

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 65

Write or Type Committee Name

Robert Hurt for Congress

Report Covering the Period: From: / / 2013 To: / / 2013

	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))....	96649.30	505212.82
(b) Total Contribution Refunds (from Line 20(d))	0.00	100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	96649.30	505112.82
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	93754.30	334958.59
(b) Total Offsets to Operating Expenditures (from Line 14).....	15.00	26341.33
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	93739.30	308617.26
8. Cash on Hand at Close of Reporting Period (from Line 27).....	345384.62	
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

Robert Hurt 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).....	32100.00	135752.36
(ii) Unitemized.....	7476.80	34904.63
(iii) TOTAL of contributions from individuals ▶	39576.80	170656.99
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	57072.50	334555.83
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	96649.30	505212.82
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.)	15.00	26341.33
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)..... ▶	96664.30	531554.15

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	93754.30	334958.59
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	100.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	100.00
21. OTHER DISBURSEMENTS	6050.00	106377.95
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	99804.30	441436.54

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	348524.62
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	96664.30
25. SUBTOTAL (add Line 23 and Line 24).....	445188.92
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	99804.30
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	345384.62

**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 65
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Robert Hurt for Congress

A. Full Name (Last, First, Middle Initial)
Philmore B. Anderson

Mailing Address 3400 N Venice St

City State Zip Code
Arlington VA 22207

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

Name of Employer Occupation
Navigators President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 12 / 2013

Transaction ID : SA11AI.31870

Amount of Each Receipt this Period
2200.00

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

Mailing Address 606 Bailey Rd

City State Zip Code
Keysville VA 23947

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

Name of Employer Occupation
self employed Tobacco Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 16 / 2013

Transaction ID : SA11AI.31578

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mrs. Barbara D. Bass

Mailing Address 7040 Philpott Rd

City State Zip Code
South Boston VA 24592

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 / D D / Y Y Y Y
10 / 15 / 2013

Transaction ID : SA11AI.31271

Amount of Each Receipt this Period
250.00

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)	PAGE 6 OF 65
	<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)
Robert Hurt for Congress

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

Mailing Address 16534 Tinder Dr

City Woodford State VA Zip Code 22580

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

Name of Employer Union First Market Bank Occupation Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 07 / 2013

Transaction ID : SA11AI.31146

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 4252 Stony Mill Rd

City Danville State VA Zip Code 24541

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

Name of Employer Bresville Animal Clinic Occupation Veterinarian

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 13 / 2013

Transaction ID : SA11AI.31414

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Fred A. Blair

Mailing Address PO Box 612

City Gretna State VA Zip Code 24557

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

Name of Employer Contractor Occupation Blair Construction

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 13 / 2013

Transaction ID : SA11AI.31409

Amount of Each Receipt this Period
 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 7 OF 65
	<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)
Robert Hurt for Congress

A. Full Name (Last, First, Middle Initial)
Abney S. Boxley III

Mailing Address 301 Willow Oak Dr SW

City: Roanoke State: VA Zip Code: 24014

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

Name of Employer: WW Boxley Co Occupation: President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 11 / 04 / 2013

Transaction ID : SA11AI.31407

Amount of Each Receipt this Period: 500.00

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

Mailing Address 504 Old Lynchburg Rd

City: Charlottesville State: VA Zip Code: 22903

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

Name of Employer: Health Data Services Inc Occupation: Business Person

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 10 / 25 / 2013

Transaction ID : SA11AI.31425

Amount of Each Receipt this Period: 2600.00

C. Full Name (Last, First, Middle Initial)
James M. Campbell

Mailing Address 7359 Jefferson Mill Rd

City: Scottsville State: VA Zip Code: 24590

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

Name of Employer: Capital One Occupation: Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 12 / 30 / 2013

Transaction ID : SA11AI.31603

Amount of Each Receipt this Period: 500.00

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

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

3600.00

**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 65
	<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)
Robert Hurt for Congress

A. Full Name (Last, First, Middle Initial)
Yong Choe

Mailing Address 1001 L St NW #610

City Washington State DC Zip Code 20001

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

Name of Employer Rite Aid Corporation Occupation Lobbyist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 01 / 2013

Transaction ID : SA11AI.31144

Amount of Each Receipt this Period
 500.00

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

Mailing Address 13804 Patrick Henry Hwy

City Roseland State VA Zip Code 22967

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

Name of Employer Techtonics II Occupation Marketing

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : SA11AI.31604

Amount of Each Receipt this Period
 1500.00

C. Full Name (Last, First, Middle Initial)
Thomas A. Crowell III

Mailing Address PO Box 548

City South Boston State VA Zip Code 24592

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

Name of Employer Crowell Motor Company Inc. 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
 11 / 20 / 2013

Transaction ID : SA11AI.31450

Amount of Each Receipt this Period
 2600.00

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

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

4600.00

**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 65
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Robert Hurt for Congress

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

Mailing Address **PO Box 548**

City **South Boston** State **VA** Zip Code **24592**

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

Name of Employer **Crowell Motor Company Inc.** Occupation **President**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
11 / 20 / 2013

Transaction ID : SA11AI.31451

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Ben J. Davenport Jr.

Mailing Address **121 Reid St**

City **Chatham** State **VA** Zip Code **24531**

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

Name of Employer **First Piedmont Corporation** Occupation **Chairman**

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
11 / 15 / 2013

Transaction ID : SA11AI.31422

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
H. Benson Dendy III

Mailing Address **1142 West Ave**

City **Richmond** State **VA** Zip Code **23220**

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

Name of Employer **Vectre Corp** Occupation **Lobbyist**

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
12 / 30 / 2013

Transaction ID : SA11AI.31606

Amount of Each Receipt this Period
500.00

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

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

4100.00

**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 65
	<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)
Robert Hurt for Congress

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

Mailing Address 4720 32nd St N

City State Zip Code
Arlington VA 22207

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

Name of Employer Occupation
Stanton Park Group Lobbyist

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 / 10 / 2013

Transaction ID : SA11AI.31347

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
J. Brad Edwards

Mailing Address 2422 Taylor Ave

City State Zip Code
Alexandria VA 22302

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

Name of Employer Occupation
Jenkins Hill Consulting LLC Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 29 / 2013

Transaction ID : SA11AI.31564

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
Danny E. Elder

Mailing Address PO Box 300

City State Zip Code
Buckingham VA 23921

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
500.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 04 / 2013

Transaction ID : SA11AI.31460

Amount of Each Receipt this Period
500.00

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 11 OF 65
	<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)
Robert Hurt for Congress

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

Mailing Address 10720 Hume Rd

City Marshall State VA Zip Code 20115

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

Name of Employer Eagle Aviation Services & Tech Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2013

Transaction ID : SA11AI.31205

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Geoffrey C. Gradler

Mailing Address 2012 N Oakland St

City Arlington State VA Zip Code 22207

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

Name of Employer Capitol Ideas LLC Occupation Founder

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 12 / 2013

Transaction ID : SA11AI.31385

Amount of Each Receipt this Period
 500.00

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

Mailing Address PO Box 480

City Kenbridge State VA Zip Code 23944

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

Name of Employer Kenbridge Construction Co Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2013

Transaction ID : SA11AI.31228

Amount of Each Receipt this Period
 250.00
 see Kenbridge Leasing LLC

[MEMO ITEM]

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 12 OF 65
	<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)
Robert Hurt for Congress

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

Mailing Address 1101 Pennsylvania Ave NW

City Washington State DC Zip Code 20004

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

Name of Employer The Pennsylvania Ave Group Occupation Lobbyist

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
 11 / 29 / 2013

Transaction ID : SA11AI.31568

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
Crystal A. Irby

Mailing Address 1205 Blackstone PI

City Lynchburg State VA Zip Code 24503

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

Name of Employer Homemaker Occupation Homemaker

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
 10 / 15 / 2013

Transaction ID : SA11AI.31186

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Kenbridge Leasing LLC

Mailing Address PO Box 480

City Kenbridge State VA Zip Code 23944

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

Name of Employer Occupation

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
 10 / 15 / 2013

Transaction ID : SA11AI.31227

Amount of Each Receipt this Period
250.00
 attributed equally to owners

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 13 OF 65
	<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)
Robert Hurt for Congress

A. Full Name (Last, First, Middle Initial)
Billy Lawrence

Mailing Address 71 St Johns Ct

City Martinsville State VA Zip Code 24112

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

Name of Employer self employed Occupation farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2013

Transaction ID : SA11AI.31177

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Linda A. Maxey

Mailing Address 1353 Jones Mill Rd

City Chatham State VA Zip Code 24531

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 / 15 / 2013

Transaction ID : SA11AI.31256

Amount of Each Receipt this Period
250.00

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

Mailing Address 1501 Carter Lodge Rd

City Blairs State VA Zip Code 24527

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 **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 07 / 2013

Transaction ID : SA11AI.31437

Amount of Each Receipt this Period
1000.00

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 14 OF 65
	<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)
Robert Hurt for Congress

A. Full Name (Last, First, Middle Initial)
Daris Meeks

Mailing Address 11413 Heritage Oak Ct

City Reston State VA Zip Code 20194

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

Name of Employer Patton Boggs Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 21 / 2013

Transaction ID : SA11AI.31440

Amount of Each Receipt this Period
 500.00

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

Mailing Address 1180 Astin Ln

City Danville State VA Zip Code 24540

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

Name of Employer JW Squire Co Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 15 / 2013

Transaction ID : SA11AI.31192

Amount of Each Receipt this Period
 500.00

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

Mailing Address PO Box 209

City Clarksville State VA Zip Code 23927

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

Name of Employer Key Construction Co. Inc. Occupation Construction

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 15 / 2013

Transaction ID : SA11AI.31235

Amount of Each Receipt this Period
 250.00

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 15 OF 65
	<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)
Robert Hurt for Congress

A. Full Name (Last, First, Middle Initial)
Connie G. Nyholm

Mailing Address 2000 Plantation Road

City Alton State VA Zip Code 24520

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

Name of Employer Va International Raceway Occupation Executive

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
 12 / 16 / 2013

Transaction ID : SA11A1.31571

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Jesse W. Overbey

Mailing Address 612 Oakland Dr

City Chatham State VA Zip Code 24531

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

Name of Employer Attorney Occupation self employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 15 / 2013

Transaction ID : SA11A1.31270

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Katherine D. Rand

Mailing Address 506 Forest Dr

City South Boston State VA Zip Code 24592

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
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 27 / 2013

Transaction ID : SA11A1.31588

Amount of Each Receipt this Period
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 16 OF 65
	<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)
Robert Hurt for Congress

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

Mailing Address 3916 Bentwood Ct

City State Zip Code
Fairfax VA 22031

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

Name of Employer Occupation
Roberts Raheb & Gradler LLC Principal

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 / 15 / 2013

Transaction ID : SA11AI.31176

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Louise S. Robinson

Mailing Address 332 Shepherds Ridge Cir

City State Zip Code
Charlottesville VA 22901

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
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 04 / 2013

Transaction ID : SA11AI.31406

Amount of Each Receipt this Period
200.00

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

Mailing Address 1026 Hickory Creek Rd

City State Zip Code
Faber VA 22938

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
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 30 / 2013

Transaction ID : SA11AI.31607

Amount of Each Receipt this Period
500.00

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 17 OF 65
	<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)
Robert Hurt for Congress

A. Full Name (Last, First, Middle Initial)
Charles F. Simmons

Mailing Address PO Box 436

City Clarksville State VA Zip Code 23927

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

Name of Employer Simmons Construction Occupation Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 13 / 2013

Transaction ID : SA11AI.31410

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Kenneth D. Tuck MD

Mailing Address 3320 Franklin Rd SW

City Roanoke State VA Zip Code 24014

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

Name of Employer Vistar Eye Center 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
 10 / 15 / 2013

Transaction ID : SA11AI.31188

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
John A. Waggoner Sr.

Mailing Address 205 Salisbury Cir

City Danville State VA Zip Code 24541

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

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 15 / 2013

Transaction ID : SA11AI.31421

Amount of Each Receipt this Period
 50.00

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

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

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 18 OF 65
	<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)
Robert Hurt for Congress

A. Full Name (Last, First, Middle Initial)
Kenneth G. Waller

Mailing Address 1955 Old Leaksville Rd

City State Zip Code
Ridgeway VA 24148

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
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2013

Transaction ID : SA11AI.31258

Amount of Each Receipt this Period
100.00

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

Mailing Address 419 Hawthorne Dr

City State Zip Code
Danville VA 24541

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

Name of Employer Occupation
Wilkins & Company Realtors Realtor

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
 11 / 07 / 2013

Transaction ID : SA11AI.31428

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Landon R. Wyatt Jr.

Mailing Address PO Box 11000

City State Zip Code
Danville VA 24543

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
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2013

Transaction ID : SA11AI.31431

Amount of Each Receipt this Period
500.00

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

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

1600.00

32100.00

**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 65
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial)
AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL ACTION COMMITTEE

A. Mailing Address PALLADIAN 1
220 LEIGH FARM RD
City DURHAM State NC Zip Code 27707

FEC ID number of contributing federal political committee. **C** C00077321

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
11 / 15 / 2013
Transaction ID : SA11C.31381

Amount of Each Receipt this Period
1072.50

Full Name (Last, First, Middle Initial)
AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE

B. Mailing Address 520 N. NORTHWEST HIGHWAY
City PARK RIDGE State IL Zip Code 60068

FEC ID number of contributing federal political committee. **C** C00255752

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
11 / 04 / 2013
Transaction ID : SA11C.31419

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)

C. Mailing Address 11921 FREEDOM DRIVE
SUITE 1100
City RESTON State VA Zip Code 20190

FEC ID number of contributing federal political committee. **C** C00447565

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date 4500.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 15 / 2013
Transaction ID : SA11C.31181

Amount of Each Receipt this Period
1000.00

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

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

3072.50

**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 65
	<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)
Robert Hurt for Congress

A. Full Name (Last, First, Middle Initial)
BAE SYSTEMS INC. POLITICAL ACTION COMMITTEE (BAE SYSTEMS USA PAC)

Mailing Address 1101 WILSON BLVD

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C C00281212**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 16 / 2013

Transaction ID : SA11C.31573

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
BAE SYSTEMS INC. POLITICAL ACTION COMMITTEE (BAE SYSTEMS USA PAC)

Mailing Address 1101 WILSON BLVD

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C C00281212**

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
 12 / 27 / 2013

Transaction ID : SA11C.31592

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
BANK OF AMERICA CORPORATION FEDERAL PAC

Mailing Address 1455 PENNSYLVANIA AVE NW SUITE 950
DC8-455-09-01

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00364778**

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
 12 / 16 / 2013

Transaction ID : SA11C.31574

Amount of Each Receipt this Period
500.00

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 21 OF 65
	<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)
Robert Hurt for Congress

A. BANK OF AMERICA CORPORATION FEDERAL PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1455 PENNSYLVANIA AVE NW SUITE 950
DC8-455-09-01

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00364778**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5500.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 16 / 2013

Transaction ID : SA11C.31575

Amount of Each Receipt this Period
1500.00

B. BRIDGEPOINT EDUCATION INC. PAC

Full Name (Last, First, Middle Initial)
Mailing Address 13500 EVENING CREEK DR. NORTH
SUITE 600

City SAN DIEGO State CA Zip Code 92128

FEC ID number of contributing federal political committee. **C C00478404**

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 / 15 / 2013

Transaction ID : SA11C.31182

Amount of Each Receipt this Period
1000.00

C. CHARLES SCHWAB CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 211 MAIN STREET

City SAN FRANCISCO State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C C00370114**

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
 11 / 12 / 2013

Transaction ID : SA11C.31388

Amount of Each Receipt this Period
1000.00

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 22 OF 65
	<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)
Robert Hurt for Congress

A. Full Name (Last, First, Middle Initial)
CME GROUP INC. PAC

Mailing Address **20 SOUTH WACKER DRIVE**

City **CHICAGO** State **IL** Zip Code **60606**

FEC ID number of contributing federal political committee. **C C00076299**

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
11 / 20 / 2013

Transaction ID : SA11C.31454

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
CREDIT SUISSE SECURITIES (USA) LLC POLITICAL ACTION COMMITTEE

Mailing Address **1201 F STREET, NW SUITE 450**

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00111559**

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
11 / 20 / 2013

Transaction ID : SA11C.31453

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
DOMINION POLITICAL ACTION COMMITTEE

Mailing Address **One James River Plaza, 20th Floor
P.O. BOX 26666**

City **Richmond** State **VA** Zip Code **23261**

FEC ID number of contributing federal political committee. **C C00108209**

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
11 / 07 / 2013

Transaction ID : SA11C.31439

Amount of Each Receipt this Period
2500.00

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

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

6000.00

**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 65
	<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)
Robert Hurt for Congress

A. Full Name (Last, First, Middle Initial)
ERNST & YOUNG POLITICAL ACTION COMMITTEE

Mailing Address 1101 New York Avenue, NW

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00227744

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
 12 / 16 / 2013

Transaction ID : SA11C.31576

Amount of Each Receipt this Period
 _____ 2500.00

B. Full Name (Last, First, Middle Initial)
EVERY REPUBLICAN IS CRUCIAL (ERICPAC)

Mailing Address 25 East Main Street, Suite 200

City Richmond	State VA	Zip Code 23219
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00384701

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 Y
 11 / 29 / 2013

Transaction ID : SA11C.31566

Amount of Each Receipt this Period
 _____ 5000.00

C. Full Name (Last, First, Middle Initial)
FEDERATION OF AMERICAN HOSPITALS PAC

Mailing Address 750 9TH STREET NW
SUITE 600

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00002261

Name of Employer	Occupation
------------------	------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 04 / 2013

Transaction ID : SA11C.31463

Amount of Each Receipt this Period
 _____ 1500.00

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

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

_____ 9000.00

**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 24 OF 65
<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)
Robert Hurt for Congress

A. Full Name (Last, First, Middle Initial)
FREEDOM PROJECT; THE

Mailing Address 631-B Pennsylvania Ave., SE
Basement UNIT

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00305805

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
12 / 23 / 2013

Transaction ID : SA11C.31587

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)

Mailing Address 1299 Pennsylvania Ave NW
Suite 900W

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00024869

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
12 / 27 / 2013

Transaction ID : SA11C.31600

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE (ICI PAC)

Mailing Address 1401 H STREET NW SUITE 1200

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00105981

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
12 / 16 / 2013

Transaction ID : SA11C.31580

Amount of Each Receipt this Period
1000.00

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

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

7500.00

**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 65
	<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)
Robert Hurt for Congress

A. Full Name (Last, First, Middle Initial)
KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)

Mailing Address 600 14th Street, NW
Suite 800

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00236489**

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
 12 / 27 / 2013

Transaction ID : SA11C.31594

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND

Mailing Address 103 POWELL COURT SUITE 200

City BRENTWOOD State TN Zip Code 37027

FEC ID number of contributing federal political committee. **C C00347955**

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 Y
 11 / 13 / 2013

Transaction ID : SA11C.31412

Amount of Each Receipt this Period
3000.00

C. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 1550 CRYSTAL DRIVE
SUITE 300

City ARLINGTON State VA Zip Code 22202

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
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 16 / 2013

Transaction ID : SA11C.31581

Amount of Each Receipt this Period
1000.00

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

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

6500.00

**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 65
	<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)
Robert Hurt for Congress

A. MAJORITY COMMITTEE PAC--MC PAC

Full Name (Last, First, Middle Initial)
MAJORITY COMMITTEE PAC--MC PAC

Mailing Address P.O. BOX 10134

City BAKERSFIELD State CA Zip Code 93389

FEC ID number of contributing federal political committee. **C** C00428052

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
 11 / 21 / 2013

Transaction ID : SA11C.31456

Amount of Each Receipt this Period
 5000.00

B. MCGUIREWOODS LLP

Full Name (Last, First, Middle Initial)
MCGUIREWOODS LLP

Mailing Address ONE JAMES CENTER
901 E. CARY STREET

City RICHMOND State VA Zip Code 23219

FEC ID number of contributing federal political committee. **C** C00225342

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
 11 / 04 / 2013

Transaction ID : SA11C.31418

Amount of Each Receipt this Period
 1000.00

C. MICROSOFT CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
MICROSOFT CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 16011 NE 36TH WAY
BOX 97017

City REDMOND State WA Zip Code 98073

FEC ID number of contributing federal political committee. **C** C00227546

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
 12 / 27 / 2013

Transaction ID : SA11C.31595

Amount of Each Receipt this Period
 1000.00

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

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

7000.00

**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 65
	<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)
Robert Hurt for Congress

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF PROFESSIONAL SURPLUS LINES OFFICES (NAPSLO) PAC

Mailing Address 1050 K STREET, NW
SUITE 400

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00417634

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
 11 / 07 / 2013

Transaction ID : SA11C.31434

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 NORTH MICHIGAN AVENUE

City CHICAGO State IL Zip Code 60611

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
 12 / 23 / 2013

Transaction ID : SA11C.31586

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF RETAIL COLLECTION ATTORNEYS PACCA (PAC OF COLLECTION ATTORNEYS)

Mailing Address 1950 ROLAND CLARKE PL., SUITE 300

City RESTON State VA Zip Code 20191

FEC ID number of contributing federal political committee. **C** C00491589

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
 12 / 27 / 2013

Transaction ID : SA11C.31590

Amount of Each Receipt this Period
 2000.00

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: (check only one)	PAGE 28 OF 65
	<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)
Robert Hurt for Congress

A. Full Name (Last, First, Middle Initial)
OWENS-ILLINOIS INC EMPLOYEES GOOD CITIZENSHIP FUND

Mailing Address **ONE O-I PLAZA**
ONE MICHAEL OWENS WAY

City **PERRYSBURG** State **OH** Zip Code **43551**

FEC ID number of contributing federal political committee. **C C00034330**

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
12 / 16 / 2013

Transaction ID : SA11C.31582

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
PRIVATE EQUITY GROWTH CAPITAL COUNCIL POLITICAL ACTION COMMITTEE (PEGCC-PAC)

Mailing Address **950 F STREET NW SUITE 550**

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00495002**

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 Y
12 / 16 / 2013

Transaction ID : SA11C.31583

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
QUICKEN LOANS INC PAC

Mailing Address **101 S. WASHINGTON SQ.**
SUITE 620

City **LANSING** State **MI** Zip Code **48933**

FEC ID number of contributing federal political committee. **C C00388827**

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 Y
11 / 12 / 2013

Transaction ID : SA11C.31390

Amount of Each Receipt this Period
2500.00

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

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

6000.00

**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 65
	<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)
Robert Hurt for Congress

A. Full Name (Last, First, Middle Initial)
ROLLS-ROYCE NORTH AMERICA HOLDINGS INC. PAC (ROLLS-ROYCE NORTH AMERICA PAC)

Mailing Address 1875 Explorer Street, Suite 200
Suite 100

City Reston State VA Zip Code 20190

FEC ID number of contributing federal political committee. **C** C00296822

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2013

Transaction ID : SA11C.31599

Amount of Each Receipt this Period
 1000.00

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 M / D 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 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).....

1000.00

57072.50

**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 30 OF 65			
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Acqua AI 2			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address 212 7th Street Southeast			Amount of Each Disbursement this Period 135.85 Transaction ID : SB17.31474
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement catering for event		Candidate Name	Category/ Type 003
Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) B. Acqua AI 2			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address 212 7th Street Southeast			Amount of Each Disbursement this Period 18.40 Transaction ID : SB17.31479
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement travel - food		Candidate Name	Category/ Type 002
Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) C. Amazon.com			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 410 Terry Ave N			Amount of Each Disbursement this Period 65.40 Transaction ID : SB17.31522
City Seattle	State WA	Zip Code 98109	
Purpose of Disbursement gift items		Candidate Name	Category/ Type 001
Office Sought: <input 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: District:	

SUBTOTAL of Disbursements This Page (optional).....	219.65
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 31 OF 65	
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Amazon.com		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 410 Terry Ave N		Amount of Each Disbursement this Period 20.57 Transaction ID : SB17.31525
City Seattle	State WA	
Zip Code 98109	Purpose of Disbursement gift item	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) B. Amazon.com		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 410 Terry Ave N		Amount of Each Disbursement this Period 25.73 Transaction ID : SB17.31615
City Seattle	State WA	
Zip Code 98109	Purpose of Disbursement gift items	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) C. AMERICAN COUNCIL OF LIFE INSURERS POLITICAL ACTION COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address 101 CONSTITUTION AVE., NW SUITE 700		Amount of Each Disbursement this Period 675.00 Transaction ID : SB17.31320
City WASHINGTON	State DC	
Zip Code 20001	Purpose of Disbursement event expense - facility	Category/ Type 003
Candidate Name	Office Sought: <input 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: District:	

SUBTOTAL of Disbursements This Page (optional).....	721.30
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 32 OF 65			
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Aristotle			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013	
Mailing Address 205 Pennsylvania Ave SE			Amount of Each Disbursement this Period 1950.00	
City Washington	State DC	Zip Code 20003	Transaction ID : SB17.31300	
Purpose of Disbursement database services		001 Category/ Type		
Candidate Name				
Office Sought: <input 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: _____	District: _____			

Full Name (Last, First, Middle Initial) B. Ian Atkins			Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013	
Mailing Address 649 Jefferson Dr E			Amount of Each Disbursement this Period 250.00	
City Palmyra	State VA	Zip Code 22963	Transaction ID : SB17.31535	
Purpose of Disbursement photography for event		001 Category/ Type		
Candidate Name				
Office Sought: <input 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: _____	District: _____			

Full Name (Last, First, Middle Initial) c. Bearnise			Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2013	
Mailing Address 315 Pennsylvania Ave SE			Amount of Each Disbursement this Period 109.54	
City Washington	State DC	Zip Code 20003	Transaction ID : SB17.31335	
Purpose of Disbursement catering for event		003 Category/ Type		
Candidate Name				
Office Sought: <input 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: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional)	2309.54
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 33 OF 65			
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Kelly Bellis		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 210 B 73rd St		Amount of Each Disbursement this Period 165.95 Transaction ID : SB17.31302
City Virginia Beach	State VA	
Purpose of Disbursement reimbursement for flowers		Category/ Type 007
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) B. Kelly Bellis		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 210 B 73rd St		Amount of Each Disbursement this Period 1207.25 Transaction ID : SB17.31311
City Virginia Beach	State VA	
Purpose of Disbursement payroll		Category/ Type 001
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) c. Kelly Bellis		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013
Mailing Address 210 B 73rd St		Amount of Each Disbursement this Period 1207.25 Transaction ID : SB17.31339
City Virginia Beach	State VA	
Purpose of Disbursement payroll		Category/ Type 001
Candidate Name		
Office Sought: <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	2580.45
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 34 OF 65			
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Kelly Bellis		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 210 B 73rd St		Amount of Each Disbursement this Period 1207.25 Transaction ID : SB17.31375
City Virginia Beach	State VA	
Zip Code 23451	Purpose of Disbursement payroll	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) B. Kelly Bellis		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 210 B 73rd St		Amount of Each Disbursement this Period 1207.25 Transaction ID : SB17.31526
City Virginia Beach	State VA	
Zip Code 23451	Purpose of Disbursement payroll	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) C. Kelly Bellis		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013
Mailing Address 210 B 73rd St		Amount of Each Disbursement this Period 111.40 Transaction ID : SB17.31541
City Virginia Beach	State VA	
Zip Code 23451	Purpose of Disbursement reimbursement - flowers for event	Category/ Type 003
Candidate Name	Office Sought: <input 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: District:	

SUBTOTAL of Disbursements This Page (optional).....	2525.90
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 35 OF 65			
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Kelly Bellis		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 210 B 73rd St		Amount of Each Disbursement this Period 1207.25 Transaction ID : SB17.31546
City Virginia Beach	State VA	
Zip Code 23451	Purpose of Disbursement payroll	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) B. Kelly Bellis		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 210 B 73rd St		Amount of Each Disbursement this Period 1207.25 Transaction ID : SB17.31561
City Virginia Beach	State VA	
Zip Code 23451	Purpose of Disbursement payroll	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) c. Bobby Van's		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 809 15th St NW		Amount of Each Disbursement this Period 2403.70 Transaction ID : SB17.31531
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement catering for fundraising event	Category/ Type 003
Candidate Name	Office Sought: <input 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: District:	

SUBTOTAL of Disbursements This Page (optional).....	4818.20
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 36 OF 65			
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Bullfeathers			Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013	
Mailing Address 410 1st Street Southeast			Amount of Each Disbursement this Period 239.71	
City Washington	State DC	Zip Code 20003	Transaction ID : SB17.31472	
Purpose of Disbursement catering for event		Category/ Type 003		
Candidate Name				
Office Sought: <input 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: District:				

Full Name (Last, First, Middle Initial) B. Bullfeathers			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013	
Mailing Address 410 1st Street Southeast			Amount of Each Disbursement this Period 620.00	
City Washington	State DC	Zip Code 20003	Transaction ID : SB17.31613	
Purpose of Disbursement catering services		Category/ Type 003		
Candidate Name				
Office Sought: <input 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: District:				

Full Name (Last, First, Middle Initial) c. Campaign Solutions Inc.			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013	
Mailing Address 117 N Saint Asaph St			Amount of Each Disbursement this Period 668.22	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SB17.31295	
Purpose of Disbursement website hosting & maintenance, email services		Category/ Type 001		
Candidate Name				
Office Sought: <input 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: District:				

SUBTOTAL of Disbursements This Page (optional).....	1527.93
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 37 OF 65			
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Campaign Solutions Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013
Mailing Address 117 N Saint Asaph St		Amount of Each Disbursement this Period 2603.82 Transaction ID : SB17.31158
City Alexandria	State VA	
Purpose of Disbursement credit card processing fees		Category/ Type 003
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2013
Mailing Address 300 First St SE		Amount of Each Disbursement this Period 277.39 Transaction ID : SB17.31359
City Washington	State DC	
Purpose of Disbursement catering for event		Category/ Type 003
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 300 First St SE		Amount of Each Disbursement this Period 425.00 Transaction ID : SB17.31537
City Washington	State DC	
Purpose of Disbursement catering		Category/ Type 003
Candidate Name		
Office Sought: <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	3306.21
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 38 OF 65		
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address 300 First St SE		Amount of Each Disbursement this Period 462.40 Transaction ID : SB17.31628
City Washington	State DC Zip Code 20003	
Purpose of Disbursement catering services	Category/Type 003	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) B. Charley's		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address 707 Graves Mill Rd		Amount of Each Disbursement this Period 276.94 Transaction ID : SB17.31625
City Lynchburg	State VA Zip Code 24502	
Purpose of Disbursement catering services	Category/Type 003	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) C. Creative Direct LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 25 E Main St		Amount of Each Disbursement this Period 4460.00 Transaction ID : SB17.31299
City Richmond	State VA Zip Code 23219	
Purpose of Disbursement printing & mailing	Category/Type 003	
Candidate Name		
Office Sought: <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	5199.34
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 39 OF 65			
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Creative Direct LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address 25 E Main St		Amount of Each Disbursement this Period 4863.00 Transaction ID : SB17.31627
City Richmond	State VA Zip Code 23219	
Purpose of Disbursement printing and mailing	Category/Type 003	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) B. Davenport Energy		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 108 S Main St		Amount of Each Disbursement this Period 89.92 Transaction ID : SB17.31553
City Chatham	State VA Zip Code 24531	
Purpose of Disbursement office utilities	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) c. Davenport Energy		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address 108 S Main St		Amount of Each Disbursement this Period 89.92 Transaction ID : SB17.31616
City Chatham	State VA Zip Code 24531	
Purpose of Disbursement office utilities	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	5042.84
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 40 OF 65	
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. DC Taste		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 1600 Fitzgerald Ln		Amount of Each Disbursement this Period 2088.00 Transaction ID : SB17.31328
City Alexandria	State VA	
Zip Code 22302	Purpose of Disbursement catering for event	Category/ Type 003
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) B. Dominion Virginia Power		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013
Mailing Address P. O. Box 26543		Amount of Each Disbursement this Period 58.19 Transaction ID : SB17.31382
City Richmond	State VA	
Zip Code 23290	Purpose of Disbursement utilities	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) c. Dominion Virginia Power		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2013
Mailing Address P. O. Box 26543		Amount of Each Disbursement this Period 34.86 Transaction ID : SB17.31552
City Richmond	State VA	
Zip Code 23290	Purpose of Disbursement office utilities	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

SUBTOTAL of Disbursements This Page (optional).....	2181.05
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 41 OF 65			
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Dominion Virginia Power		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address P. O. Box 26543		Amount of Each Disbursement this Period 30.05 Transaction ID : SB17.31617
City Richmond	State VA Zip Code 23290	
Purpose of Disbursement office utilities	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) B. Eric Trump Wine		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 100 Grand Cru Dr		Amount of Each Disbursement this Period 1053.00 Transaction ID : SB17.31482
City Charlottesville	State VA Zip Code 22902	
Purpose of Disbursement catering for event	Category/Type 003	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) C. Eric Trump Wine		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 100 Grand Cru Dr		Amount of Each Disbursement this Period 16.85 Transaction ID : SB17.31498
City Charlottesville	State VA Zip Code 22902	
Purpose of Disbursement travel - food	Category/Type 002	
Candidate Name		
Office Sought: <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	1099.90
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 42 OF 65	
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Farmington Country Club		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2013
Mailing Address 1625 Country Club Cir		Amount of Each Disbursement this Period 1167.17 Transaction ID : SB17.31291
City Charlottesville	State VA Zip Code 22901	
Purpose of Disbursement catering for fundraising event	Category/Type 003	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) B. Forest Consulting Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address PO Box 1473		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.31297
City Richmond	State VA Zip Code 23218	
Purpose of Disbursement accounting/reporting	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) c. Forest Consulting Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address PO Box 1473		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.31481
City Richmond	State VA Zip Code 23218	
Purpose of Disbursement accounting/reporting	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	6167.17
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 43 OF 65			
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Forest Consulting Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address PO Box 1473		Amount of Each Disbursement this Period 2500.00
City Richmond	State VA	Zip Code 23218
Purpose of Disbursement accounting/reporting	Category/Type 001	
Candidate Name	Transaction ID : SB17.31547	
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) B. Hooks Solutions LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2013
Mailing Address 525 6th St SE		Amount of Each Disbursement this Period 10500.00
City Washington	State DC	Zip Code 20003
Purpose of Disbursement fundraising fees	Category/Type 003	
Candidate Name	Transaction ID : SB17.31289	
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) c. Hooks Solutions LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2013
Mailing Address 525 6th St SE		Amount of Each Disbursement this Period 10500.00
City Washington	State DC	Zip Code 20003
Purpose of Disbursement fundraising fees	Category/Type 003	
Candidate Name	Transaction ID : SB17.31445	
Office Sought: <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	23500.00
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 44 OF 65	
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Hooks Solutions LLC			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013	
Mailing Address 525 6th St SE			Amount of Each Disbursement this Period 10500.00	
City Washington	State DC	Zip Code 20003	Transaction ID : SB17.31584	
Purpose of Disbursement fundraising consulting and fees		Category/ Type 003		
Candidate Name				
Office Sought: <input 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: District:				

Full Name (Last, First, Middle Initial) B. ROBERT HURT			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013	
Mailing Address PO BOX 8			Amount of Each Disbursement this Period 118.06	
City CHATHAM	State VA	Zip Code 24531	Transaction ID : SB17.31317	
Purpose of Disbursement office electric bill reimbursement		Category/ Type 001		
Candidate Name				
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: 05				

Full Name (Last, First, Middle Initial) C. ROBERT HURT			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013	
Mailing Address PO BOX 8			Amount of Each Disbursement this Period 213.65	
City CHATHAM	State VA	Zip Code 24531	Transaction ID : SB17.31296	
Purpose of Disbursement mileage reimbursement		Category/ Type 002		
Candidate Name				
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: 05				

SUBTOTAL of Disbursements This Page (optional).....	10831.71
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 45 OF 65			
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. ROBERT HURT		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address PO BOX 8		Amount of Each Disbursement this Period 939.51 Transaction ID : SB17.31376
City CHATHAM State VA Zip Code 24531	Purpose of Disbursement mileage reimbursement Candidate Name Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 05	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. ROBERT HURT		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address PO BOX 8		Amount of Each Disbursement this Period 788.11 Transaction ID : SB17.31548
City CHATHAM State VA Zip Code 24531	Purpose of Disbursement mileage reimbursement Candidate Name Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 05	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Keswick Hall		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 701 Club Dr		Amount of Each Disbursement this Period 17.00 Transaction ID : SB17.31501
City Keswick State VA Zip Code 22947	Purpose of Disbursement travel - food Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	939.51
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 46 OF 65			
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. King Family Vineyards		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 6550 Roseland Farm		Amount of Each Disbursement this Period 621.88 Transaction ID : SB17.31513
City Crozet	State VA	
Zip Code 22932	Purpose of Disbursement catering for fundraising event	Category/ Type 003
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) B. Lola's Barracks Bar		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address 711 8th St SE		Amount of Each Disbursement this Period 42.20 Transaction ID : SB17.31336
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement travel - food	Category/ Type 002
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) c. Lola's Barracks Bar		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 711 8th St SE		Amount of Each Disbursement this Period 23.80 Transaction ID : SB17.31337
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement travel - food	Category/ Type 002
Candidate Name	Office Sought: <input 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: District:	

SUBTOTAL of Disbursements This Page (optional).....	687.88
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 47 OF 65			
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Lola's Barracks Bar		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address 711 8th St SE		Amount of Each Disbursement this Period 621.90 Transaction ID : SB17.31480
City Washington State DC Zip Code 20003	Purpose of Disbursement travel - food Candidate Name Category/Type 002	
Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) B. Lola's Barracks Bar		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 711 8th St SE		Amount of Each Disbursement this Period 32.40 Transaction ID : SB17.31559
City Washington State DC Zip Code 20003	Purpose of Disbursement travel - food Candidate Name Category/Type 002	
Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) c. Magnolia Food		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address 2476 Rivermont Ave		Amount of Each Disbursement this Period 565.90 Transaction ID : SB17.31623
City Lynchburg State VA Zip Code 24503	Purpose of Disbursement catering services Candidate Name Category/Type 003	
Office Sought: <input 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: District:	

SUBTOTAL of Disbursements This Page (optional).....	621.90
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 48 OF 65			
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial)
A. Matchbox

Mailing Address 713 H St NW

City Washington State DC Zip Code 20001

Purpose of Disbursement travel - food

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 15 / 2013

Amount of Each Disbursement this Period: 38.90

Transaction ID : SB17.31340

Category/Type: 002

Full Name (Last, First, Middle Initial)
B. Molly Malone's

Mailing Address 713 8th Street Southeast

City Washington State DC Zip Code 20003

Purpose of Disbursement travel - food

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 22 / 2013

Amount of Each Disbursement this Period: 10.80

Transaction ID : SB17.31353

Category/Type: 002

Full Name (Last, First, Middle Initial)
c. Molly Malone's

Mailing Address 713 8th Street Southeast

City Washington State DC Zip Code 20003

Purpose of Disbursement catering services

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 16 / 2013

Amount of Each Disbursement this Period: 1950.00

Transaction ID : SB17.31621

Category/Type: 003

SUBTOTAL of Disbursements This Page (optional) 1999.70

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 49 OF 65	
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Navigators Global LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address 901 7th St NW 2nd Floor		Amount of Each Disbursement this Period 447.55 Transaction ID : SB17.31294
City Washington State DC Zip Code 20001	Purpose of Disbursement event space fee 003 Category/Type	
Candidate Name	Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) B. Network Solutions		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013
Mailing Address 13861 Sunrise Valley Dr Ste 300		Amount of Each Disbursement this Period 713.79 Transaction ID : SB17.31343
City Herndon State VA Zip Code 20171	Purpose of Disbursement website hosting/maintenance 001 Category/Type	
Candidate Name	Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 551 Hilltop West Shopping Center		Amount of Each Disbursement this Period 147.30 Transaction ID : SB17.31493
City Virginia Beach State VA Zip Code 23454	Purpose of Disbursement office supplies 001 Category/Type	
Candidate Name	Office Sought: <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	1308.64
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 50 OF 65		
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Palladio		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 17655 Winery Rd		Amount of Each Disbursement this Period 2122.05 Transaction ID : SB17.31496
City Barboursville	State VA	
Zip Code 22923	Purpose of Disbursement catering for fundraising event	Category/ Type 003
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) B. Pat's Floral Designs		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 1694 N Main St		Amount of Each Disbursement this Period 263.25 Transaction ID : SB17.31517
City Madison	State VA	
Zip Code 22727	Purpose of Disbursement flowers for fundraising event	Category/ Type 003
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) C. Postmaster		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2013
Mailing Address 31 S Main St		Amount of Each Disbursement this Period 46.00 Transaction ID : SB17.31334
City Chatham	State VA	
Zip Code 24531	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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2431.30
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 51 OF 65			
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. Postmaster		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>15</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		15		2013
M M	/	D D	/	Y Y Y Y									
10		15		2013									
Mailing Address 31 S Main St		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Chatham</td> <td>VA</td> <td>24531</td> </tr> </table>		City	State	Zip Code	Chatham	VA	24531	<table border="1"> <tr> <td>8 6 4 0</td> </tr> </table>		8 6 4 0			
City	State	Zip Code											
Chatham	VA	24531											
8 6 4 0													
Purpose of Disbursement postage		<table border="1"> <tr> <td>001</td> </tr> </table>		001									
001													
Candidate Name		Transaction ID : SB17.31342											
Office Sought:		Disbursement For: 2014											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. Postmaster		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>24</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		24		2013
M M	/	D D	/	Y Y Y Y									
10		24		2013									
Mailing Address 31 S Main St		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Chatham</td> <td>VA</td> <td>24531</td> </tr> </table>		City	State	Zip Code	Chatham	VA	24531	<table border="1"> <tr> <td>3 6 8 0</td> </tr> </table>		3 6 8 0			
City	State	Zip Code											
Chatham	VA	24531											
3 6 8 0													
Purpose of Disbursement postage		<table border="1"> <tr> <td>001</td> </tr> </table>		001									
001													
Candidate Name		Transaction ID : SB17.31469											
Office Sought:		Disbursement For: 2014											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. Postmaster		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>07</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	11		07		2013
M M	/	D D	/	Y Y Y Y									
11		07		2013									
Mailing Address 31 S Main St		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Chatham</td> <td>VA</td> <td>24531</td> </tr> </table>		City	State	Zip Code	Chatham	VA	24531	<table border="1"> <tr> <td>4 6 0 0</td> </tr> </table>		4 6 0 0			
City	State	Zip Code											
Chatham	VA	24531											
4 6 0 0													
Purpose of Disbursement postage		<table border="1"> <tr> <td>001</td> </tr> </table>		001									
001													
Candidate Name		Transaction ID : SB17.31490											
Office Sought:		Disbursement For: 2014											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:													

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td>8 6 4 0</td> </tr> </table>	8 6 4 0
8 6 4 0		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td> </td> </tr> </table>	

**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 52 OF 65			
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Postmaster		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013
Mailing Address 31 S Main St		Amount of Each Disbursement this Period 46.00 Transaction ID : SB17.31545
City Chatham	State VA	
Zip Code 24531	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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Postmaster		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2013
Mailing Address 31 S Main St		Amount of Each Disbursement this Period 46.00 Transaction ID : SB17.31634
City Chatham	State VA	
Zip Code 24531	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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Rayburn Cafeteria		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address 45 Independence Ave SW		Amount of Each Disbursement this Period 46.90 Transaction ID : SB17.31557
City Washington	State DC	
Zip Code 20515	Purpose of Disbursement travel - food	Category/ Type 002
Candidate Name	Office Sought: <input 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: District:	

SUBTOTAL of Disbursements This Page (optional).....	138.90
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 53 OF 65			
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Regnery Publishing Inc.			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013	
Mailing Address 1 Massachusetts Ave NW			Amount of Each Disbursement this Period 41.94	
City Washington	State DC	Zip Code 20001	Transaction ID : SB17.31612	
Purpose of Disbursement book		Category/ Type		
Candidate Name				
Office Sought: <input 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: District:				

Full Name (Last, First, Middle Initial) B. Richmond Times-Dispatch			Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013	
Mailing Address 300 E Franklin St			Amount of Each Disbursement this Period 141.50	
City Richmond	State VA	Zip Code 23219	Transaction ID : SB17.31549	
Purpose of Disbursement subscription		Category/ Type 001		
Candidate Name				
Office Sought: <input 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: District:				

Full Name (Last, First, Middle Initial) C. Rose's Luxury			Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2013	
Mailing Address 717 8th Street SE			Amount of Each Disbursement this Period 84.30	
City Washington	State DC	Zip Code 20003	Transaction ID : SB17.31610	
Purpose of Disbursement catering for event		Category/ Type 003		
Candidate Name				
Office Sought: <input 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: District:				

SUBTOTAL of Disbursements This Page (optional).....	267.74
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 54 OF 65	
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Rose's Luxury		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 717 8th Street SE		Amount of Each Disbursement this Period 20.60 Transaction ID : SB17.31619
City Washington State DC Zip Code 20003	Purpose of Disbursement travel - food Candidate Name Category/Type 002	
Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) B. Simplicity		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 6402 Arlington Blvd		Amount of Each Disbursement this Period 422.40 Transaction ID : SB17.31318
City Falls Church State VA Zip Code 22042	Purpose of Disbursement catering for event Candidate Name Category/Type 007	
Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) c. Sonoma Restaurant		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address 223 Pennsylvania Ave SE		Amount of Each Disbursement this Period 897.75 Transaction ID : SB17.31475
City Washington State DC Zip Code 20003	Purpose of Disbursement catering for event Candidate Name Category/Type 003	
Office Sought: <input 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: District:	

SUBTOTAL of Disbursements This Page (optional).....	1340.75
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 55 OF 65		
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Starlight Express		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 18 New Life Dr		Amount of Each Disbursement this Period 764.30 Transaction ID : SB17.31494
City Ruckersville State VA Zip Code 22968	Purpose of Disbursement transportation Candidate Name Category/Type 003	
Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) B. Starlight Express		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 18 New Life Dr		Amount of Each Disbursement this Period 764.30 Transaction ID : SB17.31519
City Ruckersville State VA Zip Code 22968	Purpose of Disbursement transportation Candidate Name Category/Type 003	
Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) c. Target		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address 155 Holt Garrison Pkwy		Amount of Each Disbursement this Period 122.84 Transaction ID : SB17.31491
City Danville State VA Zip Code 24540	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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1651.44
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 56 OF 65	
	<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)
Robert Hurt for Congress

A. The Downtown Grille

Full Name (Last, First, Middle Initial)
Mailing Address 201 W Main St

City Charlottesville State VA Zip Code 22902

Purpose of Disbursement catering for fundraising event

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 12 / 2013

Amount of Each Disbursement this Period: 575.18

Transaction ID : SB17.31502

Category/Type: 003

B. Town of Chatham

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 370

City Chatham State VA Zip Code 24531

Purpose of Disbursement utilities

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 01 / 2013

Amount of Each Disbursement this Period: 134.85

Transaction ID : SB17.31316

Category/Type: 001

c. Town of Chatham

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 370

City Chatham State VA Zip Code 24531

Purpose of Disbursement office utilities

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 15 / 2013

Amount of Each Disbursement this Period: 134.85

Transaction ID : SB17.31618

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) 844.85

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 57 OF 65			
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Tune Inn Inc		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 331 Pennsylvania Ave SE		Amount of Each Disbursement this Period 39.70
City Washington	State DC Zip Code 20003	
Purpose of Disbursement travel - food	Category/Type 002	Transaction ID : SB17.31558
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) B. United States Treasury		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013
Mailing Address IRS Service Center		Amount of Each Disbursement this Period 683.00
City Austin	State TX Zip Code 73301	
Purpose of Disbursement federal payroll taxes	Category/Type 001	Transaction ID : SB17.31341
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) c. United States Treasury		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address IRS Service Center		Amount of Each Disbursement this Period 683.00
City Austin	State TX Zip Code 73301	
Purpose of Disbursement federal payroll taxes	Category/Type 001	Transaction ID : SB17.31527
Candidate Name		
Office Sought: <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	1405.70
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 58 OF 65			
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. United States Treasury			Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2013		
Mailing Address IRS Service Center			Amount of Each Disbursement this Period 683.00		
City Austin	State TX	Zip Code 73301	Transaction ID : SB17.31611		
Purpose of Disbursement federal payroll taxes		001 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Verizon			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013		
Mailing Address PO Box 660720			Amount of Each Disbursement this Period 153.51		
City Dallas	State TX	Zip Code 75266	Transaction ID : SB17.31313		
Purpose of Disbursement telephone service		001 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) c. Verizon			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013		
Mailing Address PO Box 660720			Amount of Each Disbursement this Period 153.64		
City Dallas	State TX	Zip Code 75266	Transaction ID : SB17.31393		
Purpose of Disbursement telephone service		001 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	990.15
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 59 OF 65			
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address PO Box 660720		Amount of Each Disbursement this Period 153.73 Transaction ID : SB17.31622
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement telephone service	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 787.67 Transaction ID : SB17.31315
City Lehigh Valley	State PA	
Zip Code 18002	Purpose of Disbursement cell phone service	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2013
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 970.12 Transaction ID : SB17.31392
City Lehigh Valley	State PA	
Zip Code 18002	Purpose of Disbursement cell phone service	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

SUBTOTAL of Disbursements This Page (optional).....	1911.52
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 60 OF 65			
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 782.74 Transaction ID : SB17.31562
City Lehigh Valley	State PA	
Zip Code 18002	Purpose of Disbursement cell phone service	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) B. Virginia Department of Taxation		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2013
Mailing Address PO Box 1500		Amount of Each Disbursement this Period 142.22 Transaction ID : SB17.31312
City Richmond	State VA	
Zip Code 23218	Purpose of Disbursement state withholding tax	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) C. Virginia Department of Taxation		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2013
Mailing Address PO Box 1500		Amount of Each Disbursement this Period 132.00 Transaction ID : SB17.31473
City Richmond	State VA	
Zip Code 23218	Purpose of Disbursement state payroll taxes	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

SUBTOTAL of Disbursements This Page (optional).....	1056.96
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 61 OF 65			
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Virginia Department of Taxation		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address PO Box 1500		Amount of Each Disbursement this Period 132.00 Transaction ID : SB17.31466
City Richmond	State VA Zip Code 23218	
Purpose of Disbursement state payroll taxes	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) B. Virginia Department of Taxation		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address PO Box 1500		Amount of Each Disbursement this Period 132.00 Transaction ID : SB17.31636
City Richmond	State VA Zip Code 23218	
Purpose of Disbursement state payroll taxes	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) c. W. Curtis Draper Tobacconist		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2013
Mailing Address 5458 3rd Street Northeast		Amount of Each Disbursement this Period 148.42 Transaction ID : SB17.31485
City Washington	State DC Zip Code 20005	
Purpose of Disbursement cigars for fundraising event	Category/Type 003	
Candidate Name		
Office Sought: <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	412.42
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 62 OF 65			
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Wintergreen Resort		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address PO Box 706		Amount of Each Disbursement this Period 742.38
City Wintergreen	State VA	Zip Code 22958
Purpose of Disbursement catering services	Category/Type 003	
Candidate Name	Transaction ID : SB17.31629	
Office Sought: <input 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: District:		

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
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:		

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).....	742.38
TOTAL This Period (last page this line number only).....	90869.36

**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 63 OF 65
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Cindi Burket for Supervisor		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address PO Box 318		Amount of Each Disbursement this Period 250.00 Transaction ID : SB21.31368
City Free Union	State VA Zip Code 22940	
Purpose of Disbursement non-federal contribution	011 Category/Type	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) B. Danny Marshall Election Committee		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address PO Box 439		Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.31308
City Danville	State VA Zip Code 24543	
Purpose of Disbursement non-federal contribution	011 Category/Type	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) C. Duane Snow for Supervisor		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 905 Leigh Way		Amount of Each Disbursement this Period 250.00 Transaction ID : SB21.31366
City Charlottesville	State VA Zip Code 22902	
Purpose of Disbursement non-federal contribution	011 Category/Type	
Candidate Name		
Office Sought: <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	1000.00
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 64 OF 65			
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Friends of Barbara Comstock		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address PO Box 6171		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.31349
City McLean	State VA	
Zip Code 22106	Purpose of Disbursement non-federal contribution	Category/ Type 011
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) B. Friends of Les Adams		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address PO Box 459		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.31358
City Chatham	State VA	
Zip Code 24531	Purpose of Disbursement non-federal contribution	Category/ Type 011
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) C. Friends of Scott Lingamfelter		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 5420 Lomax Way		Amount of Each Disbursement this Period 250.00 Transaction ID : SB21.31304
City Woodbridge	State VA	
Zip Code 22193	Purpose of Disbursement non-federal contribution	Category/ Type 011
Candidate Name	Office Sought: <input 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: District:	

SUBTOTAL of Disbursements This Page (optional).....	2250.00
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 65 OF 65
	<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)
Robert Hurt for Congress

Full Name (Last, First, Middle Initial) A. Obenshain for Attorney General		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address PO Box 70099		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.31363
City Richmond	State VA	
Zip Code 23255	Purpose of Disbursement non-federal contribution	Category/ Type 011
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) B. Rodney Thomas for Supervisor		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 3411 North Indian Spring Rd		Amount of Each Disbursement this Period 250.00 Transaction ID : SB21.31364
City Charlottesville	State VA	
Zip Code 22901	Purpose of Disbursement non-federal contribution	Category/ Type 011
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) c. The Family Foundation of Virginia		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address 919 E Main St Ste 1110		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB21.31357
City Richmond	State VA	
Zip Code 23219	Purpose of Disbursement donation	Category/ Type 012
Candidate Name	Office Sought: <input 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: District:	

SUBTOTAL of Disbursements This Page (optional).....	2750.00
TOTAL This Period (last page this line number only).....	6000.00