement<br>contractor, PR   | Category/<br>Type<br>001  |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 3500.00 |
| <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:<br>(check only one)          | PAGE 27 OF 32                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. USPS</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 15 / 2014                               |
| Mailing Address 27 Smith St.   |  | Amount of Each Disbursement this Period<br>353.57<br><b>Transaction ID : SB17.4392</b> |
| City<br>Marblehead   | State<br>MA  |  |
| Zip Code<br>01945  | Purpose of Disbursement<br>mailing, fundraising letters  | Category/<br>Type<br>003   |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:   |  |

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|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. USPS</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 15 / 2014                              |
| Mailing Address 27 Smith St.   |   | Amount of Each Disbursement this Period<br>13.44<br><b>Transaction ID : SB17.4393</b> |
| City<br>Marblehead   | State<br>MA   |   |
| Zip Code<br>01945  | Purpose of Disbursement<br>campaign fundraising mailing   | Category/<br>Type<br>003  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

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|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. USPS</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 27 / 2014                              |
| Mailing Address 27 Smith St.   |  | Amount of Each Disbursement this Period<br>96.00<br><b>Transaction ID : SB17.4367</b> |
| City<br>Marblehead   | State<br>MA  |   |
| Zip Code<br>01945  | Purpose of Disbursement<br>PO Box rental, 6 months   | Category/<br>Type<br>003  |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:   |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 463.01 |
| <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:<br>(check only one)                                   | PAGE 28 OF 32   |  |   |  |
|   | <input checked="" type="checkbox"/> 17<br><input type="checkbox"/> 20a | <input type="checkbox"/> 18<br><input type="checkbox"/> 20b | <input type="checkbox"/> 19a<br><input type="checkbox"/> 20c | <input type="checkbox"/> 19b<br><input type="checkbox"/> 21 |  |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. USPS</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 09 / 2014                                |
| Mailing Address 27 Smith St.   |  | Amount of Each Disbursement this Period<br>1110.00<br><b>Transaction ID : SB17.4345</b> |
| City<br>Marblehead   | State<br>MA  |   |
| Zip Code<br>01945  | Purpose of Disbursement<br>stamps  | Category/<br>Type<br>003  |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:   |   |

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|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. USPS</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 17 / 2014                              |
| Mailing Address 27 Smith St.   |  | Amount of Each Disbursement this Period<br>26.46<br><b>Transaction ID : SB17.4353</b> |
| City<br>Marblehead   | State<br>MA  |   |
| Zip Code<br>01945  | Purpose of Disbursement<br>stamps  | Category/<br>Type<br>003  |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:   |   |

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|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. mr. steven waslo</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 30 / 2014                                |
| Mailing Address 1 mohawk dr  |  | Amount of Each Disbursement this Period<br>1165.86<br><b>Transaction ID : SB17.4479</b> |
| City<br>marblehead   | State<br>MA  |   |
| Zip Code<br>01945  | Purpose of Disbursement<br>contractor service, bi-weekly   | Category/<br>Type<br>001  |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:   |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1165.86 |
| <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:<br>(check only one)  | PAGE 29 OF 32 |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Mr. Kevin whitaker</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 21 / 2014                          |
| Mailing Address 10 Liberty Road  |   | Amount of Each Disbursement this Period<br>302.00<br><b>Transaction ID : SB17.4448</b> |
| City<br>Marblehead   | State<br>MA   |  |
| Zip Code<br>01945  | Purpose of Disbursement<br>signature gathering  | Category/<br>Type<br>003   |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

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|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Mr. Kevin whitaker</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 27 / 2014                          |
| Mailing Address 10 Liberty Road  |   | Amount of Each Disbursement this Period<br>370.00<br><b>Transaction ID : SB17.4435</b> |
| City<br>Marblehead   | State<br>MA   |  |
| Zip Code<br>01945  | Purpose of Disbursement<br>sig. gathering   | Category/<br>Type<br>003   |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

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|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Mr. Kevin whitaker</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 10 / 2014                           |
| Mailing Address 10 Liberty Road  |   | Amount of Each Disbursement this Period<br>1000.00<br><b>Transaction ID : SB17.4446</b> |
| City<br>Marblehead   | State<br>MA   |   |
| Zip Code<br>01945  | Purpose of Disbursement<br>contractor payment weekly  | Category/<br>Type<br>001  |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1672.00 |
| <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 32                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Mr. Kevin whitaker</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 15 / 2014                          |
| Mailing Address 10 Liberty Road  |  | Amount of Each Disbursement this Period<br>500.00<br><b>Transaction ID : SB17.4451</b> |
| City<br>Marblehead   | State<br>MA  |  |
| Zip Code<br>01945  | Purpose of Disbursement<br>contractor  | Category/<br>Type<br>001   |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:   |  |

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|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Mr. Kevin whitaker</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 22 / 2014                           |
| Mailing Address 10 Liberty Road  |  | Amount of Each Disbursement this Period<br>1000.00<br><b>Transaction ID : SB17.4456</b> |
| City<br>Marblehead   | State<br>MA  |   |
| Zip Code<br>01945  | Purpose of Disbursement<br>contractor pymnt  | Category/<br>Type<br>001  |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:   |   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Mr. Kevin whitaker</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 28 / 2014                          |
| Mailing Address 10 Liberty Road  |  | Amount of Each Disbursement this Period<br>800.00<br><b>Transaction ID : SB17.4457</b> |
| City<br>Marblehead   | State<br>MA  |  |
| Zip Code<br>01945  | Purpose of Disbursement<br>contractor payment, 4 days not 5 (less \$2000)  | Category/<br>Type<br>001   |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 2300.00 |
| <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:<br>(check only one)          | PAGE 31 OF 32                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Mr. Kevin whitaker</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 05 / 2014                                |
| Mailing Address 10 Liberty Road  |  | Amount of Each Disbursement this Period<br>1000.00<br><b>Transaction ID : SB17.4462</b> |
| City<br>Marblehead   | State<br>MA  |   |
| Purpose of Disbursement<br>contractor weekly pymnt   |  | Category/<br>Type<br>001  |
| Candidate Name<br><b>Stockwell For Congress</b>  |  |   |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State:   | District:  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Mr. Kevin whitaker</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 12 / 2014                                |
| Mailing Address 10 Liberty Road  |  | Amount of Each Disbursement this Period<br>1000.00<br><b>Transaction ID : SB17.4469</b> |
| City<br>Marblehead   | State<br>MA  |   |
| Purpose of Disbursement<br>Whitaker contractor weekly  |  | Category/<br>Type<br>001  |
| Candidate Name<br><b>Stockwell For Congress</b>  |  |   |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State:   | District:  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Mr. Kevin whitaker</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 22 / 2014                                |
| Mailing Address 10 Liberty Road  |  | Amount of Each Disbursement this Period<br>1000.00<br><b>Transaction ID : SB17.4475</b> |
| City<br>Marblehead   | State<br>MA  |   |
| Purpose of Disbursement<br>whitaker contractor payment weekly  |  | Category/<br>Type<br>001  |
| Candidate Name<br><b>Stockwell For Congress</b>  |  |   |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State:   | District:  |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 3000.00 |
| <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:<br>(check only one)          |                                    | PAGE 32 OF 32                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Stockwell For Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Mr. Kevin whitaker</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 23 / 2014                           |
| Mailing Address 10 Liberty Road  |   | Amount of Each Disbursement this Period<br>1000.00<br><b>Transaction ID : SB17.4476</b> |
| City<br>Marblehead   | State<br>MA   |   |
| Zip Code<br>01945  | Purpose of Disbursement<br>whitaker contractor weekly pymt  | Category/<br>Type<br>001  |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

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|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Yankee Homecoming</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 02 / 2014                          |
| Mailing Address P. O. Box 493  |   | Amount of Each Disbursement this Period<br>500.00<br><b>Transaction ID : SB17.4443</b> |
| City<br>Newburyport  | State<br>MA   |  |
| Zip Code<br>01950  | Purpose of Disbursement<br>Yankee Homecoming parade participation fee   | Category/<br>Type<br>004   |
| Candidate Name<br><b>Stockwell For Congress</b>  | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

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

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1500.00  |
| <b>TOTAL</b> This Period (last page this line number only)..... | 36331.43 |