

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

VAUGHN FOR CONGRESS

ADDRESS (number and street) 2465 CENTREVILLE RD #J17-729

Check if different than previously reported. (ACC)

HERNDON

VA

20171

2. **FEC IDENTIFICATION NUMBER** ▼

C C00492702

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

VA

11

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 Ciindy P. Kinney

Signature of Treasurer Ciindy P. Kinney

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
VAUGHN FOR CONGRESS

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

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)).... | 2753.00 | 94935.25 |
| (b) Total Contribution Refunds (from Line 20(d)) | 0.00 | 100.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 2753.00 | 94835.25 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 28523.86 | 169764.66 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 0.00 | 800.00 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 28523.86 | 168964.66 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 5870.59 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 80000.00 | |

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

VAUGHN FOR CONGRESS

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

| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|---------------------------------------|--|
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 1963.00 | 59477.79 |
| (ii) Unitemized..... | 790.00 | 15457.46 |
| (iii) TOTAL of contributions from individuals ▶ | 2753.00 | 74935.25 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) The Candidate..... | 0.00 | 20000.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 2753.00 | 94935.25 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 0.00 | 80000.00 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 0.00 | 80000.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 0.00 | 800.00 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶ | 2753.00 | 175735.25 |

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 28523.86 | 169764.66 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 100.00 |
| (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 | 100.00 |
| 21. OTHER DISBURSEMENTS | 0.00 | 0.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 28523.86 | 169864.66 |

III. CASH SUMMARY

| | |
|---|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 31641.45 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 2753.00 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 34394.45 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 28523.86 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 5870.59 |

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

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

NAME OF COMMITTEE (In Full)
VAUGHN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Paula Bedner

Mailing Address 2519 Fallon Dr.

City State Zip Code
Oak Hill VA 20171

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

Name of Employer Occupation
GTL Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
333.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 31 / 2012

Transaction ID : SA11AI.5130

Amount of Each Receipt this Period
33.00

In-kind - postage for letter of endorsement

B. Full Name (Last, First, Middle Initial)
James Carson

Mailing Address 1541 Lost Lake Dr

City State Zip Code
Keller TX 76248

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

Name of Employer Occupation
retired actuary

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 07 / 2012

Transaction ID : SA11AI.5088

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Charles Cobb

Mailing Address 14679 Crossfield Way

City State Zip Code
Woodbridge VA 22191

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

Name of Employer Occupation
Longview International Technol Program Manager

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 10 / 2012

Transaction ID : SA11AI.5086

Amount of Each Receipt this Period
250.00

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

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

533.00

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

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

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NAME OF COMMITTEE (In Full)
VAUGHN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
James Derderian

Mailing Address 4720 N. 32nd St

City: Arlington State: VA Zip Code: 22207

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

Name of Employer: Self Occupation: Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 06 / 12 / 2012

Transaction ID : SA11AI.5081

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Bruce Eberle

Mailing Address 1449 Montague Dr

City: Vienna State: VA Zip Code: 22182

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

Name of Employer: Eberle Communications Group Occupation: Direct response fund raising

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 600.00

Date of Receipt: 06 / 26 / 2012

Transaction ID : SA11AI.5078

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Paula King

Mailing Address 8243 Flannigan Mill Rd

City: Mechanicsville State: VA Zip Code: 23111

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

Name of Employer: Hanover County Public Schools Occupation: Substitute Teacher

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 280.00

Date of Receipt: 06 / 12 / 2012

Transaction ID : SA11AI.5135

Amount of Each Receipt this Period: 80.00

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

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

680.00

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

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NAME OF COMMITTEE (In Full)
VAUGHN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mitchell E Norris

Mailing Address 8560 Georgetown Pike

City State Zip Code
McLean VA 22102

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

Name of Employer Occupation
Self Real Estate

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 31 / 2012

Transaction ID : SA11AI.5097

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Pete Owens

Mailing Address 1709 Spring Glen Ln

City State Zip Code
Pearland TX 77581

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

Name of Employer Occupation
self employed IT consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2012

Transaction ID : SA11AI.5087

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 Y Y

Amount of Each Receipt this Period

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

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

750.00

1963.00

**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 8 OF 12 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
VAUGHN FOR CONGRESS

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Chris Farmer | | Date of Disbursement MM / DD / YYYY 06 / 01 / 2012 |
| Mailing Address 4605 Demby St | | Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.5115 |
| City State Zip Code Fairfax VA 22032 | Purpose of Disbursement Consultant - campaign management 001 Category/Type | |
| Candidate Name VAUGHN FOR CONGRESS | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: VA District: 11 | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Constant Contact | | Date of Disbursement MM / DD / YYYY 05 / 29 / 2012 |
| Mailing Address Reservoir Place 1601 Trapelo Rd. | | Amount of Each Disbursement this Period 45.00 Transaction ID : SB17.5110 |
| City State Zip Code Waltham MA 02451 | Purpose of Disbursement email service/donor solicitation 003 Category/Type | |
| Candidate Name VAUGHN FOR CONGRESS | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: VA District: 11 | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) c. Constant Contact | | Date of Disbursement MM / DD / YYYY 06 / 27 / 2012 |
| Mailing Address Reservoir Place 1601 Trapelo Rd. | | Amount of Each Disbursement this Period 45.00 Transaction ID : SB17.5126 |
| City State Zip Code Waltham MA 02451 | Purpose of Disbursement blast email to supporters 001 Category/Type | |
| Candidate Name VAUGHN FOR CONGRESS | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: VA District: 11 | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 2590.00 |
| 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: (check only one) | PAGE 9 OF 12 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
VAUGHN FOR CONGRESS

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Cornerstone Payment Systems | | Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012 |
| Mailing Address 175 Old Meadow Rd. Suite 300 | | Amount of Each Disbursement this Period 291.23 Transaction ID : SB17.5127 |
| City McLean State VA Zip Code 22102 | Purpose of Disbursement Bankcard/merchant fees 001 Category/Type | |
| Candidate Name VAUGHN FOR CONGRESS | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: VA District: 11 | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Cornerstone Payment Systems | | Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2012 |
| Mailing Address 175 Old Meadow Rd. Suite 300 | | Amount of Each Disbursement this Period 77.50 Transaction ID : SB17.5125 |
| City McLean State VA Zip Code 22102 | Purpose of Disbursement pci fee 001 Category/Type | |
| Candidate Name VAUGHN FOR CONGRESS | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: VA District: 11 | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. Harbinger International | | Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2012 |
| Mailing Address 2254 Newcastle Gap Dr | | Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.5132 |
| City Gold River State CA Zip Code 95670 | Purpose of Disbursement Consultant - ecampaign management 001 Category/Type | |
| Candidate Name VAUGHN FOR CONGRESS | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: VA District: 11 | | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 868.73 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 10 OF 12 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
VAUGHN FOR CONGRESS

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. John A. Brice | | Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012 |
| Mailing Address 10410 Main St | | Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.5120 |
| City State Zip Code Fairfax VA 22030 | Purpose of Disbursement Office rent | |
| Candidate Name VAUGHN FOR CONGRESS | | Category/Type 001 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 11 | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Media Press Visual Communications Co. | | Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2012 |
| Mailing Address 6300 Leesburg Pke | | Amount of Each Disbursement this Period 5258.00 Transaction ID : SB17.5133 |
| City State Zip Code Falls Church VA 22044 | Purpose of Disbursement mailers to targeted voter groups | |
| Candidate Name VAUGHN FOR CONGRESS | | Category/Type 006 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 11 | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. PBI | | Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2012 |
| Mailing Address 1 Elmcroft Rd | | Amount of Each Disbursement this Period 20.99 Transaction ID : SB17.5124 |
| City State Zip Code Stamford CT 06926 | Purpose of Disbursement postagw | |
| Candidate Name VAUGHN FOR CONGRESS | | Category/Type 001 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 11 | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 5778.99 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 11 OF 12 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
VAUGHN FOR CONGRESS

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Political Media Inc | | Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012 |
| Mailing Address 406 First Street, SE | | Amount of Each Disbursement this Period 25.00 Transaction ID : SB17.5134 |
| City Washington State DC Zip Code 20003 | Purpose of Disbursement Campaign web site hosting 004 Category/Type | |
| Candidate Name VAUGHN FOR CONGRESS | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: VA District: 11 | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Potomac Strategy Group | | Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012 |
| Mailing Address 1301 Massachusetts Avenue, NO #509 | | Amount of Each Disbursement this Period 3500.00 Transaction ID : SB17.5121 |
| City Washington State DC Zip Code 20005 | Purpose of Disbursement Consultant - campaign management 001 Category/Type | |
| Candidate Name VAUGHN FOR CONGRESS | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: VA District: 11 | | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) c. Targeted Creative Communications, Inc | | Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012 |
| Mailing Address 106 S. Columbus St | | Amount of Each Disbursement this Period 15566.31 Transaction ID : SB17.5116 |
| City Alexandria State VA Zip Code 22314 | Purpose of Disbursement mailings to targeted voters/candidate positions/comparison 006 Category/Type | |
| Candidate Name VAUGHN FOR CONGRESS | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: VA District: 11 | | |

| | |
|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 19091.31 |
| TOTAL This Period (last page this line number only)..... | 28329.03 |

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

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4154**
VAUGHN FOR CONGRESS

| | | |
|--|-------------------------|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) Kenneth L. Vaughn | [PERSONAL FUNDS] | Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 12906 Pinecrest Rd. | | |

| | | |
|---------|-------|----------|
| City | State | ZIP Code |
| Herndon | VA | 20171 |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 80000.00 | 0.00 | 80000.00 |

| | | | | |
|--------------|---------------------------------------|-----------------------------------|---------------|---|
| TERMS | Date Incurred | Date Due | Interest Rate | Secured: |
| | M M / D D / Y Y Y Y 03 / 31 / 2011 | M M / D D / Y Y Y Y 02/28/2013 | % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |

| | |
|--|----------|
| SUBTOTALS This Period This Page (optional)..... | 80000.00 |
| TOTALS This Period (last page in this line only)..... | 80000.00 |

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