

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
Andy Harris for Congress

ADDRESS (number and street) PO Box 604
Bel Air MD 21014
 Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** C C00435974
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
MD 01

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 01 / 01 / 2014 through M M / D D / Y Y Y Y 03 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer James Depew
Signature of Treasurer James Depew [Electronically Filed] Date M M / D D / Y Y Y Y 04 / 15 / 2014

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Andy Harris 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))....	124928.07	793254.04
(b) Total Contribution Refunds (from Line 20(d))	0.00	1000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	124928.07	792254.04
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	57192.70	348097.84
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	4236.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	57192.70	343861.84
8. Cash on Hand at Close of Reporting Period (from Line 27).....	642210.62	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Andy Harris 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).....	70810.00	416257.78
(ii) Unitemized.....	10516.86	83689.08
(iii) TOTAL of contributions from individuals ▶	81326.86	499946.86
(b) Political Party Committees.....	0.00	999.00
(c) Other Political Committees (such as PACs).....	43601.21	292308.18
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	124928.07	793254.04
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	4236.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	232.96	809.37
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	125161.03	798299.41

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	57192.70	348097.84
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	1000.00
21. OTHER DISBURSEMENTS	8000.00	31500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	65192.70	380597.84

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	582242.29
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	125161.03
25. SUBTOTAL (add Line 23 and Line 24).....	707403.32
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	65192.70
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	642210.62

**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 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Dianna Adkison

Mailing Address 5515 Foxfire Ln

City Lohman State MO Zip Code 65053-9665

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

Name of Employer Mid-Missouri Anesthesiology Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 08 / 2014

Transaction ID : 40310.C36786

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Quaison Alleyne

Mailing Address PO Box 3528

City Milton State FL Zip Code 32572-3528

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

Name of Employer Panhandle Medical Services Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : 40409.C36892

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Michael Andersen

Mailing Address PO Box 1591

City Easton State MD Zip Code 21601-8932

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 10 / 2014

Transaction ID : 40217.C36697

Amount of Each Receipt this Period
200.00

Receipt

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

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

1200.00

**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 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
B&D Real Estate, LLC

Mailing Address 1330 Henessy Terrace

City State Zip Code
Sandy Springs MD 20860

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 26 / 2014

Transaction ID : 40303.C36771

Amount of Each Receipt this Period
 Receipt
 250.00

B. Full Name (Last, First, Middle Initial)
William Britt

Mailing Address 1330 Henessy Ter

City State Zip Code
Sandy Spring MD 20860-1201

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

Name of Employer Occupation
IGS, LLC COO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 26 / 2014

Transaction ID : 40303.C36772

Amount of Each Receipt this Period
 Memo
 250.00

[MEMO ITEM]
Partnership->B&D Real Estate, LLC PARTNERSHIP

C. Full Name (Last, First, Middle Initial)
Amir Baluch

Mailing Address 2943 Thomas Ave

City State Zip Code
Dallas TX 75204-1643

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

Name of Employer Occupation
Metropolitan Anes Consultants Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : 40409.C36897

Amount of Each Receipt this Period
 Receipt
 200.00

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

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

450.00

**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 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Richard Bartels

Mailing Address 83 Bryans Mill Way

City State Zip Code
Catonsville MD 21228-5458

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

Name of Employer Occupation
Northrop Grumman Material Specialist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 03 / 2014

Transaction ID : 40203.C36591

Amount of Each Receipt this Period
50.00

Receipt

B. Full Name (Last, First, Middle Initial)
Michael Batza

Mailing Address 501 Fairmount Ave Ste 300

City State Zip Code
Towson MD 21286-5461

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

Name of Employer Occupation
Heritage Properties Inc. Real Estate Development

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 03 / 2014

Transaction ID : 40203.C36572

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Thomas Baxter

Mailing Address 28165 Canterbury Ct

City State Zip Code
Easton MD 21601-8565

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

Name of Employer Occupation
Baxter Enterprises, Inc. President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1850.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 10 / 2014

Transaction ID : 40217.C36674

Amount of Each Receipt this Period
500.00

Receipt

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

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

1550.00

**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 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Curtis Baysinger

Mailing Address PO Box 158201

City Nashville State TN Zip Code 37215-8201

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

Name of Employer Vanderbilt University Medical Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2014

Transaction ID : 40324.C36846

Amount of Each Receipt this Period
 Receipt 250.00

B. Full Name (Last, First, Middle Initial)
Helen Delich Bentley

Mailing Address 2651 Pot Spring Rd

City Luthvle Timon State MD Zip Code 21093-2733

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
267.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2014

Transaction ID : 40331.C36868

Amount of Each Receipt this Period
 Receipt 67.00

C. Full Name (Last, First, Middle Initial)
Daniel Bochicchio

Mailing Address 15306 Carroll Rd

City Monkton State MD Zip Code 21111-2025

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

Name of Employer Dept. Of Veterans Affairs Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2014

Transaction ID : 40324.C36841

Amount of Each Receipt this Period
 Receipt 250.00

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

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

567.00

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

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

FOR LINE NUMBER: PAGE 9 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Robert Bossard

Mailing Address 17210 Meadow Tree Cir

City State Zip Code
Dallas TX 75248-6000

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

Name of Employer Occupation
Pinnacle Partners In Medicine Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : 40113.C36522

Amount of Each Receipt this Period
 Receipt 250.00

B. Full Name (Last, First, Middle Initial)
Mark Brady

Mailing Address 9403 W 146th Pl

City State Zip Code
Overland Park KS 66221-2260

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

Name of Employer Occupation
Midwest Anesthesia Assoc. Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 12 / 2014

Transaction ID : 40317.C36798

Amount of Each Receipt this Period
 Receipt 100.00

C. Full Name (Last, First, Middle Initial)
Thomas Brandon

Mailing Address 1675 Woodbrooke Dr

City State Zip Code
Salisbury MD 21804-8502

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

Name of Employer Occupation
Peninsula Ortho Assoc Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2014

Transaction ID : 40324.C36854

Amount of Each Receipt this Period
 Receipt 500.00

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

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

850.00

**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 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Andrew Brewer

Mailing Address 11626 N 76th Way

City State Zip Code
Scottsdale AZ 85260-5584

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

Name of Employer Occupation
Valley Anesthesia Consultants Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 21 / 2014

Transaction ID : 40324.C36822

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
William Bristor

Mailing Address 3621 Blue Hill Ct

City State Zip Code
Ellicott City MD 21042-3901

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 03 / 2014

Transaction ID : 40210.C36599

Amount of Each Receipt this Period
100.00

Receipt

C. Full Name (Last, First, Middle Initial)
Mark Callahan

Mailing Address 8338 New Bridge Estates Rd

City State Zip Code
Denton MD 21629-1637

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

Name of Employer Occupation
Callahans Gas And Appliance Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 26 / 2014

Transaction ID : 40303.C36763

Amount of Each Receipt this Period
500.00

Receipt

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

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

850.00

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

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

FOR LINE NUMBER: PAGE 11 OF 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Joe Camp

Mailing Address 5613 Riverton Rd

City State Zip Code
Cambridge MD 21613-3547

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 03 2014

Transaction ID : 40203.C36578

Amount of Each Receipt this Period
 100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Frank Campbell

Mailing Address 300 N 4th St

City State Zip Code
Newport PA 17074-1203

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

Name of Employer Occupation
S&H Express Trucking

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
205.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 30 2014

Transaction ID : 40203.C36543

Amount of Each Receipt this Period
 100.00

Receipt

C. Full Name (Last, First, Middle Initial)
William Carder

Mailing Address PO Box 751

City State Zip Code
Ocean City MD 21843-0751

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

Name of Employer Occupation
BJs on the Water Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 03 2014

Transaction ID : 40210.C36608

Amount of Each Receipt this Period
 100.00

Receipt

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

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

300.00

**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 12 OF 100
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Benjamin Chang		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 15731 Seabolt		Transaction ID : 40324.C36848
City Addison	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Univ. of TX SW Medical Center	Occupation Anesthesiologist	Receipt
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200.00	

Full Name (Last, First, Middle Initial) B. Willy Chang		Date of Receipt M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address 209 Brackenwood Ct		Transaction ID : 40217.C36685
City Lutherville Timoni	State MD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer None	Occupation Retired	Receipt
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. Victoria Childs		Date of Receipt M M / D D / Y Y Y Y 02 / 26 / 2014
Mailing Address 363 Sansbury Rd.		Transaction ID : 40303.C36729
City Friendship	State MD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer None	Occupation Retired	Receipt
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Richard China

Mailing Address 1720 Love Point Rd

City State Zip Code
Stevensville MD 21666-2088

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

Name of Employer Occupation
IGS, LLC Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 26 / 2014

Transaction ID : 40303.C36760

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
William Claus

Mailing Address 123 N Lynbrook Rd

City State Zip Code
Bel Air MD 21014-5450

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 03 / 2014

Transaction ID : 40210.C36607

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
Kenneth Cleland

Mailing Address 218 Alynn Way

City State Zip Code
Queenstown MD 21658-1554

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 17 / 2014

Transaction ID : 40324.C36804

Amount of Each Receipt this Period
250.00

Receipt

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

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

700.00

**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 14 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Richard Colavita

Mailing Address 94 Annin Rd

City State Zip Code
Far Hills NJ 07931-2501

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

Name of Employer Occupation
Self Employed Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 21 / 2014

Transaction ID : 40324.C36834

Amount of Each Receipt this Period
125.00

Receipt

B. Full Name (Last, First, Middle Initial)
Nancy Custis

Mailing Address 228 Emerald Hill Dr

City State Zip Code
Fort Washington MD 20744-6225

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 26 / 2014

Transaction ID : 40303.C36736

Amount of Each Receipt this Period
100.00

Receipt

C. Full Name (Last, First, Middle Initial)
Fabrizio Cutrone

Mailing Address 93 Chanteclair Cir

City State Zip Code
Gulf Breeze FL 32561-4068

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

Name of Employer Occupation
Panhandle Medical Services Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 03 / 2014

Transaction ID : 40210.C36596

Amount of Each Receipt this Period
250.00

Receipt

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

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

475.00

**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 15 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Kristina Deason

Mailing Address 601 E 1st St Apt 430

City Fort Worth State TX Zip Code 76102-3206

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

Name of Employer Self Employed Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
01 / 03 / 2014

Transaction ID : 40113.C36528

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Laura Dewitt

Mailing Address 986 N Royal St

City Alexandria State VA Zip Code 22314-1528

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

Name of Employer Fair Oaks Anesthesia Associate Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 07 / 2014

Transaction ID : 40310.C36785

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Peggy Dixon

Mailing Address 9100 Lanseair Farm

City Welcome State MD Zip Code 20693-3402

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 10 / 2014

Transaction ID : 40217.C36696

Amount of Each Receipt this Period
200.00

Receipt

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

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

950.00

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

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

FOR LINE NUMBER: PAGE 16 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Richard Dunn

Mailing Address 444 Poplar Leaf Dr

City Edgewater State MD Zip Code 21037-3215

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 13 / 2014

Transaction ID : 40317.C36800

Amount of Each Receipt this Period
 Receipt 300.00

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

Mailing Address 5910 Providence Country Club Dr

City Charlotte State NC Zip Code 28277-2623

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

Name of Employer Self Employed Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 21 / 2014

Transaction ID : 40324.C36835

Amount of Each Receipt this Period
 Receipt 250.00

C. Full Name (Last, First, Middle Initial)
Rosina Fiore

Mailing Address 3026 Whiteford Rd

City Pylesville State MD Zip Code 21132-1212

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

Name of Employer Fiori Winery Occupation Winemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 03 / 2014

Transaction ID : 40210.C36604

Amount of Each Receipt this Period
 Receipt 250.00

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

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

800.00

**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 17 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Juan Firnhaber

Mailing Address 936 Nottingham Rd

City Greenville State NC Zip Code 27858-6251

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

Name of Employer East Carolina Anesthesia Assoc Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 21 / 2014

Transaction ID : 40324.C36826

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Craig Fisher

Mailing Address 6107 Morningside Ave

City Dallas State TX Zip Code 75214-3037

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

Name of Employer Self Employed Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 08 / 2014

Transaction ID : 40310.C36787

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
William Foard

Mailing Address 11035 York Rd

City Cockeysville State MD Zip Code 21030-2072

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

Name of Employer Valley View Farms Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 03 / 2014

Transaction ID : 40203.C36582

Amount of Each Receipt this Period
250.00

Receipt

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

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

850.00

**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 18 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Michael Fox

Mailing Address 14751 Quito Rd

City State Zip Code
Saratoga CA 95070-6291

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

Name of Employer Occupation
ME Fox CO. Inc. Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 03 / 2014

Transaction ID : 40210.C36606

Amount of Each Receipt this Period
 Receipt 500.00

B. Full Name (Last, First, Middle Initial)
Robert Fox

Mailing Address 1129 Sugarbush Dr

City State Zip Code
Vista CA 92084-6605

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

Name of Employer Occupation
ASMG Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 03 / 2014

Transaction ID : 40203.C36558

Amount of Each Receipt this Period
 Receipt 250.00

C. Full Name (Last, First, Middle Initial)
Marc Freeman

Mailing Address 700 Lawn Ave

City State Zip Code
Sellersville PA 18960-1548

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

Name of Employer Occupation
GVAA Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : 40113.C36519

Amount of Each Receipt this Period
 Receipt 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 19 OF 100			
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
	12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Victor Frenkil

Mailing Address 3850 Butler Rd

City State Zip Code
Glyndon MD 21071

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

Name of Employer Occupation
Jarvis Steel & Lumber President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 10 / 2014

Transaction ID : 40217.C36693

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Mitchell Goetze

Mailing Address 14601 Western Rd

City State Zip Code
Sparks MD 21152-9630

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

Name of Employer Occupation
Goetzes Candy Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 10 / 2014

Transaction ID : 40217.C36677

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Todd Goetze

Mailing Address 1522 Cold Bottom Rd

City State Zip Code
Sparks MD 21152

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 10 / 2014

Transaction ID : 40217.C36678

Amount of Each Receipt this Period
500.00

Receipt

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

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

2000.00

**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 20 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Monte Goldstein

Mailing Address 43 Lady Godiva Way

City State Zip Code
New City NY 10956-6349

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

Name of Employer Occupation
Jandee Anesthesiology Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 21 / 2014

Transaction ID : 40324.C36832

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Sunil Gopal

Mailing Address 79 Laight St Apt 1C

City State Zip Code
New York NY 10013-2000

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

Name of Employer Occupation
Self Employed Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 11 / 2014

Transaction ID : 40317.C36792

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Lawrence Gorfine

Mailing Address 2290 10th Ave N Ste 600

City State Zip Code
Lake Worth FL 33461-6618

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

Name of Employer Occupation
Self Employed Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : 40409.C36893

Amount of Each Receipt this Period
150.00

Receipt

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

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

650.00

**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 21 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Kingdon Gould

Mailing Address 1725 Desales St NW

City Washington State DC Zip Code 20036-4422

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 40407.C36873

Amount of Each Receipt this Period
 Receipt 2500.00

B. Full Name (Last, First, Middle Initial)
Mary Gould

Mailing Address 7861 Murray Hill Rd

City Laurel State MD Zip Code 20723-5716

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 40407.C36872

Amount of Each Receipt this Period
 Receipt 2500.00

C. Full Name (Last, First, Middle Initial)
Grant Grasmick

Mailing Address 6715 Quad Ave

City Baltimore State MD Zip Code 21237-2406

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

Name of Employer Grasmick Lumber Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2014

Transaction ID : 40303.C36726

Amount of Each Receipt this Period
 Receipt 250.00

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

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

5250.00

**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 22 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Frederick Graul

Mailing Address 1125 Woodlyn Rd

City State Zip Code
Annapolis MD 21409-6134

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

Name of Employer Occupation
Grauls Market Grocer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 27 / 2014

Transaction ID : 40331.C36867

Amount of Each Receipt this Period
 Receipt 1000.00

B. Full Name (Last, First, Middle Initial)
Roger Grayson

Mailing Address 38 Diamond Crest Ct

City State Zip Code
Baltimore MD 21209-1500

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

Name of Employer Occupation
Fcaa Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 26 / 2014

Transaction ID : 40303.C36718

Amount of Each Receipt this Period
 Receipt 250.00

C. Full Name (Last, First, Middle Initial)
Joel Greenspan

Mailing Address 6 Oak Ridge Ct

City State Zip Code
Armonk NY 10504-2629

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

Name of Employer Occupation
Self Employed Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 21 / 2014

Transaction ID : 40324.C36836

Amount of Each Receipt this Period
 Receipt 1000.00

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

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

2250.00

**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 23 OF 100
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Steven Grube		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2014	
Mailing Address 13895 Fox Tower Rd		Transaction ID : 40324.C36816	
City Thurmont	State MD	Zip Code 21788-1426	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Fcaa	Occupation Anesthesiologist		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B. John Hamel		Date of Receipt M M / D D / Y Y Y Y 01 / 01 / 2014	
Mailing Address 9633 Old Spring Rd		Transaction ID : 40113.C36523	
City Kensington	State MD	Zip Code 20895-3125	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Meridian Anesthesia	Occupation Anesthesiologist		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) C. Ned Hanna, Jr.		Date of Receipt M M / D D / Y Y Y Y 02 / 03 / 2014	
Mailing Address 15 Warwick Mill Ct		Transaction ID : 40210.C36639	
City Cockeysville	State MD	Zip Code 21030-3616	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00	
Name of Employer Self Employed	Occupation Finance		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 281.00		

SUBTOTAL of Receipts This Page (optional).....	475.00
TOTAL This Period (last page this line number only).....	[]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Ralph Harding

Mailing Address 203 Village Dr

City State Zip Code
Dublin GA 31021-2867

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

Name of Employer Occupation
VA Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
375.00

Date of Receipt
 M M / D D / Y Y Y Y
01 / 03 / 2014

Transaction ID : 40113.C36526

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Nancy Haring

Mailing Address 217 E Thach Ave Apt 6

City State Zip Code
Auburn AL 36830-5462

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

Name of Employer Occupation
Montgomery Anesthesia Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 03 / 2014

Transaction ID : 40203.C36562

Amount of Each Receipt this Period
125.00

Receipt

C. Full Name (Last, First, Middle Initial)
Andras Haris

Mailing Address 2 Weirwood Rd # 7

City State Zip Code
Radnor PA 19087-3717

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

Name of Employer Occupation
Self Employed Dentist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 26 / 2014

Transaction ID : 40303.C36721

Amount of Each Receipt this Period
200.00

Receipt

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

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

575.00

**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 25 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Raymond Haroun

Mailing Address 8217 Pumpkin Hill Ct

City Pikesville	State MD	Zip Code 21208-1872
--------------------	-------------	------------------------

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

Name of Employer Maryland Spine & Brain	Occupation Physician
--	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 01 / 2014

Transaction ID : 40203.C36546

Amount of Each Receipt this Period
 Receipt 250.00

B. Full Name (Last, First, Middle Initial)
Jerrold Harris

Mailing Address 3607 Meekins Neck Rd.

City Church Creek	State MD	Zip Code 21622
----------------------	-------------	-------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014

Transaction ID : 40217.C36663

Amount of Each Receipt this Period
 Receipt 500.00

C. Full Name (Last, First, Middle Initial)
Bart Harrison

Mailing Address 825 Bynum View Ct.

City Aberdeen	State MD	Zip Code 21009-1506
------------------	-------------	------------------------

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

Name of Employer Barco Enterprises Inc.	Occupation Executive
--	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1020.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 27 / 2014

Transaction ID : 40331.C36863

Amount of Each Receipt this Period
 Receipt 500.00

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 26 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Roy Haven

Mailing Address 15508 Langside St

City State Zip Code
Silver Spring MD 20905-4132

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 10 / 2014

Transaction ID : 40217.C36673

Amount of Each Receipt this Period
70.00

Receipt

B. Full Name (Last, First, Middle Initial)
Lawrence Helminiak

Mailing Address 6205 Candle Ct

City State Zip Code
Sykesville MD 21784-8112

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 03 / 2014

Transaction ID : 40210.C36645

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Robert Hewes

Mailing Address 820 Starvegut Ln

City State Zip Code
Kennett Square PA 19348-2528

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

Name of Employer Occupation
Self Employed Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 27 / 2014

Transaction ID : 40331.C36857

Amount of Each Receipt this Period
2500.00

Receipt

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

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

2820.00

**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 27 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
David Hexter

Mailing Address 1405 Tayside Way

City State Zip Code
Bel Air MD 21015-5620

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

Name of Employer Occupation
Mid Atlantic Medical Group Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 20 / 2014

Transaction ID : 40224.C36714

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Jeffrey Holden

Mailing Address PO Box 27616

City State Zip Code
Scottsdale AZ 85255-0143

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

Name of Employer Occupation
Information Requested Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 03 / 2014

Transaction ID : 40203.C36552

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Elaine Holman

Mailing Address 701 Stemmers Run Rd

City State Zip Code
Essex MD 21221-3321

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

Name of Employer Occupation
Self Employed Real Estate Rentals

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 27 / 2014

Transaction ID : 40331.C36855

Amount of Each Receipt this Period
250.00

Receipt

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

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

750.00

**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 28 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Dag Holmsen

Mailing Address 73 Oxen Dr

City State Zip Code
Oakland ME 04963-4654

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

Name of Employer Occupation
Kennebec Anesthesia Associates Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : 40113.C36521

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Joseph Hradsky

Mailing Address 7810 Daniels Ave

City State Zip Code
Parkville MD 21234-5834

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 10 / 2014

Transaction ID : 40217.C36704

Amount of Each Receipt this Period
100.00

Receipt

C. Full Name (Last, First, Middle Initial)
J. Robert Huber

Mailing Address 33 Sunnyview Dr

City State Zip Code
Phoenix MD 21131-2036

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
226.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 10 / 2014

Transaction ID : 40217.C36670

Amount of Each Receipt this Period
114.00

Receipt

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

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

464.00

**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 29 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Donald Hughes

Mailing Address 6 Dellwood Ct

City State Zip Code
Hunt Valley MD 21030-1426

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

Name of Employer Occupation
Camden Partners Holding Llc Investments

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 03 / 2014

Transaction ID : 40210.C36612

Amount of Each Receipt this Period
350.00

Receipt

B. Full Name (Last, First, Middle Initial)
Orville Hughes

Mailing Address 3936 Stansbury Mill Rd

City State Zip Code
Monkton MD 21111-2518

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
257.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 03 / 2014

Transaction ID : 40203.C36565

Amount of Each Receipt this Period
57.00

Receipt

C. Full Name (Last, First, Middle Initial)
Louis IAnderson

Mailing Address 1008 Jackson Blvd

City State Zip Code
Bel Air MD 21014-4516

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

Name of Employer Occupation
US Army Physical Scientist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 10 / 2014

Transaction ID : 40217.C36706

Amount of Each Receipt this Period
250.00

Receipt

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

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

657.00

**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 30 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Shelley Jacks

Mailing Address 421 W Summit Ridge Rd

City State Zip Code
Boise ID 83702-2931

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

Name of Employer Occupation
Boise Anesthesia, Pa Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : 40409.C36887

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Jonathan Jaffe

Mailing Address 311 Hilly Creek Ct

City State Zip Code
Lewisville NC 27023-9806

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

Name of Employer Occupation
Wake Forest Baptist Hospital Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2014

Transaction ID : 40317.C36791

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
Laura Jenkins

Mailing Address PO Box 572

City State Zip Code
Ocean City MD 21843-0572

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

Name of Employer Occupation
Bay Shore Development Administration

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 26 / 2014

Transaction ID : 40303.C36734

Amount of Each Receipt this Period
500.00

Receipt

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

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

950.00

**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 31 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Shirlene Jones

Mailing Address 1510 Crestlin Dr.

City High Point	State NC	Zip Code 27262
--------------------	-------------	-------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 26 / 2014

Transaction ID : 40303.C36764

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Lawrence Julio

Mailing Address 12807 Bridlepath Rd

City Reisterstown	State MD	Zip Code 21136-5642
----------------------	-------------	------------------------

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

Name of Employer Apartment Services, Inc.	Occupation Real Estate Agent
--	---------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 03 / 2014

Transaction ID : 40203.C36573

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Peter Kane

Mailing Address 4462 Lincklaen Rd

City Cazenovia	State NY	Zip Code 13035-9752
-------------------	-------------	------------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : 40409.C36889

Amount of Each Receipt this Period
250.00

Receipt

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

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

1750.00

**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 32 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Laura Kihlstrom

Mailing Address 915 Larchmont Cres

City Norfolk State VA Zip Code 23508-1401

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

Name of Employer Atlantic Anesthesia Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 16 / 2014

Transaction ID : 40317.C36801

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Albert Klerlein

Mailing Address 75 Meadows Rd

City Chesapeake City State MD Zip Code 21915-1700

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

Name of Employer Eagle Erectors Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 26 / 2014

Transaction ID : 40303.C36715

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 1909 Trout Farm Rd

City Jarrettsville State MD Zip Code 21084-2024

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
570.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 03 / 2014

Transaction ID : 40210.C36640

Amount of Each Receipt this Period
114.00

Receipt

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

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

1614.00

**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 33 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Martha Klima

Mailing Address 1403 Newport Pl

City State Zip Code
Lutherville Timoni MD 21093-5920

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
464.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 03 / 2014

Transaction ID : 40203.C36566

Amount of Each Receipt this Period
114.00

Receipt

B. Full Name (Last, First, Middle Initial)
Leonard Kraus, Sr.

Mailing Address 10901 Juniper Rd

City State Zip Code
Kingsville MD 21087-1703

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

Name of Employer Occupation
Leonard A. Kraus Co., Inc. CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 21 / 2014

Transaction ID : 40127.C36538

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Alan Kryz

Mailing Address 1628 Whisper Bay Blvd

City State Zip Code
Gulf Breeze FL 32563-2673

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

Name of Employer Occupation
Panhandle Medical Services Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 21 / 2014

Transaction ID : 40324.C36845

Amount of Each Receipt this Period
1000.00

Receipt

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

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

1614.00

**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 34 OF 100
	<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)
Andy Harris for Congress

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

Mailing Address 103 Colony Pl

City State Zip Code
Bel Air MD 21014-5408

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

Name of Employer Occupation
Patient First Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 31 / 2014

Transaction ID : 40203.C36544

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 2241 Brown Deer Rd

City State Zip Code
Coralville IA 52241-3346

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

Name of Employer Occupation
University of IA Hospital Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 02 / 2014

Transaction ID : 40113.C36524

Amount of Each Receipt this Period
100.00

Receipt

C. Full Name (Last, First, Middle Initial)
Judy Liauw

Mailing Address 24 Highfield Ct

City State Zip Code
Cockeysville MD 21030-3023

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

Name of Employer Occupation
None Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1900.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 05 / 2014

Transaction ID : 40324.C36802

Amount of Each Receipt this Period
1000.00

Receipt

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

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

1350.00

**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 35 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Peter Lorenzi

Mailing Address 601 Oak Farm Ct

City State Zip Code
Luthyle Timon MD 21093-7004

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

Name of Employer Occupation
Loyola College Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 30 / 2014

Transaction ID : 40203.C36542

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Laxmaiah Manchikanti

Mailing Address 2075 Natchez Ln

City State Zip Code
Paducah KY 42001-5415

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : 40317.C36795

Amount of Each Receipt this Period
2000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Sonia Mangum

Mailing Address 200 Bridgeview Ln

City State Zip Code
Stevensville MD 21666-4052

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

Name of Employer Occupation
None Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2450.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 26 / 2014

Transaction ID : 40303.C36762

Amount of Each Receipt this Period
250.00

Receipt

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

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

2500.00

**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 36 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
John Marshall

Mailing Address 5 Bridgewater Ct

City State Zip Code
Reno NV 89509-6828

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

Name of Employer Occupation
Assoc. Anesthesia of Reno Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 03 / 2014

Transaction ID : 40113.C36527

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Cynthia McGinnes

Mailing Address PO Box 640

City State Zip Code
Chestertown MD 21620-0640

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

Name of Employer Occupation
Self Employed Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : 40407.C36877

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 2506 Indian Mound Blvd

City State Zip Code
Monroe LA 71201-2350

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

Name of Employer Occupation
CAMIIMD APMC Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : 40210.C36662

Amount of Each Receipt this Period
250.00

Receipt

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

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

750.00

**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 37 OF 100
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. James Mckee		Date of Receipt M M / D D / Y Y Y Y 02 / 10 / 2014	
Mailing Address 6322 Knoll Hill Dr		Transaction ID : 40217.C36672	
City Berlin	State MD	Zip Code 21811-2525	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 57.00	
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 257.00		

Full Name (Last, First, Middle Initial) B. Herman Mellott		Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2014	
Mailing Address 100 Mellott Dr		Transaction ID : 40331.C36856	
City Warfordsburg	State PA	Zip Code 17267-8555	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 2400.00	
Name of Employer Mellott Co.	Occupation Vice President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2400.00		

Full Name (Last, First, Middle Initial) C. Guy Miller		Date of Receipt M M / D D / Y Y Y Y 03 / 11 / 2014	
Mailing Address 16161 Bachman Ave		Transaction ID : 40317.C36793	
City Monte Sereno	State CA	Zip Code 95030-5207	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 2000.00	
Name of Employer Edison Pharma	Occupation Executive		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

SUBTOTAL of Receipts This Page (optional).....	4457.00
TOTAL 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 38 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Stephen Mnookin

Mailing Address 5976 Miller Landing Cv

City Tallahassee State FL Zip Code 32312-9674

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

Name of Employer Sheridan Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 21 / 2014

Transaction ID : 40324.C36815

Amount of Each Receipt this Period
 Receipt 500.00

B. Full Name (Last, First, Middle Initial)
Nancy Molin

Mailing Address 4488 Laredo Pl

City Billings State MT Zip Code 59106-1364

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

Name of Employer Billings Anesthesiology, PC Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 03 / 2014

Transaction ID : 40203.C36589

Amount of Each Receipt this Period
 Receipt 100.00

C. Full Name (Last, First, Middle Initial)
Carlyle Montanye

Mailing Address PO Box 14

City Glyndon State MD Zip Code 21071-0014

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 26 / 2014

Transaction ID : 40303.C36725

Amount of Each Receipt this Period
 Receipt 500.00

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

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

1100.00

**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 39 OF 100
	<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)
Andy Harris for Congress

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

Mailing Address 329 Wye Harbor Dr

City State Zip Code
Queenstown MD 21658-1638

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

Name of Employer Occupation
Increte Of Maryland, Inc. President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2014

Transaction ID : 40303.C36744

Amount of Each Receipt this Period
 Receipt 1000.00

B. Full Name (Last, First, Middle Initial)
Mario Morenas

Mailing Address 21491 N 4028 Dr

City State Zip Code
Bartlesville OK 74006-0707

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

Name of Employer Occupation
Bartlesville Anesthesia Partne Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2014

Transaction ID : 40324.C36828

Amount of Each Receipt this Period
 Receipt 200.00

C. Full Name (Last, First, Middle Initial)
Martin Morin

Mailing Address 118 Andrew Ct

City State Zip Code
Centreville MD 21617-2538

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

Name of Employer Occupation
Self Employed Veterinarian

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2014

Transaction ID : 40303.C36745

Amount of Each Receipt this Period
 Receipt 1600.00

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

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

2800.00

**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 40 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Jeff Mortier

Mailing Address 3962 Georgetown Ct NW

City Washington State DC Zip Code 20007-2127

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

Name of Employer Ryan MacKinnon et al Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2014

Transaction ID : 40324.C36809

Amount of Each Receipt this Period
 Receipt 1000.00

B. Full Name (Last, First, Middle Initial)
William Moss

Mailing Address 3142 Rock Park Dr

City Fort Collins State CO Zip Code 80528-9483

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

Name of Employer Northern CO Anesthesia Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 14 / 2014

Transaction ID : 40120.C36537

Amount of Each Receipt this Period
 Receipt 250.00

C. Full Name (Last, First, Middle Initial)
William Moss

Mailing Address 3142 Rock Park Dr

City Fort Collins State CO Zip Code 80528-9483

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

Name of Employer Northern CO Anesthesia Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 07 / 2014

Transaction ID : 40310.C36784

Amount of Each Receipt this Period
 Receipt 500.00

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 41 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Frank Moya

Mailing Address 1450 Madruga Ave Ste 207

City State Zip Code
Coral Gables FL 33146-3163

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 21 / 2014

Transaction ID : 40324.C36852

Amount of Each Receipt this Period
 Receipt 500.00

B. Full Name (Last, First, Middle Initial)
Snehal Munshi

Mailing Address 9608 Amberleigh Ln Apt K

City State Zip Code
Perry Hall MD 21128-9695

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
307.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 26 / 2014

Transaction ID : 40303.C36717

Amount of Each Receipt this Period
 Receipt 57.00

C. Full Name (Last, First, Middle Initial)
Emery Navori

Mailing Address 412 S Paloma Pl

City State Zip Code
Tampa FL 33609

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

Name of Employer Occupation
Self Employed Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 21 / 2014

Transaction ID : 40324.C36818

Amount of Each Receipt this Period
 Receipt 250.00

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

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

807.00

**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 42 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
John Neeld

Mailing Address 3025 River North Pkwy NW

City Atlanta State GA Zip Code 30328-1117

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

Name of Employer Northside Pain Clinic Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 21 / 2014

Transaction ID : 40324.C36825

Amount of Each Receipt this Period
 Receipt **250.00**

B. Full Name (Last, First, Middle Initial)
David Nieglos

Mailing Address 912 White Marlin Way

City Annapolis State MD Zip Code 21409-5753

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

Name of Employer Anesthesia Company Llc Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 21 / 2014

Transaction ID : 40324.C36814

Amount of Each Receipt this Period
 Receipt **150.00**

C. Full Name (Last, First, Middle Initial)
Lucas Njo

Mailing Address PO Box 630814

City Irving State TX Zip Code 75063-0028

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

Name of Employer Pinnacle Occupation Healthcare Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 26 / 2014

Transaction ID : 40303.C36742

Amount of Each Receipt this Period
 Receipt **250.00**

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

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

650.00

**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 43 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Karen Oertel

Mailing Address 2308 Bloomingdale Rd

City	State	Zip Code
Centreville	MD	21617-1766

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

Name of Employer	Occupation
None	Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
406.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 10 / 2014

Transaction ID : 40217.C36703

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Karen Oertel

Mailing Address 2308 Bloomingdale Rd

City	State	Zip Code
Centreville	MD	21617-1766

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

Name of Employer	Occupation
None	Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
456.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 26 / 2014

Transaction ID : 40303.C36758

Amount of Each Receipt this Period
50.00

Receipt

C. Full Name (Last, First, Middle Initial)
Lufti On

Mailing Address 6336 Guilford Rd

City	State	Zip Code
Clarksville	MD	21029-1523

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

Name of Employer	Occupation
Luftis International Hair Des	Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : 40409.C36904

Amount of Each Receipt this Period
1500.00

Receipt

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

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

1800.00

**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 44 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
John Orzechowski

Mailing Address 203 Beck Farm Rd

City State Zip Code
Centreville MD 21617-2115

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 26 / 2014

Transaction ID : 40303.C36751

Amount of Each Receipt this Period
 Receipt 100.00

B. Full Name (Last, First, Middle Initial)
Murat Ozbas

Mailing Address 7602 Reserve Cir Apt 301

City State Zip Code
Windsor Mill MD 21244-1615

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

Name of Employer Occupation
GSE Systems Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 25 / 2014

Transaction ID : 40331.C36871

Amount of Each Receipt this Period
 Receipt 1000.00

C. Full Name (Last, First, Middle Initial)
Mary Peterson

Mailing Address 210 Naples St

City State Zip Code
Corpus Christi TX 78404-1831

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

Name of Employer Occupation
Driscoll Childrens Hospital Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 21 / 2014

Transaction ID : 40324.C36849

Amount of Each Receipt this Period
 Receipt 125.00

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

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

1225.00

**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 45 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Cathy Petty

Mailing Address 915 N Briarcliff Cir

City State Zip Code
Maryville TN 37803-6465

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Maryville Anesthesiologists Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : 40324.C36831

Amount of Each Receipt this Period

Receipt

B. Full Name (Last, First, Middle Initial)
Jeffrey Philip

Mailing Address 4549 Raynor Ct

City State Zip Code
Mason OH 45040-4629

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Self Employed Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : 40324.C36823

Amount of Each Receipt this Period

Receipt

C. Full Name (Last, First, Middle Initial)
Albert Phillips

Mailing Address 118 Riverside Dr

City State Zip Code
Cambridge MD 21613-1247

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : 40210.C36600

Amount of Each Receipt this Period

Receipt

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Richard Pollard

Mailing Address 6900 Sherwood Rd

City State Zip Code
Idlewyld MD 21239-1336

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

Name of Employer Occupation
Pollards Towing Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 03 / 2014

Transaction ID : 40210.C36644

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Douglas Price

Mailing Address PO Box 990

City State Zip Code
Chestertown MD 21620-0990

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

Name of Employer Occupation
Self Employed Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3100.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 03 / 2014

Transaction ID : 40203.C36585

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Daniel Protani

Mailing Address 504 Hampton Ln # A

City State Zip Code
Towson MD 21286-1310

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
243.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 03 / 2014

Transaction ID : 40203.C36568

Amount of Each Receipt this Period
57.00

Receipt

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

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

807.00

**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 47 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
William Queale

Mailing Address 2603 Colpepper Rd

City Abingdon State MD Zip Code 21009-1582

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

Name of Employer Personal Healthcare Providers Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1125.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 26 / 2014

Transaction ID : 40303.C36739

Amount of Each Receipt this Period
 Receipt 1000.00

B. Full Name (Last, First, Middle Initial)
Jeanne Ann Rea

Mailing Address PO Box 70

City Summit State MS Zip Code 39666-0070

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

Name of Employer Self Employed Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 03 / 2014

Transaction ID : 40203.C36556

Amount of Each Receipt this Period
 Receipt 250.00

C. Full Name (Last, First, Middle Initial)
Jon Rees

Mailing Address 109 Central Parke E

City Ocean Pines State MD Zip Code 21811-3213

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 17 / 2014

Transaction ID : 40324.C36803

Amount of Each Receipt this Period
 Receipt 25.00

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

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

1275.00

**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 48 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Jon Rees

Mailing Address 109 Central Parke E

City State Zip Code
Ocean Pines MD 21811-3213

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

Name of Employer Occupation Information Requested
Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : 40409.C36900

Amount of Each Receipt this Period
25.00

Receipt

B. Full Name (Last, First, Middle Initial)
Diane Rhinehart

Mailing Address 1600 Angleside Rd

City State Zip Code
Fallston MD 21047-1744

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

Name of Employer Occupation Information Requested
Rhinehart Railroad Con., Inc. Railroad Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 26 / 2014

Transaction ID : 40303.C36728

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Jason Rigol

Mailing Address 3117 Palm Vista Dr

City State Zip Code
Metairie LA 70003-2563

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

Name of Employer Occupation Information Requested
Self Employed Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 29 / 2014

Transaction ID : 40203.C36541

Amount of Each Receipt this Period
250.00

Receipt

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

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

1275.00

**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 49 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Timothy Robinson

Mailing Address 2212 Dalewood Rd

City State Zip Code
Timonium MD 21093-2703

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
408.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 06 / 2014

Transaction ID : 40210.C36661

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Henry Rosenberg

Mailing Address 1 N Charles St Fl 22

City State Zip Code
Baltimore MD 21201-3740

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

Name of Employer Occupation
Rosemore, Inc. Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 10 / 2014

Transaction ID : 40217.C36676

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Stanford Rothschild

Mailing Address 1122 Kenilworth Dr Ste 317

City State Zip Code
Towson MD 21204-2146

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

Name of Employer Occupation
Rothschild Capital Mgmt Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 27 / 2014

Transaction ID : 40331.C36862

Amount of Each Receipt this Period
500.00

Receipt

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 50 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Stephen Salamon

Mailing Address PO Box 4252

City State Zip Code
Luthvle Timon MD 21094-4252

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

Name of Employer Occupation
HealthPlan Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2100.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 26 / 2014

Transaction ID : 40303.C36740

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Donn Salvosa

Mailing Address 9911 Oak Branch Dr

City State Zip Code
Vienna VA 22181-5333

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : 40407.C36879

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Bohdan Shandor

Mailing Address 125 Mesa Verde Ct

City State Zip Code
Holmdel NJ 07733-2516

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

Name of Employer Occupation
Self Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 10 / 2014

Transaction ID : 40217.C36700

Amount of Each Receipt this Period
100.00

Receipt

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

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

450.00

**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 51 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Seung Sim

Mailing Address 10808 Hoosier Rd

City Fishers State IN Zip Code 46037-9588

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

Name of Employer Orthoindy Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 21 / 2014

Transaction ID : 40324.C36843

Amount of Each Receipt this Period
 Receipt **250.00**

B. Full Name (Last, First, Middle Initial)
Kirsten Simanonok

Mailing Address N78W14573 Appleton Ave # 212

City Menomonee Falls State WI Zip Code 53051-4382

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

Name of Employer Self Employed Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 31 / 2014

Transaction ID : 40210.C36655

Amount of Each Receipt this Period
 Receipt **50.00**

C. Full Name (Last, First, Middle Initial)
Kirsten Simanonok

Mailing Address N78W14573 Appleton Ave # 212

City Menomonee Falls State WI Zip Code 53051-4382

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

Name of Employer Self Employed Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

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

Transaction ID : 40317.C36797

Amount of Each Receipt this Period
 Receipt **50.00**

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

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

350.00

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

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

FOR LINE NUMBER: PAGE 52 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Kirsten Simanonok

Mailing Address N78W14573 Appleton Ave # 212

City State Zip Code
Menomonee Falls WI 53051-4382

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

Name of Employer Occupation
Self Employed Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 40409.C36885

Amount of Each Receipt this Period
 Receipt 50.00

B. Full Name (Last, First, Middle Initial)
Karen Slack

Mailing Address 1316 W Swann Ave

City State Zip Code
Tampa FL 33606-2531

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

Name of Employer Occupation
Millennium Anesthesia Care Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 22 / 2014

Transaction ID : 40324.C36853

Amount of Each Receipt this Period
 Receipt 250.00

C. Full Name (Last, First, Middle Initial)
Kevin Speight

Mailing Address 753 Medinah Dr

City State Zip Code
Winston Salem NC 27107-6027

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

Name of Employer Occupation
Carolina Anesthesia Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2014

Transaction ID : 40303.C36767

Amount of Each Receipt this Period
 Receipt 500.00

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

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

800.00

**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 53 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Peter Staats

Mailing Address 47 Orchard Ln

City State Zip Code
Colts Neck NJ 07722-1569

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

Name of Employer Occupation
Premier Pain Centers LLC Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2014

Transaction ID : 40317.C36790

Amount of Each Receipt this Period
2000.00

Receipt

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

Mailing Address 1937 Day Island Blvd W

City State Zip Code
University Place WA 98466-1807

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

Name of Employer Occupation
Tacoma Anesthesia Assoc. Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 27 / 2014

Transaction ID : 40331.C36858

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Richard Stark

Mailing Address 915 E Eagle Lake Dr

City State Zip Code
Kalamazoo MI 49009-8426

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

Name of Employer Occupation
Kalamazoo Anesthesiology Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 10 / 2014

Transaction ID : 40217.C36705

Amount of Each Receipt this Period
500.00

Receipt

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

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

2750.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 54 OF 100

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Thomas Stephenson

Mailing Address 429 Sherwood Rd

City State Zip Code
 Cockeysville MD 21030-2635

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

Name of Employer Occupation
 None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 386.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 03 2014

Transaction ID : 40210.C36598

Amount of Each Receipt this Period
 100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Lois Y. Stoltze

Mailing Address 2219 200th St

City State Zip Code
 Boone IA 50036-7433

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

Name of Employer Occupation
 McFarland Clinics Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 03 2014

Transaction ID : 40203.C36557

Amount of Each Receipt this Period
 250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Johan P Suyderhoud

Mailing Address 3467 N Venice St

City State Zip Code
 Arlington VA 22207-4446

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

Name of Employer Occupation
 Georgetown University Hospital Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 31 2014

Transaction ID : 40409.C36895

Amount of Each Receipt this Period
 250.00

Receipt

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

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

600.00

**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 55 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Mary Szyperski

Mailing Address 332 Marganza S

City Laurel State MD Zip Code 20724-2406

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 03 / 2014

Transaction ID : 40210.C36605

Amount of Each Receipt this Period
 Receipt **100.00**

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

Mailing Address 1428C W Joppa Rd

City Ruxton State MD Zip Code 21204-3618

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

Name of Employer Thompson & Sjaarda, P.a. Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 11 / 2014

Transaction ID : 40217.C36708

Amount of Each Receipt this Period
 Receipt **250.00**

C. Full Name (Last, First, Middle Initial)
Ahmet Topcu

Mailing Address 1853 Quebec St

City Severn State MD Zip Code 21144-1545

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

Name of Employer Granix Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 40409.C36903

Amount of Each Receipt this Period
 Receipt **2000.00**

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

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

2350.00

**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 56 OF 100
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) Donald Trump		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 725 5th Ave		Transaction ID : 40409.C36909
City New York	State NY	Zip Code 10022-2519
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer The Trump Organization	Occupation Chairman	Receipt
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Gary Tzeng		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 582 S Rex Blvd		Transaction ID : 40324.C36820
City Elmhurst	State IL	Zip Code 60126-4259
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer DVA	Occupation Physician	Receipt
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) John Ulatowski		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address PO Box 38367		Transaction ID : 40324.C36840
City Baltimore	State MD	Zip Code 21231-8367
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Johns Hopkins	Occupation Physician	Receipt
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Patrick Ulrich

Mailing Address 184 Catswamp Rd

City Elkton State MD Zip Code 21921-2937

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

Name of Employer Ulrich Rentals Occupation Property Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **796.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 03 / 2014

Transaction ID : 40210.C36610

Amount of Each Receipt this Period
114.00

Receipt

B. Full Name (Last, First, Middle Initial)
Donald Walbert

Mailing Address 109 Windsor Rd

City Queenstown State MD Zip Code 21658-1180

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1040.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2014

Transaction ID : 40303.C36757

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Mark Warburton

Mailing Address 1036 Rockford Rd

City High Point State NC Zip Code 27262-3606

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2014

Transaction ID : 40303.C36766

Amount of Each Receipt this Period
200.00

Receipt

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

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

1314.00

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

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

FOR LINE NUMBER: PAGE 58 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Lucy Waskell

Mailing Address 2204 Devonshire Rd

City State Zip Code
Ann Arbor MI 48104-2702

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

Name of Employer Occupation
University of Michigan Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 26 / 2014

Transaction ID : 40303.C36769

Amount of Each Receipt this Period
 Receipt 100.00

B. Full Name (Last, First, Middle Initial)
Scott Worrell

Mailing Address 11110 Medical Campus Rd

City State Zip Code
Hagerstown MD 21742-6700

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

Name of Employer Occupation
Robinwood Orthopaedics Orthopaedic Surgeon

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : 40407.C36878

Amount of Each Receipt this Period
 Receipt 500.00

C. Full Name (Last, First, Middle Initial)
Yue-cheng Yang

Mailing Address 3420 N Trail Way

City State Zip Code
Baltimore MD 21234-1249

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

Name of Employer Occupation
Johns Hopkins Health System Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
787.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 03 / 2014

Transaction ID : 40210.C36642

Amount of Each Receipt this Period
 Receipt 114.00

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

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

714.00

**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 59 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Stephen Zarrelli

Mailing Address 276 Jefferson PI

City State Zip Code
Bethlehem PA 18020-8974

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

Name of Employer Occupation
Professional Anesthesia Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 16 / 2014

Transaction ID : 40217.C36711

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Charles Zeiler

Mailing Address 8601 La Salle Rd Ste 109

City State Zip Code
Towson MD 21286-2005

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 26 / 2014

Transaction ID : 40303.C36737

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
Jolanda Zickmann

Mailing Address 88 Mulberry HI

City State Zip Code
Hamden CT 06517-3530

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

Name of Employer Occupation
Emcare Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : 40203.C36547

Amount of Each Receipt this Period
250.00

Receipt

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

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

700.00

**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 60 OF 100
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Jolanda Zickmann

Mailing Address 88 Mulberry HI

City Hamden State CT Zip Code 06517-3530

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

Name of Employer Emcare Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 21 / 2014

Transaction ID : 40324.C36847

Amount of Each Receipt this Period
125.00

Receipt

B. Full Name (Last, First, Middle Initial)
William G. Zitzmann

Mailing Address 8 Ruxlea Ct

City Ruxton State MD Zip Code 21204-6401

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

Name of Employer Physician Anesthesia Assoc. Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 26 / 2014

Transaction ID : 40303.C36719

Amount of Each Receipt this Period
100.00

Receipt

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 M / D 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).....

225.00

70810.00

**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 61 OF 100
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
ACSPA - Surgeons PAC

Mailing Address 20 F St NW Ste 1000

City Washington State DC Zip Code 20001-6701

FEC ID number of contributing federal political committee. **C C00382424**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2014

Transaction ID : 40324.C36811

Amount of Each Receipt this Period
2000.00

Receipt

B. Full Name (Last, First, Middle Initial)
American Academy Family Physicians PAC

Mailing Address 1133 Connecticut Ave NW Ste 1100

City Washington State DC Zip Code 20036-4342

FEC ID number of contributing federal political committee. **C C00411553**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2014

Transaction ID : 40324.C36810

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
American College of Cardiology PAC

Mailing Address 2400 N St NW

City Washington State DC Zip Code 20037-1153

FEC ID number of contributing federal political committee. **C C00375360**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 40409.C36906

Amount of Each Receipt this Period
2500.00

Receipt

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

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

5500.00

**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 62 OF 100
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
American College of Radiology PAC

Mailing Address 1891 Preston White Dr

City Reston State VA Zip Code 20191-4326

FEC ID number of contributing federal political committee. **C C00343459**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 07 / 2014

Transaction ID : 40310.C36779

Amount of Each Receipt this Period
2500.00

Receipt

B. Full Name (Last, First, Middle Initial)
American Maritime Officers Voluntary PAC

Mailing Address PO Box 66

City Dania State FL Zip Code 33004-0066

FEC ID number of contributing federal political committee. **C C00027532**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : 40409.C36908

Amount of Each Receipt this Period
2500.00

Receipt

C. Full Name (Last, First, Middle Initial)
American Society of Interventional Pain

Mailing Address Physicians PAC
2831 Lone Oak Rd

City Paducah State KY Zip Code 42003-8041

FEC ID number of contributing federal political committee. **C C00351197**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : 40317.C36796

Amount of Each Receipt this Period
5000.00

Receipt

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

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

10000.00

**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 63 OF 100
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Associated Builders & Contractors PAC

Mailing Address 440 1st St NW Ste 200

City Washington State DC Zip Code 20001-2028

FEC ID number of contributing federal political committee. **C C00010421**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2014

Transaction ID : 40331.C36870

Amount of Each Receipt this Period
2500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Brain PAC

Mailing Address 1080 Montreal Ave

City Saint Paul State MN Zip Code 55116-2386

FEC ID number of contributing federal political committee. **C C00435933**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2014

Transaction ID : 40324.C36813

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Cigar-PAC

Mailing Address 818 Connecticut Ave NW Ste 200

City Washington State DC Zip Code 20006-2742

FEC ID number of contributing federal political committee. **C C00121350**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2014

Transaction ID : 40224.C36713

Amount of Each Receipt this Period
500.00

Receipt

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 64 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Citizens for Vito Tinelli

Mailing Address PO Box 5

City State Zip Code
Centreville MD 21617

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2014

Transaction ID : 40303.C36748

Amount of Each Receipt this Period
 Receipt 57.00

NOTE: PERMISSIBLE FUNDS

B. Full Name (Last, First, Middle Initial)
CONCRETEPAC

Mailing Address 900 Spring St

City State Zip Code
Silver Spring MD 20910-4015

FEC ID number of contributing federal political committee. **C** C00114025

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2014

Transaction ID : 40303.C36727

Amount of Each Receipt this Period
 Receipt 2000.00

C. Full Name (Last, First, Middle Initial)
Diageo North America, Inc. Employees PAC

Mailing Address 801 Main Ave

City State Zip Code
Norwalk CT 06851-1127

FEC ID number of contributing federal political committee. **C** C00034470

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2014

Transaction ID : 40317.C36794

Amount of Each Receipt this Period
 In-Kind 1044.21
 Event Catering/Facility Rental 3179.90

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

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

3101.21

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

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

FOR LINE NUMBER: PAGE 65 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Employees of Northrop Grumman PAC

Mailing Address 3699 Wilshire Blvd Ste 1290

City Los Angeles State CA Zip Code 90010-2732

FEC ID number of contributing federal political committee. **C C00088591**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 07 / 2014

Transaction ID : 40310.C36776

Amount of Each Receipt this Period
 _____ 2000.00

Receipt

B. Full Name (Last, First, Middle Initial)
ENT PAC American Acad of Otolaryngology

Mailing Address 1650 Diagonal Rd

City Alexandria State VA Zip Code 22314-2857

FEC ID number of contributing federal political committee. **C C00306449**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 40409.C36905

Amount of Each Receipt this Period
 _____ 2500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Exelon PAC

Mailing Address PO Box 805379

City Chicago State IL Zip Code 60680-4179

FEC ID number of contributing federal political committee. **C C00141218**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 07 / 2014

Transaction ID : 40310.C36775

Amount of Each Receipt this Period
 _____ 1000.00

Receipt

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

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

_____ 5500.00

**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 66 OF 100
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Lockheed Martin Employees PAC

Mailing Address 2121 Crystal Dr Ste 100

City State Zip Code
Arlington VA 22202-3706

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2014

Transaction ID : 40331.C36869

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Lorillard Tobacco PAC

Mailing Address 714 Green Valley Rd

City State Zip Code
Greensboro NC 27408-7018

FEC ID number of contributing federal political committee. **C C00112888**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 07 / 2014

Transaction ID : 40310.C36777

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
National Emergency Medicine PAC

Mailing Address 1125 Executive Cir

City State Zip Code
Irving TX 75038-2522

FEC ID number of contributing federal political committee. **C C00140061**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 07 / 2014

Transaction ID : 40310.C36778

Amount of Each Receipt this Period
1500.00

Receipt

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

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

3500.00

**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 67 OF 100
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Orbital Sciences Corp. PAC

Mailing Address 21839 Atlantic Blvd

City Sterling State VA Zip Code 20166-6850

FEC ID number of contributing federal political committee. **C** C00195263

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 16 / 2014

Transaction ID : 40120.C36535

Amount of Each Receipt this Period
 1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Orbital Sciences Corp. PAC

Mailing Address 21839 Atlantic Blvd

City Sterling State VA Zip Code 20166-6850

FEC ID number of contributing federal political committee. **C** C00195263

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 40409.C36907

Amount of Each Receipt this Period
 1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Realtors PAC

Mailing Address 430 N Michigan Ave

City Chicago State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 03 / 2014

Transaction ID : 40203.C36592

Amount of Each Receipt this Period
 1000.00

Receipt

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

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

3000.00

**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 68 OF 100
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Realtors PAC

Full Name (Last, First, Middle Initial)
Mailing Address 430 N Michigan Ave

City Chicago State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 20 / 2014

Transaction ID : 40224.C36712

Amount of Each Receipt this Period
 Receipt 1000.00

B. SkinPAC

Full Name (Last, First, Middle Initial)
Mailing Address 1445 New York Ave NW Ste 800

City Washington State DC Zip Code 20005-2125

FEC ID number of contributing federal political committee. **C** C00359539

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 07 / 2014

Transaction ID : 40310.C36780

Amount of Each Receipt this Period
 Receipt 1000.00

C. Society for Vascular Surgery PAC

Full Name (Last, First, Middle Initial)
Mailing Address 633 N Saint Clair St Fl 24

City Chicago State IL Zip Code 60611-6554

FEC ID number of contributing federal political committee. **C** C00381459

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 07 / 2014

Transaction ID : 40310.C36781

Amount of Each Receipt this Period
 Receipt 1000.00

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

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

3000.00

**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 69 OF 100
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Texttron Inc. PAC

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 878

City Providence State RI Zip Code 02901-0878

FEC ID number of contributing federal political committee. **C** C00123612

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 17 / 2014

Transaction ID : 40324.C36808

Amount of Each Receipt this Period
 Receipt 1000.00

Receipt 3000.00

B. The Wendys Company PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1 Dave Thomas Blvd

City Dublin State OH Zip Code 43017-5452

FEC ID number of contributing federal political committee. **C** C00369090

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : 40407.C36876

Amount of Each Receipt this Period
 Receipt 4000.00

Receipt 4000.00

C. Turkish Coalition USA PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1025 Connecticut Ave NW Ste 1000

City Washington State DC Zip Code 20036-5417

FEC ID number of contributing federal political committee. **C** C00432526

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 16 / 2014

Transaction ID : 40120.C36536

Amount of Each Receipt this Period
 Receipt 1000.00

Receipt 1000.00

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

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

6000.00

43601.21

**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 70 OF 100
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
PNC Bank - Jacksonville

Mailing Address 3422 Sweet Air Rd

City Phoenix State MD Zip Code 21131-1826

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **654.02**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 31 / 2014

Transaction ID : 40210.C36658

Amount of Each Receipt this Period
77.61

Other Receipt

NOTE: BANK INTEREST

B. Full Name (Last, First, Middle Initial)
PNC Bank - Jacksonville

Mailing Address 3422 Sweet Air Rd

City Phoenix State MD Zip Code 21131-1826

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **656.64**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 31 / 2014

Transaction ID : 40210.C36657

Amount of Each Receipt this Period
2.62

Other Receipt

NOTE: BANK INTEREST

C. Full Name (Last, First, Middle Initial)
PNC Bank - Jacksonville

Mailing Address 3422 Sweet Air Rd

City Phoenix State MD Zip Code 21131-1826

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **726.76**

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

Transaction ID : 40303.C36773

Amount of Each Receipt this Period
70.12

Other Receipt

NOTE: BANK INTEREST

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

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

150.35

**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 71 OF 100
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
PNC Bank - Jacksonville

Mailing Address 3422 Sweet Air Rd

City Phoenix State MD Zip Code 21131-1826

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **729.12**

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

Transaction ID : 40303.C36774

Amount of Each Receipt this Period
 2.36

Other Receipt

NOTE: BANK INTEREST

B. Full Name (Last, First, Middle Initial)
PNC Bank - Jacksonville

Mailing Address 3422 Sweet Air Rd

City Phoenix State MD Zip Code 21131-1826

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **731.73**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 40407.C36880

Amount of Each Receipt this Period
 2.61

Other Receipt

NOTE: BANK INTEREST

C. Full Name (Last, First, Middle Initial)
PNC Bank - Jacksonville

Mailing Address 3422 Sweet Air Rd

City Phoenix State MD Zip Code 21131-1826

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **809.37**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 40407.C36881

Amount of Each Receipt this Period
 77.64

Other Receipt

NOTE: BANK INTEREST

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

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

82.61

232.96

**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 72 OF 100			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Upstream Communications LP		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 1609 Shoal Creek Blvd Suite 203		Amount of Each Disbursement this Period 266.50
City Austin State TX Zip Code 78701-1054	Purpose of Disbursement CC Transaction Fees	
Candidate Name		Transaction ID : 40210.E5428
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	CC TRANSACTION FEES

Full Name (Last, First, Middle Initial) B. Upstream Communications LP		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 1609 Shoal Creek Blvd Suite 203		Amount of Each Disbursement this Period 314.10
City Austin State TX Zip Code 78701-1054	Purpose of Disbursement CC Transaction Fees	
Candidate Name		Transaction ID : 40317.E5454
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	CC TRANSACTION FEES

Full Name (Last, First, Middle Initial) C. Upstream Communications LP		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 1609 Shoal Creek Blvd Suite 203		Amount of Each Disbursement this Period 759.75
City Austin State TX Zip Code 78701-1054	Purpose of Disbursement CC Transaction Fees	
Candidate Name		Transaction ID : 40409.E5493
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	CC TRANSACTION FEES

SUBTOTAL of Disbursements This Page (optional).....	1340.35
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 73 OF 100			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Aristotle International, Inc.		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 1950.00
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Software	Transaction ID : 40120.E5417
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	SOFTWARE
State: District:		

Full Name (Last, First, Middle Initial) B. Bankcard Center		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address PO Box 569200		Amount of Each Disbursement this Period 3068.12
City Dallas State TX Zip Code 75356-9200	Purpose of Disbursement See Below	Transaction ID : 40127.E5424
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 224.45
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Meeting Expenses	Transaction ID : 40324.E5466
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: MEETING EXPENSES
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5018.12
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 74 OF 100			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Exxon		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 5959 Las Colinas Blvd		Amount of Each Disbursement this Period 111.03
City Irving	State TX	
Zip Code 75039-4202	Purpose of Disbursement Travel Expense	Transaction ID : 40324.E5467
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: TRAVEL EXPENSE
State: District:		

Full Name (Last, First, Middle Initial) B. Middleton Tavern		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 2 Market Space		Amount of Each Disbursement this Period 720.00
City Annapolis	State MD	
Zip Code 21401-1804	Purpose of Disbursement Event Catering	Transaction ID : 40324.E5468
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: EVENT CATERING
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 175 E Houston St		Amount of Each Disbursement this Period 181.17
City San Antonio	State TX	
Zip Code 78205-2255	Purpose of Disbursement Telephone	Transaction ID : 40324.E5470
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: TELEPHONE
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 75 OF 100			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Communications Electronic		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 10000 York Rd		Amount of Each Disbursement this Period 201.39
City Cockeysville	State MD	
Zip Code 21030-3304	Purpose of Disbursement Cell Phones	Transaction ID : 40324.E5471
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: CELL PHONES
State: District:		

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 1250 H St NW		Amount of Each Disbursement this Period 84.52
City Washington	State DC	
Zip Code 20005-3952	Purpose of Disbursement Office Supplies	Transaction ID : 40324.E5472
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: OFFICE SUPPLIES
State: District:		

Full Name (Last, First, Middle Initial) C. Southwest Airlines		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 2702 Love Field Dr		Amount of Each Disbursement this Period 1511.20
City Dallas	State TX	
Zip Code 75235-1908	Purpose of Disbursement Airfare	Transaction ID : 40324.E5473
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: AIRFARE
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 76 OF 100			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Bankcard Center		Date of Disbursement MM / DD / YYYY 02 / 24 / 2014
Mailing Address PO Box 569200		Amount of Each Disbursement this Period 1929.12
City Dallas	State TX	
Zip Code 75356-9200	Purpose of Disbursement See Below	Transaction ID : 40303.E5445
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement MM / DD / YYYY 02 / 24 / 2014
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 357.10
City Washington	State DC	
Zip Code 20003-1801	Purpose of Disbursement Meeting Expenses	Transaction ID : 40324.E5455
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: MEETING EXPENSES
State: District:		

Full Name (Last, First, Middle Initial) C. Exxon		Date of Disbursement MM / DD / YYYY 02 / 24 / 2014
Mailing Address 5959 Las Colinas Blvd		Amount of Each Disbursement this Period 48.84
City Irving	State TX	
Zip Code 75039-4202	Purpose of Disbursement Travel Expense	Transaction ID : 40324.E5459
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: TRAVEL EXPENSE
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1929.12
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 77 OF 100			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 475 Lenfant Plz SW		Amount of Each Disbursement this Period 976.00
City Washington	State DC	
Zip Code 20260-0001	Purpose of Disbursement Postage	Transaction ID : 40324.E5462
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: POSTAGE
State: District:		

Full Name (Last, First, Middle Initial) B. Hotwire		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 333 108th Ave NE		Amount of Each Disbursement this Period 243.89
City Bellevue	State WA	
Zip Code 98004-5703	Purpose of Disbursement Lodging/Car Rental	Transaction ID : 40324.E5464
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: LODGING/CAR RENTAL
State: District:		

Full Name (Last, First, Middle Initial) c. Bankcard Center		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address PO Box 569200		Amount of Each Disbursement this Period 3216.88
City Dallas	State TX	
Zip Code 75356-9200	Purpose of Disbursement See Below	Transaction ID : 40331.E5483
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	SEE BELOW
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3216.88
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 78 OF 100			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 175 E Houston St		Amount of Each Disbursement this Period 509.93
City San Antonio	State TX	
Zip Code 78205-2255	Purpose of Disbursement Telephone	Transaction ID : 40411.E5494
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: TELEPHONE
State: District:		

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 67.50
City Washington	State DC	
Zip Code 20003-1801	Purpose of Disbursement Membership Dues	Transaction ID : 40411.E5496
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: MEMBERSHIP DUES
State: District:		

Full Name (Last, First, Middle Initial) c. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 38.00
City Atlanta	State GA	
Zip Code 30320-6001	Purpose of Disbursement Travel Expense	Transaction ID : 40411.E5498
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: TRAVEL EXPENSE
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 79 OF 100			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Forever Wireless		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 2204 E Monument St		Amount of Each Disbursement this Period 243.79
City Baltimore	State MD	
Zip Code 21205-2420	Purpose of Disbursement Telephone Repair	Transaction ID : 40411.E5499
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: TELEPHONE REPAIR
State: District:		

Full Name (Last, First, Middle Initial) B. Giant Foods		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 11399 York Rd		Amount of Each Disbursement this Period 473.16
City Cockesville	State MD	
Zip Code 21030-1909	Purpose of Disbursement Event Catering	Transaction ID : 40411.E5500
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: EVENT CATERING
State: District:		

Full Name (Last, First, Middle Initial) C. Hotwire		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 333 108th Ave NE		Amount of Each Disbursement this Period 99.75
City Bellevue	State WA	
Zip Code 98004-5703	Purpose of Disbursement Lodging	Transaction ID : 40411.E5501
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: LODGING
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 80 OF 100			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Integram		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 22695 Commerce Center Ct Ste 170		Amount of Each Disbursement this Period 959.43
City Sterling	State VA	
Zip Code 20166-2037	Purpose of Disbursement Postage	Transaction ID : 40411.E5502
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: POSTAGE
State: District:		

Full Name (Last, First, Middle Initial) B. Royal Farms		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 930 Cromwell Park Dr		Amount of Each Disbursement this Period 110.67
City Glen Burnie	State MD	
Zip Code 21061-2589	Purpose of Disbursement Travel Expense	Transaction ID : 40411.E5505
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: TRAVEL EXPENSE
State: District:		

Full Name (Last, First, Middle Initial) c. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 910 Louisiana St		Amount of Each Disbursement this Period 58.10
City Houston	State TX	
Zip Code 77002-4916	Purpose of Disbursement Travel Expense	Transaction ID : 40411.E5506
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: TRAVEL EXPENSE
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 81 OF 100			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 1250 H St NW		Amount of Each Disbursement this Period 122.80
City Washington	State DC	
Zip Code 20005-3952	Purpose of Disbursement Event Supplies	Transaction ID : 40411.E5508
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: EVENT SUPPLIES
State: District:		

Full Name (Last, First, Middle Initial) B. Cockeysville Volunteer Fire Company		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address PO Box 344		Amount of Each Disbursement this Period 485.00
City Cockeysville	State MD	
Zip Code 21030-0344	Purpose of Disbursement Event Facility Rental	Transaction ID : 40303.E5442
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	EVENT FACILITY RENTAL
State: District:		

Full Name (Last, First, Middle Initial) c. Diageo North America, Inc. Employees PAC		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address 801 Main Ave		Amount of Each Disbursement this Period 1044.21
City Norwalk	State CT	
Zip Code 06851-1127	Purpose of Disbursement Event Catering/Facility Rental	Transaction ID : 40317.C367941K
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	IN KIND: EVENT CATERING/FACILITY RENTAL
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1529.21
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 82 OF 100			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. FedEx Kinkos			Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address PO Box 371461			Amount of Each Disbursement this Period 13.52
City Pittsburgh	State PA	Zip Code 15250-7461	
Purpose of Disbursement Shipping		Category/ Type	Transaction ID : 40120.E5416
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		SHIPPING
State: District:			

Full Name (Last, First, Middle Initial) B. FedEx Kinkos			Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address PO Box 371461			Amount of Each Disbursement this Period 14.28
City Pittsburgh	State PA	Zip Code 15250-7461	
Purpose of Disbursement Shipping		Category/ Type	Transaction ID : 40217.E5431
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		SHIPPING
State: District:			

Full Name (Last, First, Middle Initial) C. FedEx Kinkos			Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address PO Box 371461			Amount of Each Disbursement this Period 15.86
City Pittsburgh	State PA	Zip Code 15250-7461	
Purpose of Disbursement Shipping		Category/ Type	Transaction ID : 40303.E5443
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		SHIPPING
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	43.66
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 83 OF 100			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. FedEx Kinkos		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address PO Box 371461		Amount of Each Disbursement this Period 7.75
City Pittsburgh	State PA	
Zip Code 15250-7461	Purpose of Disbursement Shipping	Category/ Type SHIPPING
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State:	District:	

Full Name (Last, First, Middle Initial) B. FedEx Kinkos		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address PO Box 371461		Amount of Each Disbursement this Period 14.41
City Pittsburgh	State PA	
Zip Code 15250-7461	Purpose of Disbursement Shipping	Category/ Type SHIPPING
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State:	District:	

Full Name (Last, First, Middle Initial) c. Integram		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 22695 Commerce Center Ct Ste 170		Amount of Each Disbursement this Period 1404.63
City Sterling	State VA	
Zip Code 20166-2037	Purpose of Disbursement Direct Mail Production	Category/ Type DIRECT MAIL PRODUCTION
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	1426.79
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 84 OF 100			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Ingram		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 22695 Commerce Center Ct Ste 170		Amount of Each Disbursement this Period 522.64
City Sterling	State VA	
Zip Code 20166-2037	Purpose of Disbursement Direct Mail Production	Transaction ID : 40331.E5484
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	DIRECT MAIL PRODUCTION
State: District:		

Full Name (Last, First, Middle Initial) B. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 111 Constitution Ave NE		Amount of Each Disbursement this Period 65.76
City Washington	State DC	
Zip Code 20002-5607	Purpose of Disbursement Taxes	Transaction ID : 40317.E5453
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	TAXES
State: District:		

Full Name (Last, First, Middle Initial) c. MDI Imaging & Mail		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2014
Mailing Address 21721 Filigree Ct Ste A		Amount of Each Disbursement this Period 2772.38
City Ashburn	State VA	
Zip Code 20147-6207	Purpose of Disbursement Postage	Transaction ID : 40120.E5422
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	POSTAGE
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3360.78
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 85 OF 100			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. MDI Imaging & Mail			Date of Disbursement MM / DD / YYYY 02 / 24 / 2014
Mailing Address 21721 Filigree Ct Ste A			Amount of Each Disbursement this Period 3362.62
City Ashburn	State VA	Zip Code 20147-6207	
Purpose of Disbursement Direct Mail Production		Category/ Type	Transaction ID : 40303.E5444
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		DIRECT MAIL PRODUCTION
State: District:			

Full Name (Last, First, Middle Initial) B. Post Haste Mailing			Date of Disbursement MM / DD / YYYY 01 / 28 / 2014
Mailing Address 90 Russell St Ste 100			Amount of Each Disbursement this Period 275.38
City Annapolis	State MD	Zip Code 21401-3651	
Purpose of Disbursement Postage		Category/ Type	Transaction ID : 40131.E5425
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		POSTAGE
State: District:			

Full Name (Last, First, Middle Initial) c. Post Haste Mailing			Date of Disbursement MM / DD / YYYY 01 / 28 / 2014
Mailing Address 90 Russell St Ste 100			Amount of Each Disbursement this Period 555.94
City Annapolis	State MD	Zip Code 21401-3651	
Purpose of Disbursement Direct Mail Production		Category/ Type	Transaction ID : 40131.E5426
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		DIRECT MAIL PRODUCTION
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	4193.94
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 86 OF 100			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Post Haste Mailing		Date of Disbursement MM / DD / YYYY 01 / 28 / 2014
Mailing Address 90 Russell St Ste 100		Amount of Each Disbursement this Period 514.61
City Annapolis State MD Zip Code 21401-3651	Purpose of Disbursement Direct Mail Production	Transaction ID : 40131.E5427
Candidate Name	Category/Type	DIRECT MAIL PRODUCTION
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Post Haste Mailing		Date of Disbursement MM / DD / YYYY 02 / 10 / 2014
Mailing Address 90 Russell St Ste 100		Amount of Each Disbursement this Period 390.88
City Annapolis State MD Zip Code 21401-3651	Purpose of Disbursement Direct Mail Production	Transaction ID : 40217.E5433
Candidate Name	Category/Type	DIRECT MAIL PRODUCTION
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Professional Data Services		Date of Disbursement MM / DD / YYYY 01 / 21 / 2014
Mailing Address 2470 Daniells Bridge Rd Ste 121		Amount of Each Disbursement this Period 1500.00
City Athens State GA Zip Code 30606-6188	Purpose of Disbursement Compliance Consulting	Transaction ID : 40127.E5423
Candidate Name	Category/Type	COMPLIANCE CONSULTING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2405.49
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 87 OF 100			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Professional Data Services		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 2470 Daniells Bridge Rd Ste 121		Amount of Each Disbursement this Period 1528.98
City Athens State GA Zip Code 30606-6188	Purpose of Disbursement Compliance Consulting	Transaction ID : 40217.E5439
Candidate Name	Category/Type	COMPLIANCE CONSULTING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Professional Data Services		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 2470 Daniells Bridge Rd Ste 121		Amount of Each Disbursement this Period 1504.28
City Athens State GA Zip Code 30606-6188	Purpose of Disbursement Compliance Consulting	Transaction ID : 40331.E5476
Candidate Name	Category/Type	COMPLIANCE CONSULTING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. RKS Realty		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 15 E Churchville Rd Ste 108		Amount of Each Disbursement this Period 1050.00
City Bel Air State MD Zip Code 21014-3837	Purpose of Disbursement Office Rent Expense	Transaction ID : 40310.E5448
Candidate Name	Category/Type	OFFICE RENT EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4083.26
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 88 OF 100			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Amy Shuster		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 135 E Clement St		Amount of Each Disbursement this Period 1500.00
City Baltimore	State MD	
Zip Code 21230-4510	Purpose of Disbursement Fundraising Consulting	Transaction ID : 40106.E5372
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	FUNDRAISING CONSULTING
State: District:		

Full Name (Last, First, Middle Initial) B. Amy Shuster		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014
Mailing Address 135 E Clement St		Amount of Each Disbursement this Period 163.74
City Baltimore	State MD	
Zip Code 21230-4510	Purpose of Disbursement See Below	Transaction ID : 40113.E5396
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014
Mailing Address 1250 H St NW		Amount of Each Disbursement this Period 57.01
City Washington	State DC	
Zip Code 20005-3952	Purpose of Disbursement Office Supplies	Transaction ID : 40113.E5398
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: OFFICE SUPPLIES
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1663.74
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 100			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014
Mailing Address 475 Lenfant Plz SW		Amount of Each Disbursement this Period 16.95
City Washington State DC Zip Code 20260-0001	Purpose of Disbursement Postage	
Candidate Name	Category/Type	Transaction ID : 40113.E5399
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

[MEMO ITEM]
MEMO: POSTAGE

Full Name (Last, First, Middle Initial) B. Marriott Hotels		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014
Mailing Address 10400 Fernwood Rd		Amount of Each Disbursement this Period 77.28
City Bethesda State MD Zip Code 20817-1102	Purpose of Disbursement Lodging	
Candidate Name	Category/Type	Transaction ID : 40113.E5400
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

[MEMO ITEM]
MEMO: LODGING

Full Name (Last, First, Middle Initial) c. Amy Shuster		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 135 E Clement St		Amount of Each Disbursement this Period 1500.00
City Baltimore State MD Zip Code 21230-4510	Purpose of Disbursement Fundraising Consulting	
Candidate Name	Category/Type	Transaction ID : 40210.E5430
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

FUNDRAISING CONSULTING

SUBTOTAL of Disbursements This Page (optional).....	1500.00
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 90 OF 100	
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Amy Shuster		Date of Disbursement MM / DD / YYYY 02 / 10 / 2014
Mailing Address 135 E Clement St		Amount of Each Disbursement this Period 4823.20
City Baltimore	State MD	
Zip Code 21230-4510	Purpose of Disbursement Fundraising Consulting	Transaction ID : 40217.E5434
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	FUNDRAISING CONSULTING
State: District:		

Full Name (Last, First, Middle Initial) B. Amy Shuster		Date of Disbursement MM / DD / YYYY 03 / 05 / 2014
Mailing Address 135 E Clement St		Amount of Each Disbursement this Period 1500.00
City Baltimore	State MD	
Zip Code 21230-4510	Purpose of Disbursement Fundraising Consulting	Transaction ID : 40310.E5449
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	FUNDRAISING CONSULTING
State: District:		

Full Name (Last, First, Middle Initial) c. Amy Shuster		Date of Disbursement MM / DD / YYYY 03 / 31 / 2014
Mailing Address 135 E Clement St		Amount of Each Disbursement this Period 2629.40
City Baltimore	State MD	
Zip Code 21230-4510	Purpose of Disbursement Fundraising Consulting	Transaction ID : 40407.E5489
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	FUNDRAISING CONSULTING
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8952.60
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 91 OF 100			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. The M Group LLC		Date of Disbursement MM / DD / YYYY 01 / 17 / 2014
Mailing Address 100 Luna Park Dr Apt 156		Amount of Each Disbursement this Period 2833.67
City Alexandria	State VA	
Zip Code 22305-3153	Purpose of Disbursement See Below	Transaction ID : 40120.E5418
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) B. The M Group LLC		Date of Disbursement MM / DD / YYYY 01 / 17 / 2014
Mailing Address 100 Luna Park Dr Apt 156		Amount of Each Disbursement this Period 2370.00
City Alexandria	State VA	
Zip Code 22305-3153	Purpose of Disbursement Fundraising Consulting	Transaction ID : 40120.E5419
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: FUNDRAISING CONSULTING
State: District:		

Full Name (Last, First, Middle Initial) c. Bullfeathers		Date of Disbursement MM / DD / YYYY 01 / 17 / 2014
Mailing Address 410 1st St SE		Amount of Each Disbursement this Period 402.40
City Washington	State DC	
Zip Code 20003-1819	Purpose of Disbursement Event Catering	Transaction ID : 40120.E5420
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: EVENT CATERING
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2833.67
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 92 OF 100			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement MM / DD / YYYY 01 / 17 / 2014
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 61.27
City Washington	State DC	
Zip Code 20003-1801	Purpose of Disbursement Meeting Expense	Transaction ID : 40120.E5421
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: MEETING EXPENSE
State: District:		

Full Name (Last, First, Middle Initial) B. The M Group LLC		Date of Disbursement MM / DD / YYYY 02 / 12 / 2014
Mailing Address 100 Luna Park Dr Apt 156		Amount of Each Disbursement this Period 1046.02
City Alexandria	State VA	
Zip Code 22305-3153	Purpose of Disbursement See Below	Transaction ID : 40217.E5436
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) c. The M Group LLC		Date of Disbursement MM / DD / YYYY 02 / 12 / 2014
Mailing Address 100 Luna Park Dr Apt 156		Amount of Each Disbursement this Period 1000.00
City Alexandria	State VA	
Zip Code 22305-3153	Purpose of Disbursement Fundraising Consulting	Transaction ID : 40217.E5437
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: FUNDRAISING CONSULTING
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1046.02
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 93 OF 100			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement MM / DD / YYYY 02 / 12 / 2014
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 46.02
City Washington	State DC	
Zip Code 20003-1801	Purpose of Disbursement Meeting Expense	Transaction ID : 40217.E5438
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: MEETING EXPENSE
State: District:		

Full Name (Last, First, Middle Initial) B. The M Group LLC		Date of Disbursement MM / DD / YYYY 03 / 25 / 2014
Mailing Address 100 Luna Park Dr Apt 156		Amount of Each Disbursement this Period 3357.07
City Alexandria	State VA	
Zip Code 22305-3153	Purpose of Disbursement See Below	Transaction ID : 40331.E5477
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) c. The M Group LLC		Date of Disbursement MM / DD / YYYY 03 / 25 / 2014
Mailing Address 100 Luna Park Dr Apt 156		Amount of Each Disbursement this Period 2450.00
City Alexandria	State VA	
Zip Code 22305-3153	Purpose of Disbursement Fundraising Consulting	Transaction ID : 40331.E5478
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: FUNDRAISING CONSULTING
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3357.07
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 94 OF 100			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Carmines		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 425 7th St NW		Amount of Each Disbursement this Period 840.89
City Washington	State DC	
Zip Code 20004-2229	Purpose of Disbursement Event Catering	Transaction ID : 40331.E5479
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: EVENT CATERING
State: District:		

Full Name (Last, First, Middle Initial) B. Uptown Press		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address 501 W 23rd St		Amount of Each Disbursement this Period 1697.85
City Baltimore	State MD	
Zip Code 21211-3207	Purpose of Disbursement Printing	Transaction ID : 40217.E5432
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PRINTING
State: District:		

Full Name (Last, First, Middle Initial) c. Chevy Weiss		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 3105 Bonnie Rd		Amount of Each Disbursement this Period 3000.00
City Baltimore	State MD	
Zip Code 21208-5602	Purpose of Disbursement Campaign Strategy Consulting	Transaction ID : 40217.E5440
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CAMPAIGN STRATEGY CONSULTING
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4697.85
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 95 OF 100			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Chevy Weiss		Date of Disbursement MM / DD / YYYY 03 / 03 / 2014
Mailing Address 3105 Bonnie Rd		Amount of Each Disbursement this Period 1500.00
City Baltimore	State MD	
Zip Code 21208-5602	Purpose of Disbursement Campaign Strategy Consulting	Transaction ID : 40310.E5447
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CAMPAIGN STRATEGY CONSULTING
State: District:		

Full Name (Last, First, Middle Initial) B. Wired for Victory		Date of Disbursement MM / DD / YYYY 02 / 11 / 2014
Mailing Address PO Box 2025		Amount of Each Disbursement this Period 1000.00
City Annapolis	State MD	
Zip Code 21404-2025	Purpose of Disbursement Media Consulting	Transaction ID : 40217.E5435
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	MEDIA CONSULTING
State: District:		

Full Name (Last, First, Middle Initial) c. Wired for Victory		Date of Disbursement MM / DD / YYYY 03 / 31 / 2014
Mailing Address PO Box 2025		Amount of Each Disbursement this Period 500.00
City Annapolis	State MD	
Zip Code 21404-2025	Purpose of Disbursement Media Consulting	Transaction ID : 40407.E5490
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	MEDIA CONSULTING
State: District:		

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: (check only one)	PAGE 96 OF 100			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Elizabeth Young		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 13401 Redcoat Ln		Amount of Each Disbursement this Period 500.00
City Phoenix	State MD	
Zip Code 21131-2109	Purpose of Disbursement Financial Consulting	Transaction ID : 40106.E5371
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	FINANCIAL CONSULTING
State: District:		

Full Name (Last, First, Middle Initial) B. Elizabeth Young		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 13401 Redcoat Ln		Amount of Each Disbursement this Period 500.00
City Phoenix	State MD	
Zip Code 21131-2109	Purpose of Disbursement Financial Consulting	Transaction ID : 40210.E5429
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	FINANCIAL CONSULTING
State: District:		

Full Name (Last, First, Middle Initial) c. Elizabeth Young		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 13401 Redcoat Ln		Amount of Each Disbursement this Period 500.00
City Phoenix	State MD	
Zip Code 21131-2109	Purpose of Disbursement Financial Consulting	Transaction ID : 40310.E5446
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	FINANCIAL CONSULTING
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1500.00
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 97 OF 100		
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Elizabeth Young		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 13401 Redcoat Ln		Amount of Each Disbursement this Period 94.15
City Phoenix	State MD	
Zip Code 21131-2109	Purpose of Disbursement See Below	Transaction ID : 40331.E5481
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) B. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 475 Lenfant Plz SW		Amount of Each Disbursement this Period 94.15
City Washington	State DC	
Zip Code 20260-0001	Purpose of Disbursement Postage	Transaction ID : 40331.E5482
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: POSTAGE
State: District:		

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

SUBTOTAL of Disbursements This Page (optional).....	94.15
TOTAL This Period (last page this line number only).....	57192.70

**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 98 OF 100			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Comstock for Congress		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address PO Box 71596		Amount of Each Disbursement this Period 1000.00 Transaction ID : 40331.E5475
City Henrico State VA Zip Code 23255-1596	Purpose of Disbursement CONTRIBUTION	
Candidate Name BARBARA J COMSTOCK		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: VA District: 10		

Full Name (Last, First, Middle Initial) B. Jenkins for Congress		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address PO Box 727		Amount of Each Disbursement this Period 1000.00 Transaction ID : 40407.E5487
City Huntington State WV Zip Code 25711-0727	Purpose of Disbursement CONTRIBUTION	
Candidate Name EVAN H JENKINS		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WV District: 03		

Full Name (Last, First, Middle Initial) c. Friends of Bob Johnson		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address PO Box 16401		Amount of Each Disbursement this Period 1000.00 Transaction ID : 40407.E5485
City Savannah State GA Zip Code 31416-3101	Purpose of Disbursement CONTRIBUTION	
Candidate Name ROBERT EUGENE JOHNSON		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: GA District: 01		

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: (check only one)	PAGE 99 OF 100			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Friends of David Jolly		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address PO Box 1158		Amount of Each Disbursement this Period 2000.00 Transaction ID : 40217.E5441
City Indian Rocks Beach	State FL	
Zip Code 33785-1158	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name DAVID W JOLLY	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 13	

Full Name (Last, First, Middle Initial) B. Dr. Chad Mathis for Congress		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 2960 Pelham Pkwy		Amount of Each Disbursement this Period 1000.00 Transaction ID : 40407.E5488
City Pelham	State AL	
Zip Code 35124-7700	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name CHAD DR MATHIS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: AL District: 06	

Full Name (Last, First, Middle Initial) c. Miller-Meeks for Congress		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address PO Box 1103		Amount of Each Disbursement this Period 1000.00 Transaction ID : 40331.E5474
City Ottumwa	State IA	
Zip Code 52501-7103	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name MARIANNETTE JANE MILLER-MEEKS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IA District: 02	

SUBTOTAL of Disbursements This Page (optional).....	4000.00
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 100 OF 100	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Vanila Singh for Congress		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address PO Box 14037		Amount of Each Disbursement this Period 1000.00 Transaction ID : 40407.E5486
City Fremont	State CA	
Zip Code 94539-1437		Category/ Type
Purpose of Disbursement CONTRIBUTION		
Candidate Name VANILA M SINGH		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA	District: 17	

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

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

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	8000.00