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REPORT OF RECEIPTS AND DISBURSEMENTS

For An A	Offi	Office Use Only			
NAME OF TYPE OR PRING COMMITTEE (in full)	•	cample: If typing, type ver the lines.	12FE4M5		
Jacob Turk for Congress 2014				1	
ADDRESS (number and street)	e Street				
Check if different					
than previously reported. (ACC)	1 1 1 1 1		MO 640	063	
O FEC IDENTIFICATION NUMBER W	CITY ▲		STATE ▲	ZIP CODE ▲	
2. FEC IDENTIFICATION NUMBER ▼				STATE ▼ DISTRICT	
C C00563668	3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	MO 05	
4. TYPE OF REPORT (Choose One)				1	
(a) Quarterly Reports:	(b) 12-Day PRE	-Election Report for the	he:	_	
		Primary (12P)	General (12G)	Runoff (12R)	
April 15 Quarterly Report (Q1)		Convention (12C)	Special (12S)		
July 15 Quarterly Report (Q2)		Convention (120)	Opediai (120)		
October 15 Quarterly Report (Q3)	Election on	M M / D D	/ Y Y Y Y	in the State of	
January 31 Year-End Report (YE)	(c) 30-Day POS	ST-Election Report for	the:		
		General (30G)	Runoff (30R)	Special (30S)	
Termination Report (TER)	Election on	M = M / D = D	/ Y " Y " Y	in the State of	
5. Covering Period 01 / 01 /	Y Y Y Y Y 2019	through	03 / D D / Y	ү ү ү 2019	
I certify that I have examined this Report and to Turk, Donna, Type or Print Name of Treasurer		nowledge and belief it	is true, correct and co	mplete.	
Turk, Donna, , ,		(Flores : II Sil II	Doto 04	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature of Treasurer		[Electronically Filed]	Date		
NOTE: Submission of false, erroneous, or incomple	ete information may	subject the person sign	ning this Report to the p	enalties of 52 U.S.C. §30109	
Office Use Only				FEC FORM 3 (Revised 05/2016)	

SUMMARY PAGE

of Receipts and Disbursements

PAGE 2 / 10

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Jacob Turk for Congress 2014

2019 2019 03 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 9670.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 9670.00 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 680.92 3730.02 (from Line 17) (b) Total Offsets to Operating 656.37 656.37 Expenditures (from Line 14)..... (c) Net Operating Expenditures 24.55 3073.65 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 8850.95 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 926.97 Schedule C and/or Schedule D).....

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 05/2016)

PAGE 3 / 10

Write or Type Committee Name

Jacob Turk for Congress 2014

01 03 01 2019 31 2019 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 0.00 8840.00 (i) Itemized (use Schedule A)..... 830.00 0.00 (ii) Unitemized (iii) TOTAL of contributions 0.00 9670.00 from individuals 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs)..... 0.00 0.00 The Candidate..... (d) TOTAL CONTRIBUTIONS (other than loans) 0.00 (add Lines 11(a)(iii), (b), (c), and (d)).. 9670.00 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES 13. LOANS: (a) Made or Guaranteed by the 0.00 0.00 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 0.00 0.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 656.37 656.37 (Refunds, Rebates, etc.) 15. OTHER RECEIPTS 0.00 0.00 (Dividends, Interest, etc.) 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) 656.37 10326.37 (Carry Total to Line 24, page 4).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 10

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
17.	OPERATING EXPENDITURES	680.92	3730.02		
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00		
10	LOAN REPAYMENTS:				
10.	(a) Of Loans Made or Guaranteed by the Candidate	0.00	2000.00		
	(b) Of All Other Loans	0.00	0.00		
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	2000.00		
20.	REFUNDS OF CONTRIBUTIONS TO:				
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
	(b) Political Party Committees	0.00	0.00		
	(c) Other Political Committees (such as PACs)	0.00	0.00		
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00		
21.	OTHER DISBURSEMENTS	0.00	0.00		
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	680.92	5730.02		
	III. CASH SU	JMMARY			
23.	CASH ON HAND AT BEGINNING OF REPOR	rting period	8875.50		
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	656.37		
25.	SUBTOTAL (add Line 23 and Line 24)		9531.87		
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	680.92		
27.	CASH ON HAND AT CLOSE OF REPORTING	G PERIOD	8850.95		

•						
SCHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 5 OF 10 (check only one)			
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b 11c 11d 11d 12 13a 13b 14 15			
			person for the purpose of soliciting contributions ttee to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) Jacob Turk for Congress 2014						
Full Name (Last, First, Middle Initial) United States Post Office 55121			Date of Receipt			
Mailing Address 3145 LEXINGTON AVE S			02 28 2019			
City Eagan	State MN	Zip Code 55121	Transaction ID : SA14.6996			
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period			
Name of Employer	Occupation	1	596.87			
Receipt For: 2018 Primary General Other (specify) ▼	Election C	ycle-to-Date ▼ 596.87	Memo Item Bulk Mail Deposit Refund			
Full Name (Last, First, Middle Initial)			Date of Receipt			
Mailing Address			M M / D D / Y Y Y Y			
City	State	Zip Code				
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period			
Name of Employer	Occupation	1				
Receipt For: Primary General Other (specify) ▼	Election C	ycle-to-Date	Memo Item			
Full Name (Last, First, Middle Initial)	1		Date of Receipt			
Mailing Address	M = M / D = D / Y = Y = Y					
City	State	Zip Code				
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period			
Name of Employer	Occupation	1				
Receipt For: Primary General Other (specify)	Election C	ycle-to-Date	Memo Item			

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

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

596.87

596.87

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

PAGE 6
FOR LINE NUMBER: (check only one)

×	13a
	13b

OF

10

Transaction ID: SC/10.5048 NAME OF COMMITTEE (In Full) Jacob Turk for Congress 2014 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2018 Memo Item Primary Turk, Jacob, , , General Mailing Address 417 SE Annette Street Other (specify) City State ZIP Code X Personal Funds of the Candidate MO 64063 Lees Summit Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 200.00 0.00 200.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D31 D M 03M Ž017 Y 8/7/2018 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 200.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 7
FOR LINE NUMBER: (check only one)

13a

OF

									130
AME OF COMMITTEE (In Full) Jacob Turk for Congress 20	14				Trans	action II) : SC/10.506	 67	
LOAN SOURCE Full Name (Last, First, Middle Initial) Turk, Jacob, , ,					Memo Iter	X	tion: 2018 Primary General		
Mailing Address 417 SE Annette Street							Other (specif	ý) ▼	
City	City State ZIP Co			de		×	Personal Fu	ınds of the	e Candidate
Lees Summit		МО	64063						
Original Amount of Loan Cumulative Payment To 220.00				Date 0.00		alance O	utstanding a		This Period
TERMS Date Incurred		D	ate Due		Interest Ra	ate		Secur	red:
^M 06 ^M / ^D 30 ^D / ^Y Ž017̇́	Υ	M M / D D	/ Y 8	/7/2018 ^Y		0.00	% (apr)	Y	res 🗶 No
List All Endorsers or Guarantors	(if any) t	o Loan Source							
1. Full Name (Last, First, Middle I	nitial)			Name of Employer					
Mailing Address				Occupation					
				Amount					
City	State	ZIP Code		Guaranteed Outstanding:			1 - 4		
2. Full Name (Last, First, Middle Initial)				Name of Employer					
Mailing Address				Occupation					
City	State	ZIP Code		Amount Guaranteed Outstanding:		,	,		
3. Full Name (Last, First, Middle Initial)				Name of Employer					
Mailing Address				Occupation					
City	State	ZIP Code		Amount Guaranteed Outstanding:		-,	7		
4. Full Name (Last, First, Middle Initial)				Name of Employer					
Mailing Address				Occupation					
				Amount					_
City	State	ZIP Code		Guaranteed Outstanding:	:	7	9	1 /	
SUBTOTALS This Period This Page (optional).				[2	220.00
TOTALS This Period (last page in this					>		7		0.00
Carry outstanding balance only to LII	NE 3. Sch	nedule D. for this	s line. If i	no Schedule	D, carry fo	rward to	o appropriat	e line of	Summarv.
,	-, - 3.				, ,				

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

PAGE 8 OF FOR LINE NUMBER: (check only one)

X 13a 13b

		100			
NAME OF COMMITTEE (In Full) Jacob Turk for Congress 2014		Transaction ID : SC/10.5080			
LOAN SOURCE Full Name (Last, First, N	Aiddle Initial				
Turk, Jacob, , ,	☐ Memo Item				
Mailing Address 417 SE Annette Street		General Other (specify) ▼			
City	State	ZIP Code Personal Funds of the Candidate			
Lees Summit	МО	64063 Personal Funds of the Candidate			
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period			
180.00	,	0.00			
TERMS Date Incurred	[Date Due Interest Rate Secured: (If none, enter 0)			
M09 ^M / D30 ^D / Y Ž017 Y	M M / D D	/ ¥ 8/Ť/20Ť8 ¥ 0.00 % (apr) Yes X No			
List All Endorsers or Guarantors (if any	to Loan Source				
Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City State	ZIP Code	Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)	-	Name of Employer			
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:			
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City State	ZIP Code	Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City State	ZIP Code	Guaranteed Outstanding:			
CURTOTAL C This Deviced This Dame (surfice)	n.				
SOBIOTALS THIS PERIOD THIS Page (optional	SUBTOTALS This Period This Page (optional)				
TOTALS This Period (last page in this line o	nly)	······································			
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.			

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

PAGE 9
FOR LINE NUMBER: (check only one)

: **X** 13a

				,9-	13b		
NAME OF COMMITTEE (In Full) Jacob Turk for Congress 2014			Tra	ansaction I	D : SC/10.5089		
LOAN SOURCE Full Name (Last, First, Mic	☐ Memo	Item Elec	etion: 2018				
Turk, Jacob, , ,	Turk, Jacob, , ,				Primary		
Mailing Address					General Other (specify) ▼		
Mailing Address 417 SE Annette Street				Other (specify) \blacktriangledown			
City	State	ZIP Code	•	×	Personal Funds of the Candidate		
Lees Summit	МО	64063					
Original Amount of Loan	Cumulative Pay	ment To D	ate	Balance (Outstanding at Close of This Period		
56.97			0.00		56.97		
TERMS Date Incurred	D	ate Due	Interes (If none	t Rate , enter 0)	Secured:		
M12M / D30D / Y Ž01Ť Y	M M / D D	/ Y 8/7	7/2018 ^Y	0.00	% (apr) Yes X No		
List All Endorsers or Guarantors (if any) to	o Loan Source						
1. Full Name (Last, First, Middle Initial)		1	Name of Employer				
Mailing Address		(Occupation				
			Amount				
City	ZIP Code		Guaranteed Outstanding:		7		
2. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address			Occupation				
		,	Amount				
City	ZIP Code		Guaranteed Outstanding:	7			
3. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address	Mailing Address			Occupation			
		7	Amount				
City	ZIP Code		Guaranteed Outstanding:	7			
4. Full Name (Last, First, Middle Initial)		ı	Name of Employer				
Mailing Address		(Occupation				
			Amount				
City	ZIP Code		Guaranteed Outstanding:	7			
1							
SUBTOTALS This Period This Page (optional)			······	<u></u>	56.97		
TOTALS This Period (last page in this line only	y)		······		, ,		
Carry outstanding balance only to LINE 3. Sch	nedule D for this	line. If no	Schedule D. carn	v forward t	to appropriate line of Summary		

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

FOR LINE NUMBER: (check only one)

PAGE 10

13a

OF

		100
NAME OF COMMITTEE (In Full) Jacob Turk for Congress 2014		Transaction ID : SC/10.5099
LOAN SOURCE Full Name (Last, First, M	iddla Initial\	
Turk, Jacob, , ,	☐ Memo Item	
Mailing Address 417 SE Annette Street		General Other (specify) ▼
City	State	ZIP Code Personal Funds of the Candidate
Lees Summit	МО	64063 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
270.00		0.00 270.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M03 ^M / D31 ^D / Y Ž018 Y	M M / D D	/ ^Y 8/7/2018 ^Y 0.00
List All Endorsers or Guarantors (if any)	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)		270.00
TOTALS This Period (last page in this line on	ly)	926.97
Carry outstanding balance only to LINE 3, So	chedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.