07/17/2017 08 : 20

PAGE 1 / 12

FEC FORM 3	AND DI		ECEIPTS		c	Office Use Only
1. NAME OF COMMITTEE (in 1	TYPE OR PRIN	IT V	Example: If typin over the lines.	ng, type	12FE4M5	
Sam Gaskins F	or Congress					
ADDRESS (number and	d street)					
Check if different than previou					KY     42	2241
reported. (AC		CITY	▲ I I I I I I			
2. FEC IDENTIFIC		3. IS THIS REPOR	~	V OR	AMENDEI (A)	D STATE ▼ DISTRICT
(a) Quarterly Re April 15	PORT (Choose One) eports: Quarterly Report (Q1) Quarterly Report (Q2) 15 Quarterly Report (Q3)	(b) 12-Day Election	PRE-Election Rep Primary (12F Convention	<sup>2</sup> )	General (120 Special (125	
January	31 Year-End Report (YE)	(c) 30-Day	<b>POST</b> -Election Re General (300		Runoff (30R)	) Special (30S)
Terminat	tion Report (TER)	Electior	n on	/ D D /	/ Y Y Y Y	in the State of
5. Covering Period	04 / D D 01	/ Y Y Y Y 2017	through	M 6	M / D D / 30	Y Y Y Y 2017
I certify that I have ex Type or Print Name o		o the best of m muel, Lewis, ,	ny knowledge and	belief it is	true, correct and o	complete.
Signature of Treasurer	Gaskins, Samuel, Lewis	S, ,	[Electronically	Filed]	Date	/ D D / Y Y Y Y 30 / 2017
NOTE: Submission of fa	alse, erroneous, or incompl	ete information r	may subject the pe	rson signing	this Report to the	penalties of 52 U.S.C. §3010
Office Use Only						FEC FORM 3 (Revised 05/2016)

Ima	ge# 2	201707179066750512		
	-	FEC Form 3 (Revised 05/2016)	SUMMARY PAGE of Receipts and Disbursements	PAGE 2 / 12
		or Type Committee Name Gaskins For Congress		
R	eport	Covering the Period: From:	04 / D D / Y Y Y Y 01 / 2017 To:	M 06 / D D / Y Y Y Y 30 / 2017
			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))	0.00	200.00
	(b)	Total Contribution Refunds (from Line 20(d))	0.00	0.00
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	200.00
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	0.00	1354.43
	(b)	Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	0.00	1354.43
8.		h on Hand at Close of porting Period (from Line 27)	- 603.00	
9.	the	ots and Obligations Owed <b>TO</b> Committee (Itemize all on edule C and/or Schedule D)	0.00	
10.		ots and Obligations Owed <b>BY</b> Committee (Itemize all on		

## For further information contact:

Schedule C and/or Schedule D).....

8681.59

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

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

Γ		ETAILED SUMMARY PAGE of Receipts	PAGE 3 / 12
\\/ri	FEC Form 3 (Revised 05/2016) te or Type Committee Name		1,102,07,12
	am Gaskins For Congress		
Rej	port Covering the Period: From:	1 / D D / Y Y Y Y 01 2017 To	: 06 / D D / Y Y Y Y 2017
	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)	0.00	0.00
	(ii) Unitemized	0.00	200.00
	(iii) TOTAL of contributions		
	from individuals	0.00	200.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) The Candidate	0.00	0.00
	(e) TOTAL CONTRIBUTIONS		
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	200.00
		7 7 7	7 7 20000
	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
			<u> </u>
	LOANS: (a) Made or Guaranteed by the		
	Candidate	3000.00	1354.43
	(b) All Other Loans	0.00	0.00
	(c) TOTAL LOANS (add Lines 13(a) and (b))	3000.00	1354.43
		7	7 7 7
	offsets to operating Expenditures		
	(Refunds, Rebates, etc.)	0.00	0.00
	OTHER RECEIPTS		
	(Dividends, Interest, etc.)	0.00	0.00
	<b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15)		
	(Carry Total to Line 24, page 4)	3000.00	1554.43

Image# 201707179066750513

Image# 201707179066750514

FEC Form 3 (Revised 05/2016)

## DETAILED SUMMARY PAGE

of Disbursements

PAGE 4 / 12

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
17. OPERATING EXPENDITURES	0.00	1354.43	
8. 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	
<ul><li>(b) Of All Other Loans</li><li>(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))</li></ul>	0.00	0.00	
20. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees	0.00 *	0.00 7	
<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees (such as PACs)</li></ul>	0.00	0.00	
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00	
21. OTHER DISBURSEMENTS	0.00	, , , , , , , , , , , , , , , , , , , ,	
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21)	0.00	1354.43	

## **III. CASH SUMMARY**

23.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD	- 3603.00
24	TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	3000.00
25.	SUBTOTAL (add Line 23 and Line 24)	- 603.00
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	0.00
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	- 603.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         5         OF         12           (check only one)         11a         11b         11c         11d           11a         11b         11c         11d         11d           12         ¥         13a         13b         14         15			
				person for the purpose of soliciting contributions ee to solicit contributions from such committee.			
Α.	A. Gaskins, Samuel, Lewis, , Mailing Address PO Box 251			Date of Receipt			
	City	State	Zip Code	Transaction ID : SA13A.4386			
	Hopkinsville	KY	42241				
	FEC ID number of contributing federal political committee.	С н4	KY01073	Amount of Each Receipt this Period			
	Name of Employer	Occupation	า	3000.00			
	Retired Receipt For: 2018	Retired	unde to Data	Memo Item			
	<b>X</b> Primary General	Election C	ycle-to-Date ▼				
	Other (specify) V	L	6410.20				
В.	Full Name (Last, First, Middle Initial)			Date of Receipt			
Б.	Mailing Address						
	City	State	Zip Code				
	FEC ID number of contributing federal political committee.	ů (·					
	Name of Employer	Occupatior	1				
	Receipt For: Primary General Other (specify) ▼	Election C	ycle-to-Date ▼	Memo Item			
	Full Name (Last, First, Middle Initial)						
C.	Mailing Address			Date of Receipt			
	City	State	Zip Code				
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period			
	Name of Employer		1				
	Receipt For: Primary General Other (specify) ▼	Election C	ycle-to-Date	Memo Item			
s	UBTOTAL of Receipts This Page (optional)			▶ 3000.00			
Т	OTAL This Period (last page this line number c	only)		▶ 3000.00			

CHEDULE C (FEC Form 3) OANS				Use separate schedul for each category of t Detailed Summary Pa	the (check only one) × 13a
ME OF COMMITTEE (In Full) am Gaskins For Congres	S			Transa	ction ID : SC/10.4137
LOAN SOURCE Full Name (Las Gaskins, Samuel, Lewis		ddle Initial)		🗌 Memo Item	Election: 2016 X Primary General
Mailing Address PO Box 251					Other (specify) ▼
City Hopkinsville		State KY	ZIP Code 42241	3	X Personal Funds of the Candidat
Original Amount of Loan		Cumulative Pa	yment To D	ate Bala	ance Outstanding at Close of This Perio
13	54.43		9	0.00	1354.43
TERMS Date Incurred		Γ	Date Due	Interest Rat (If none, ente	
M09 <sup>M</sup> / D29 <sup>D</sup> / Y Ž01	Ϋ́Υ	M M / D D	/ <sup>Y</sup> 11/	5/2Ŏ16 <sup>×</sup> 0	.00 % (apr) Yes X N
List All Endorsers or Guaranton	rs (if any) t	o Loan Source			
1. Full Name (Last, First, Middle	e Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	· · · · · · · · · · · ·
2. Full Name (Last, First, Middle	Initial)	I		Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
3. Full Name (Last, First, Middle	Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y
4. Full Name (Last, First, Middle	Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
UBTOTALS This Period This Page OTALS This Period (last page in t				······	1354.43

			,		
CHEDULE C (FEC Form 3) OANS				Use separate schedule for each category of t Detailed Summary Pag	he (check only one) × 13a
ME OF COMMITTEE (In Full) am Gaskins For Congre	SS			Transac	ction ID : SC/10.4132
LOAN SOURCE Full Name (La Gaskins, Samuel, Lewi		ddle Initial)		Memo Item	Election: 2016 X Primary General
Mailing Address PO Box 251					Other (specify) ▼
City Hopkinsville		State KY	ZIP Code 42241		Personal Funds of the Candidat
Original Amount of Loan		Cumulative Pa	ayment To D	ate Bala	ance Outstanding at Close of This Perio
<u>y</u> y	1369.38			0.00	1369.38
TERMS Date Incurred		Γ	Date Due	Interest Rate (If none, enter	
M10 <sup>M</sup> / D04 <sup>D</sup> / Y Ž0	14 Y	M M / D D	° 11/2	2/2Ŏ16 <sup>¥</sup> 0.	00 % (apr) Yes 🗴 N
List All Endorsers or Guarante		o Loan Source			
1. Full Name (Last, First, Mido	lle Initial)		ľ	Name of Employer	
Mailing Address				Dccupation	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	
2. Full Name (Last, First, Middl	e Initial)		1	Name of Employer	
Mailing Address			(	Dccupation	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	y y
3. Full Name (Last, First, Middl	e Initial)		1	Name of Employer	
Mailing Address			(	Dccupation	
City	State	ZIP Code	(	Amount Guaranteed Dutstanding:	· · · · · · · · · · · · · · · · · · ·
4. Full Name (Last, First, Middl	e Initial)		1	Name of Employer	
Mailing Address			(	Dccupation	
City	State	ZIP Code	(	Amount Guaranteed Dutstanding:	y y
UBTOTALS This Period This Pag OTALS This Period (last page in					1369.38

CHEDULE C (FEC Form 3) OANS				Use separate schedule for each category of t Detailed Summary Pag	he (check only one) × 13a
AME OF COMMITTEE (In Full)				Transac	ction ID : SC/10.4134
LOAN SOURCE Full Name (Last, Fi Gaskins, Samuel, Lewis, ,	rst, Middle	Initial)		🗌 Memo Item	Election: 2016 X Primary General
Mailing Address PO Box 251					Other (specify) ▼
City Hopkinsville	Sta K	ate (Y	ZIP Code 42241	3	Personal Funds of the Candidat
Original Amount of Loan	с	umulative Pay	yment To D	ate Bala	ance Outstanding at Close of This Perio
1046.3	5			0.00	1046.35
TERMS         Date Incurred           M10 <sup>M</sup> /         D06 <sup>D</sup> /         Y         Ž014	Y	M / D D	Date Due	Interest Rate (If none, enter 02/2016 <sup>Y</sup> 0.	
List All Endorsers or Guarantors (if	any) to Lo	oan Source			
1. Full Name (Last, First, Middle Init	tial)			Name of Employer	
Mailing Address				Occupation	
City	State Z	ZIP Code		Amount Guaranteed Outstanding:	y
2. Full Name (Last, First, Middle Initi	al)			Name of Employer	
Mailing Address				Occupation	
City	State Z	ZIP Code		Amount Guaranteed Outstanding:	y y
3. Full Name (Last, First, Middle Initi	al)			Name of Employer	
Mailing Address				Occupation	
City S	State Z	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Middle Initi	al)			Name of Employer	
Mailing Address				Occupation	
City	State Z	ZIP Code		Amount Guaranteed Outstanding:	y y
UBTOTALS This Period This Page (op OTALS This Period (last page in this I					1046.35

HEDULE C (FEC Form 3) ANS		Use separate schedul for each category of Detailed Summary Pa	the (check only one) × 13a		
ME OF COMMITTEE (In Full) am Gaskins For Congress		Transa	ction ID : SC/10.4155		
LOAN SOURCE Full Name (Last, First Gaskins, Samuel, Lewis, ,	t, Middle Initial)	Memo Item	Election: 2016		
Mailing Address PO Box 251			General Other (specify) ▼		
City	State	ZIP Code	Personal Funds of the Candidate		
Hopkinsville	KY	42241			
Original Amount of Loan	Cumulative Pa	ment To Date Bal	ance Outstanding at Close of This Perio		
994.47		0.00	994.47		
TERMS Date Incurred	l	te Due Interest Rat (If none, ente			
M12M / D31D / Y Ž014 Y	M M / D	<sup>/</sup> <sup>Y</sup> 11/02/2016 <sup>Y</sup> 0	.00 % (apr) Yes X No		
List All Endorsers or Guarantors (if a	ny) to Loan Source				
1. Full Name (Last, First, Middle Initia	)	Name of Employer	Name of Employer		
Mailing Address		Occupation			
City Sta	te ZIP Code	Amount Guaranteed Outstanding:	y y		
2. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City Sta	te ZIP Code	Amount Guaranteed			
		Outstanding:	9 9 1		
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City Sta	te ZIP Code	Amount Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City Sta	te ZIP Code	Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1		
		······	994.47		

					PAGE 10 OF 12	
CHEDULE ( OANS	C (FEC Form 3)			Use separate schedule(s) for each category of the Detailed Summary Page		
NAME OF COMMI Sam Gaskins	TTEE (In Full) S For Congress			Transac	tion ID : SC/10.4386	
LOAN SOURC	E Full Name (Last, First, Mic	ddle Initial)		Memo Item	Election: 2018	
Gaskins, S	amuel, Lewis, ,				X Primary General	
Mailing Addres PO Box 251	S				Other (specify)	
City		State	ZIP Code	e		
Hopkinsville		KY	42241		Personal Funds of the Candidate	
Original Amou	unt of Loan	Cumulative Pa	yment To D	Date Bala	nce Outstanding at Close of This Period	
	3000.00			0.00	3000.00	
TERMS	Date Incurred	C	Date Due	Interest Rate (If none, enter		
<sup>M</sup> 06 <sup>M</sup> /	<sup>D</sup> 29 <sup>D</sup> / <sup>Y</sup> Ž017 <sup>Y</sup>	M M / D D	′ <sup>Y</sup> 11/Ö	0.100 0.100		
List All Endors	sers or Guarantors (if any) t	o Loan Source				
1. Full Name	(Last, First, Middle Initial)			Name of Employer		
Mailing Ade	dress			Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:	·	
2. Full Name (	Last, First, Middle Initial)	·		Name of Employer		
Mailing Add	ress			Occupation		
				Amount Guaranteed		
City	State	ZIP Code		Outstanding:	y	
3. Full Name (	Last, First, Middle Initial)			Name of Employer		
Mailing Add	ress			Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:	y y	
4. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Add	ress			Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
	s Period This Page (optional).				3000.00	
Carry outstanding	g balance only to LINE 3, Sch	nedule D, for this	s line. If no	o Schedule D, carry forw	vard to appropriate line of Summary.	

HEDULE C (FEC Form 3)					PAGE 11 OF 12	
CHEDULE C (FEC Form 3) OANS				Use separate schedule for each category of t Detailed Summary Pag	the (check only one) × 13a	
ME OF COMMITTEE (In Full) am Gaskins For Congress				Transad	ction ID : SC/10.4173	
LOAN SOURCE Full Name (Last, First, Middle Initial) Sam Gaskins For Congress				Memo Item Election: 2016   Primary  General		
Mailing Address PO Box 251					Other (specify) <b>v</b>	
City Hopkinsville		StateZIP CodeKY42241		Personal Funds of the Candid		
Original Amount of Loan 427.31	1	Cumulative Pay	/ment To E	Date Bala	ance Outstanding at Close of This Perioc 427.31	
TERMS   Date Incurred     M01 <sup>M</sup> /     D02 <sup>D</sup> /     Y   Ž015	M	M / D D	ate Due	Interest Rat (If none, ente Ŏ4/2Ŏ16 <sup>Ÿ</sup> 0.	r 0) .00	
List All Endorsers or Guarantors (if 1. Full Name (Last, First, Middle Initi		Loan Source		Name of Employer		
Mailing Address				Occupation		
City	tate	ZIP Code		Amount Guaranteed Outstanding:	y = = y = = x = =	
2. Full Name (Last, First, Middle Initia	al)			Name of Employer		
Mailing Address				Occupation Amount		
City St	tate	ZIP Code		Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initia	al)			Name of Employer		
Mailing Address				Occupation		
City St	tate	ZIP Code		Amount Guaranteed Outstanding:	y	
4. Full Name (Last, First, Middle Initia	al)	1		Name of Employer		
Mailing Address				Occupation		
City	tate	ZIP Code		Amount Guaranteed Outstanding:	y y	
JBTOTALS This Period This Page (opt	ne only)			······	427.31	

HEDULE C (FEC Form 3) ANS		for ea	separate schedule ach category of th led Summary Pag	ie (check only one) X 13a		
ME OF COMMITTEE (In Full) am Gaskins For Congress			Transac	tion ID : SC/10.4227		
LOAN SOURCE Full Name (Last, First, N Sam Gaskins For Congress	1iddle Initial)		Memo Item Election: 2016           X         Primary           General			
Mailing Address PO Box 251				Other (specify)		
City Hopkinsville	State KY			Personal Funds of the Candidat		
Original Amount of Loan Cumulative Payment To			Date Balance Outstanding at Close of This Perio			
489.65	,		0.00	489.65		
TERMS Date Incurred		Date Due	Interest Rate (If none, enter			
M12 <sup>M</sup> / D31 <sup>D</sup> / Y Ž01Š Y	M M / D I	<sup>7</sup> 05 Nov 2016	0.0			
List All Endorsers or Guarantors (if any)	to Loan Source	Nome of	Employer			
1. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address		Occupat	ion			
City State	ZIP Code	Amount Guarante Outstanc		y 1 1 y 1 1 x 1		
2. Full Name (Last, First, Middle Initial)		Name of	Employer			
Mailing Address		Occupat	ion			
City State	ZIP Code		Amount Guaranteed Outstanding:			
3. Full Name (Last, First, Middle Initial)		Name of	Name of Employer			
Mailing Address		Occupat	Occupation			
City State	ZIP Code	Amount       ZIP Code     Guaranteed       Outstanding:     7				
4. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
City State	ZIP Code	Amount Guarante Outstanc		y 1 y 1 x 1		
JBTOTALS This Period This Page (optiona	)			489.65		
				8681.59		