

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

Norm Mosher for Congress

ADDRESS (number and street)

PO Box 369

Check if different than previously reported. (ACC)

Irvington

VA

22480

2. FEC IDENTIFICATION NUMBER ▼

C C00564617

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

VA

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 11 / 04 / 2014 in the State of VA

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

- General (30G)
- Runoff (30R)
- Special (30S)

Election on / / in the State of

5. Covering Period

10 / 01 / 2014 through 10 / 15 / 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 Samantha Van Saun

Signature of Treasurer Samantha Van Saun

[Electronically Filed]

Date

12 / 04 / 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.

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Norm Mosher for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2014 To: M M / D D / Y Y Y Y 10 / 15 / 2014

	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))....	13547.95	91190.64
(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)).....	13547.95	91190.64
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	11212.46	81239.89
(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)).....	11212.46	81239.89
8. Cash on Hand at Close of Reporting Period (from Line 27).....	10152.41	
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

Norm Mosher 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).....	3439.00	51000.10
(ii) Unitemized.....	2695.00	26815.10
(iii) TOTAL of contributions from individuals ▶	6134.00	77815.20
(b) Political Party Committees.....	1300.00	5951.49
(c) Other Political Committees (such as PACs).....	6100.00	6380.00
(d) The Candidate.....	13.95	1043.95
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	13547.95	91190.64
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	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	13547.95	91190.64

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	11212.46	81239.89
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	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	11212.46	81239.89

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	7816.92
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	13547.95
25. SUBTOTAL (add Line 23 and Line 24).....	21364.87
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	11212.46
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	10152.41

**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 20
	<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)
Norm Mosher for Congress

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

Mailing Address 41 Fairway Dr

City Plymouth State MA Zip Code 02360-1461

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

Name of Employer Retired Occupation Higher education

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
335.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 06 / 2014

Transaction ID : VNVZGD3KX50

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Dianne Carter

Mailing Address PO Box 631

City Hayes State VA Zip Code 23072-0631

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
245.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 13 / 2014

Transaction ID : VNVZGD6QP95

Amount of Each Receipt this Period
50.00

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

Mailing Address 15433 Beachview Dr

City Dumfries State VA Zip Code 22025-1024

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

Name of Employer G2 Software Systems Occupation Electronics/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 Y
 10 / 14 / 2014

Transaction ID : VNVZGD62035

Amount of Each Receipt this Period
250.00

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

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

400.00

**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 20
	<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)
Norm Mosher for Congress

A. Full Name (Last, First, Middle Initial)
Stephanie Dudley

Mailing Address PO Box 691

City Irvington State VA Zip Code 22480-0691

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

Name of Employer self Occupation restaurant 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
 10 / 06 / 2014

Transaction ID : VNVZGD3M1F6

Amount of Each Receipt this Period
500.00

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

Mailing Address 114 Yorkshire Dr

City Williamsburg State VA Zip Code 23185-3983

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 11 / 2014

Transaction ID : VNVZGD4G6V5

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Patricia Kurpiel

Mailing Address 38 Dobe Point Rd

City Stafford State VA Zip Code 22554-5826

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
 10 / 09 / 2014

Transaction ID : VNVZGD4X459

Amount of Each Receipt this Period
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 20
	<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)
Norm Mosher for Congress

A. Full Name (Last, First, Middle Initial)
Alexander J McKelway

Mailing Address **PO Box 1109**
Post Office box 1109

City **White Stone** State **VA** Zip Code **22578-1109**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
535.00

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

Transaction ID : VNVZGD3F795

Amount of Each Receipt this Period
35.00

B. Full Name (Last, First, Middle Initial)
Albert & Mary Louise Pollard

Mailing Address **PO Box 266**

City **Irvington** State **VA** Zip Code **22480-0266**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1229.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 01 / 2014

Transaction ID : VNVZGD4P8Z7

Amount of Each Receipt this Period
504.00

* In-Kind: Staff Housing

C. Full Name (Last, First, Middle Initial)
Ed Reid

Mailing Address **PO Box 4429**

City **Annapolis** State **MD** Zip Code **21403-6429**

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
1000.00

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

Transaction ID : VNVZGD3F7E5

Amount of Each Receipt this Period
1000.00

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

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

1539.00

**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 20
	<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)
Norm Mosher for Congress

A. Full Name (Last, First, Middle Initial)
Joseph Schlatter

Mailing Address 196 Potomac Dr

City State Zip Code
Heathsville VA 22473-2259

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

Name of Employer Occupation
Retired Retired

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
 10 / 08 / 2014

Transaction ID : VNVZGD404B7

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Robert H. Wayland III

Mailing Address 22 Shoreline Dr

City State Zip Code
White Stone VA 22578-3132

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2014

Transaction ID : VNVZGD6QPG0

Amount of Each Receipt this Period
250.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M 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).....

500.00

3439.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 20	
	<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Norm Mosher for Congress

A. Full Name (Last, First, Middle Initial)
Gloucester County Democratic Committee

Mailing Address PO Box 1589

City Gloucester State VA Zip Code 23061-1589

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 15 / 2014

Transaction ID : VNVZGD620A1

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Lancaster County Democratic Committee

Mailing Address PO Box 318

City Kilmarnock State VA Zip Code 22482-0318

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

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
10 / 07 / 2014

Transaction ID : VNVZGD4G2Y9

Amount of Each Receipt this Period
1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1300.00

1300.00

**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 20
	<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)
Norm Mosher for Congress

A. Full Name (Last, First, Middle Initial)
Common Ground PAC

Mailing Address 1490 Quarterpath Rd
Ste 5A

City Williamsburg State VA Zip Code 23185-6544

FEC ID number of contributing federal political committee. **C** C00538835

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
 10 / 07 / 2014

Transaction ID : VNVZGD4G285

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Friends of John Jenkins

Mailing Address 4194 Windflower Ct

City Dale City State VA Zip Code 22193-5100

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

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

Transaction ID : VNVZGD3F762

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
United Steel Workers

Mailing Address 5 Gateway Center

City Pittsburgh State PA Zip Code 15222

FEC ID number of contributing federal political committee. **C** C00003590

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
 10 / 09 / 2014

Transaction ID : VNVZGD4G2K2

Amount of Each Receipt this Period
5000.00

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

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

6100.00

6100.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 20
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Norm Mosher for Congress

A. Full Name (Last, First, Middle Initial)
Norm & Jan Mosher

Mailing Address **PO Box 725**

City **Irvington** State **VA** Zip Code **22480-0725**

FEC ID number of contributing federal political committee. **C H4VA01070**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1043.95

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 06 / 2014

Transaction ID : VNVZGDDX705

Amount of Each Receipt this Period
13.95

* In-Kind: Wrote personal check for map of Prince William County

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

13.95

13.95

**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 12 OF 20			
	<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)
Norm Mosher for Congress

Full Name (Last, First, Middle Initial) A. ActBlue		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2014
Mailing Address PO Box 441146		Amount of Each Disbursement this Period 13.84
City West Somerville	State MA	
Zip Code 02144-0031	Purpose of Disbursement Merchant Fees	Transaction ID : VNV089Q8B17
Candidate Name	012 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ActBlue		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address PO Box 441146		Amount of Each Disbursement this Period 1.98
City West Somerville	State MA	
Zip Code 02144-0031	Purpose of Disbursement Merchant Fees	Transaction ID : VNV089Q8B25
Candidate Name	012 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Amazon.com		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014
Mailing Address		Amount of Each Disbursement this Period 15.76
City	State	
Zip Code	Purpose of Disbursement Office Supplies	Transaction ID : VNV089Q8J43
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	31.58
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 13 OF 20			
	<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)
Norm Mosher for Congress

Full Name (Last, First, Middle Initial) A. Boat Club Ltd.		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address PO Box 372		Amount of Each Disbursement this Period 218.00 Transaction ID : VNV089Q5QW9
City Irvington State VA Zip Code 22480-0372	Purpose of Disbursement Facility/Room Rental Candidate Name Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Campaign Finance Group, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 33 R St NW		Amount of Each Disbursement this Period 3500.00 Transaction ID : VNV089PWBN7
City Washington State DC Zip Code 20001-1119	Purpose of Disbursement Fund Raising Consulting Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Creative DeSIGNS of Virginia, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 322 Chesapeake Dr		Amount of Each Disbursement this Period 73.71 Transaction ID : VNV089PZC48
City White Stone State VA Zip Code 22578-2672	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3791.71
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 14 OF 20			
	<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)
Norm Mosher for Congress

Full Name (Last, First, Middle Initial) A. Economy Printing, Inc		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 4519 George Washington Hwy		Amount of Each Disbursement this Period 1064.73
City Portsmouth	State VA Zip Code 23702-2403	
Purpose of Disbursement Palm Cards	Category/Type 006	Transaction ID : VNV089PZC71
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Economy Printing, Inc		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 4519 George Washington Hwy		Amount of Each Disbursement this Period 1303.64
City Portsmouth	State VA Zip Code 23702-2403	
Purpose of Disbursement Lapel Stickers, Rally signs, business cards	Category/Type 006	Transaction ID : VNV089PZCB3
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Facebook		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address		Amount of Each Disbursement this Period 8.89
City	State Zip Code	
Purpose of Disbursement Online Advertising	Category/Type 004	Transaction ID : VNV089Q8HW0
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2377.26
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 15 OF 20			
	<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)
Norm Mosher for Congress

Full Name (Last, First, Middle Initial) A. Global Business Ventures		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014
Mailing Address PO Box 709		Amount of Each Disbursement this Period 500.00 Transaction ID : VNV089PWBC6
City Irvington	State VA	
Purpose of Disbursement Campaign Consulting	Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Global Business Ventures		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address PO Box 709		Amount of Each Disbursement this Period 500.00 Transaction ID : VNV089PWBE2
City Irvington	State VA	
Purpose of Disbursement Campaign Consulting	Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. Irvington Market		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 4447 Irvington Rd		Amount of Each Disbursement this Period 45.95 Transaction ID : VNV089PZC06
City Irvington	State VA	
Purpose of Disbursement Fuel	Candidate Name	Category/ Type 002
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1045.95
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 16 OF 20	
	<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)
Norm Mosher for Congress

Full Name (Last, First, Middle Initial) A. Irvington Market		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 4447 Irvington Rd		Amount of Each Disbursement this Period 40.24
City Irvington	State VA	
Zip Code 22480-2106	Purpose of Disbursement Fuel	Transaction ID : VNV089PZC22
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Irvington Market		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 4447 Irvington Rd		Amount of Each Disbursement this Period 35.32
City Irvington	State VA	
Zip Code 22480-2106	Purpose of Disbursement Fuel	Transaction ID : VNV089Q8NG4
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Mosher & Associates, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address PO Box 725		Amount of Each Disbursement this Period 500.00
City Irvington	State VA	
Zip Code 22480-0725	Purpose of Disbursement Finance Consulting	Transaction ID : VNV089PWC04
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	575.56
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 17 OF 20	
	<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)
Norm Mosher for Congress

Full Name (Last, First, Middle Initial) A. Norm & Jan Mosher		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address PO Box 725		Amount of Each Disbursement this Period 13.95 Transaction ID : VNVZGDDX7051
City Irvington State VA Zip Code 22480-0725	Purpose of Disbursement Wrote personal check for map of Prince William County	
Candidate Name Norm & Jan Mosher	Category/Type	* In-Kind Received
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 01	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. NGP Credit Card Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address		Amount of Each Disbursement this Period 170.07 Transaction ID : VNV089Q8HR8
City State Zip Code	Purpose of Disbursement Merchant Fees	
Candidate Name	Category/Type 012	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. NGP VAN INC.		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 1101 15th St NW		Amount of Each Disbursement this Period 900.00 Transaction ID : VNV089PZAY0
City Washington State DC Zip Code 20005-5002	Purpose of Disbursement Accounting/Compliance	
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1084.02
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 18 OF 20			
	<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)
Norm Mosher for Congress

Full Name (Last, First, Middle Initial) A. NoHill Inc T/A House of		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address PO Box 337 394 Chesapeake Dr		Amount of Each Disbursement this Period 294.84 Transaction ID : VNV089PZBR3
City White Stone	State VA	
Purpose of Disbursement Campaign Flyers		Category/ Type 006
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Panera Bread		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address		Amount of Each Disbursement this Period 18.44 Transaction ID : VNV089PNJ43
City	State	
Purpose of Disbursement Meals		Category/ Type 002
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Panera Bread		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address		Amount of Each Disbursement this Period 9.39 Transaction ID : VNV089PNJ50
City	State	
Purpose of Disbursement Meals		Category/ Type 002
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	322.67
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 19 OF 20	
	<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)
Norm Mosher for Congress

Full Name (Last, First, Middle Initial) A. Albert & Mary Louise Pollard			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014	
Mailing Address PO Box 266			Amount of Each Disbursement this Period 504.00	
City Irvington	State VA	Zip Code 22480-0266	Transaction ID : VNVZGD4P8Z71	
Purpose of Disbursement Staff Housing		Category/ Type	* In-Kind Received	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Sandy Creek Pet Resort			Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014	
Mailing Address 9689 Burkes Pond Rd			Amount of Each Disbursement this Period 48.00	
City North	State VA	Zip Code 23128-9019	Transaction ID : VNV089PZBW5	
Purpose of Disbursement Pet Boarding		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Times Community Media			Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014	
Mailing Address 39 Culpeper St			Amount of Each Disbursement this Period 704.50	
City Warrenton	State VA	Zip Code 20186-3319	Transaction ID : VNV089Q8P01	
Purpose of Disbursement Newspaper Ads		Category/ Type 004		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1256.50
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 20 OF 20	
	<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)
Norm Mosher for Congress

Full Name (Last, First, Middle Initial) A. U. S. Postal Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address Irvington Post Office		Amount of Each Disbursement this Period 5.95 Transaction ID : VNV089Q5QV1
City Irvington	State VA Zip Code 22480	
Purpose of Disbursement Postage	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address PO Box 4003		Amount of Each Disbursement this Period 96.52 Transaction ID : VNV089PZBV7
City Acworth	State GA Zip Code 30101-9004	
Purpose of Disbursement Cell Phone	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) 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	Category/Type	
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).....	102.47
TOTAL This Period (last page this line number only).....	10587.72