

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5
David Smith for Congress

ADDRESS (number and street) PO Box 195128
 Check if different than previously reported. (ACC) Winter Springs FL 32719

2. **FEC IDENTIFICATION NUMBER** ▼ C C00551879 CITY ▲ STATE ▲ ZIP CODE ▲
3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE ▼ DISTRICT
FL 07

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y
10 / 01 / 2013 through 12 / 31 / 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Thomas Martin Kiernan

Signature of Treasurer Thomas Martin Kiernan [Electronically Filed] Date M M / D D / Y Y Y Y
01 / 31 / 2014

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

David Smith for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2013 To: M M / D D / Y Y Y Y 12 / 31 / 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))....	65525.00	65525.00
(b) Total Contribution Refunds (from Line 20(d))	299.00	299.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	65226.00	65226.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	12434.04	12434.04
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	12434.04	12434.04
8. Cash on Hand at Close of Reporting Period (from Line 27).....	52891.96	
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).....	47561.29	

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

David Smith 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).....	56050.00	56050.00
(ii) Unitemized.....	9475.00	9475.00
(iii) TOTAL of contributions from individuals ▶	65525.00	65525.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	65525.00	65525.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	100.00	100.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	100.00	100.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	65625.00	65625.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	12434.04	12434.04
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	299.00	299.00
(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)).....	299.00	299.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	12733.04	12733.04

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	65625.00
25. SUBTOTAL (add Line 23 and Line 24).....	65625.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	12733.04
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	52891.96

**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 90
	<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)
David Smith for Congress

A. Full Name (Last, First, Middle Initial)
Roger Azevedo

Mailing Address 233 Walton Heath Drive

City Orlando State FL Zip Code 32828

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

Name of Employer Self Employed Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 02 / 2013

Transaction ID : SA11AI.7323

Amount of Each Receipt this Period
 Campaign Contribution 300.00

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

Mailing Address 1535 Warner Drive

City Chuluota State FL Zip Code 32766

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

Name of Employer ProActive Technologies LLC Occupation Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 22 / 2013

Transaction ID : SA11AI.7288

Amount of Each Receipt this Period
 Campaign Contribution 500.00

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

Mailing Address 1132 ODay Drive

City Winter Springs State FL Zip Code 32708

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

Name of Employer Lockheed Martin Corporation Occupation Senior Staff Business Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 24 / 2013

Transaction ID : SA11AI.7297

Amount of Each Receipt this Period
 Campaign Contribution 500.00

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 6 OF 90
	<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)
David Smith for Congress

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

Mailing Address 13961 Myrtlewood Drive

City Orlando State FL Zip Code 32832

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

Name of Employer Airtran Airways Occupation Airline Pilot

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 28 / 2013

Transaction ID : SA11AI.7314

Amount of Each Receipt this Period
 Campaign Contribution 250.00

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

Mailing Address 4607 Wilson Court

City Lexington Park State MD Zip Code 20653

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

Name of Employer JHU/APL Occupation Sr. Systems Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 26 / 2013

Transaction ID : SA11AI.7310

Amount of Each Receipt this Period
 Campaign Contribution 250.00

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

Mailing Address 3417 Pinetree Rd

City Orlando State FL Zip Code 32804

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

Name of Employer Robinson Busch, Inc. Occupation COO

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 : SA11AI.7384

Amount of Each Receipt this Period
 Campaign Contribution 2600.00

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

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

3100.00

**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 90
	<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)
David Smith for Congress

A. Full Name (Last, First, Middle Initial)
Todd Butler

Mailing Address 12045 Shadowbrook Lane

City Orlando State FL Zip Code 32828

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

Name of Employer: Jacobs ASG Occupation: Program Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt: 11 / 25 / 2013

Transaction ID : SA11AI.7304

Amount of Each Receipt this Period: 350.00

Campaign Contribution

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

Mailing Address 1500 Independence Ave

City Oviedo State FL Zip Code 32765

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: 11 / 19 / 2013

Transaction ID : SA11AI.7265

Amount of Each Receipt this Period: 1000.00

Campaign Contribution

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

Mailing Address 2457 Guiana Plum Drive

City Orlando State FL Zip Code 32828

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

Name of Employer: PMTRASYS, Marine Corps Systems Command Occupation: Program Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt: 11 / 24 / 2013

Transaction ID : SA11AI.7298

Amount of Each Receipt this Period: 300.00

Campaign Contribution

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

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

1650.00

**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 90
	<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)
David Smith for Congress

A. Full Name (Last, First, Middle Initial)
Angie Chapman

Mailing Address 8536 butternut blvd

City Orlando State FL Zip Code 32817

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

Name of Employer Scientific Learning Corp Occupation Account Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : SA11AI.7279

Amount of Each Receipt this Period
250.00

Campaign Contribution

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

Mailing Address 4587 Seafarer Way

City Orlando State FL Zip Code 32817

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

Name of Employer Tekontrol, LLC Occupation COO

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
 11 / 22 / 2013

Transaction ID : SA11AI.7289

Amount of Each Receipt this Period
500.00

Campaign Contribution

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

Mailing Address 4587 Seafarer Way

City Orlando State FL Zip Code 32817

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

Name of Employer Tekontrol, LLC Occupation COO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 29 / 2013

Transaction ID : SA11AI.7391

Amount of Each Receipt this Period
250.00

Campaign Contribution

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 9 OF 90
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Lisa Coe		Date of Receipt M M / D D / Y Y Y Y 11 / 17 / 2013
Mailing Address 7486 Lake Marsha Dr		Transaction ID : SA11AI.7254
City Orlando	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self Employed	Occupation Business Owner	Campaign Contribution
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Bryan Cole		Date of Receipt M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address 151Trismen Terrace		Transaction ID : SA11AI.7363
City Winter Park	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer CESI	Occupation CEO	Campaign Contribution
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. Patrick Connors		Date of Receipt M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 629 E Livingston St		Transaction ID : SA11AI.7280
City Orlando	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer US Army	Occupation Army Colonel	Campaign Contribution
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 90
	<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)
David Smith for Congress

A. Full Name (Last, First, Middle Initial)
Pete Coz

Mailing Address 1827 Bailey Dr

City State Zip Code
Oceanside CA 92054

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

Name of Employer Occupation
NA Pilot

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 29 / 2013

Transaction ID : SA11AI.7392

Amount of Each Receipt this Period
250.00
Campaign Contribution

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

Mailing Address 9726 Meyer Point Drive

City State Zip Code
Potomac MD 20854

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

Name of Employer Occupation
Tatitlek Corporation Executive Director

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 / 15 / 2013

Transaction ID : SA11AI.7249

Amount of Each Receipt this Period
1000.00
Campaign Contribution

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

Mailing Address 9726 Meyer Point Drive

City State Zip Code
Potomac MD 20854

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

Name of Employer Occupation
Tatitlek Corporation Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

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

Transaction ID : SA11AI.7397

Amount of Each Receipt this Period
250.00
Campaign Contribution

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

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

1500.00

**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 90
	<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)
David Smith for Congress

A. Full Name (Last, First, Middle Initial)
Christina Crowley

Mailing Address 45765 Stoney Run Drive

City Great Mills	State MD	Zip Code 20634
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FEC ID number of contributing federal political committee. **C**

Name of Employer Navy	Occupation Engineer
--------------------------	------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 19 / 2013

Transaction ID : SA11AI.7267

Amount of Each Receipt this Period
 Campaign Contribution
 250.00

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

Mailing Address 255 Rudd Road

City Vista	State CA	Zip Code 92084
---------------	-------------	-------------------

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

Name of Employer Self Employed	Occupation Educational Consulant/Tutor
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Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 18 / 2013

Transaction ID : SA11AI.7256

Amount of Each Receipt this Period
 Campaign Contribution
 250.00

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

Mailing Address 21750 Laurel Wood Court

City Leesburg	State MD	Zip Code 20175
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FEC ID number of contributing federal political committee. **C**

Name of Employer Precise Systems, Inc.	Occupation CEO
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Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 15 / 2013

Transaction ID : SA11AI.7353

Amount of Each Receipt this Period
 Campaign Contribution
 1000.00

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

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

1500.00

**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 90
	<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)
David Smith for Congress

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

Mailing Address 6980 Roswell Rd NE
Unit O-1

City Atlanta State GA Zip Code 30328

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

Name of Employer Eagle Strategic Management Solutions Occupation Management Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 19 / 2013

Transaction ID : SA11AI.7268

Amount of Each Receipt this Period
500.00

Campaign Contribution

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

Mailing Address 10135 Tierra Bella Drive

City Orlando State FL Zip Code 32825

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

Name of Employer Innovative Reasoning Occupation Defense Industry

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 24 / 2013

Transaction ID : SA11AI.7300

Amount of Each Receipt this Period
500.00

Campaign Contribution

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

Mailing Address 39695 Corte Santa Barbara

City Murrieta State CA Zip Code 92563

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

Name of Employer CUBic Corporation Occupation Contract Simulator Instructor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 24 / 2013

Transaction ID : SA11AI.7301

Amount of Each Receipt this Period
500.00

Campaign Contribution

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

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

1500.00

**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 90
	<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)
David Smith for Congress

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

Mailing Address 16610 Accolon Court

City Dumfries State VA Zip Code 22025

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

Name of Employer A-T Solutions Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.7403

Amount of Each Receipt this Period
250.00

Campaign Contribution

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

Mailing Address PO Box 2575

City Taos State NM Zip Code 87571

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

Name of Employer Black Mesa Winery, LLC Occupation Business Manager

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
 11 / 18 / 2013

Transaction ID : SA11AI.7257

Amount of Each Receipt this Period
500.00

Campaign Contribution

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

Mailing Address 1469 O'Conner Ave

City Melbourne State FL Zip Code 32940

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

Name of Employer Patriot Products LLC Occupation Range Requirements Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 26 / 2013

Transaction ID : SA11AI.7311

Amount of Each Receipt this Period
250.00

Campaign Contribution

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 14 OF 90
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. James Dutton		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 24 / 2013
Mailing Address 209 NE 3rd St		Transaction ID : SA11AI.7377
City Satellie Beach	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Retired	Occupation Retired	Campaign Contribution
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) B. A. Michael Edwards		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 28 / 2013
Mailing Address 115 Arrowhead Ct		Transaction ID : SA11AI.7315
City Winter Springs	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer AME Business Solutions	Occupation President	Campaign Contribution
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) C. Michael Flanagan		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 18 / 2013
Mailing Address 4030 Freesia Cove		Transaction ID : SA11AI.7258
City Oviedo	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer CACI-Fed, Inc.	Occupation Executive	Campaign Contribution
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	3750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 90
	<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)
David Smith for Congress

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

Mailing Address 1701 Foelker Road
Deland

City State Zip Code
Florida FL 32724

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

Name of Employer Occupation
MARCORSYSCOM / PM TRASYS Deputy Product Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 15 / 2013

Transaction ID : SA11AI.7354

Amount of Each Receipt this Period
250.00

Campaign Contribution

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

Mailing Address 6859 E Culver Street

City State Zip Code
Mesa AZ 85207

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

Name of Employer Occupation
Phoenix Logistics Inc. Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 31 / 2013

Transaction ID : SA11AI.7406

Amount of Each Receipt this Period
1000.00

Campaign Contribution

C. Full Name (Last, First, Middle Initial)
Kathleen Gallagher-McIver

Mailing Address 1181 Woodland Terrace Trail

City State Zip Code
Altamonte Springs FL 32714

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

Name of Employer Occupation
RE/MAX Town and Country Realty Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 14 / 2013

Transaction ID : SA11AI.7239

Amount of Each Receipt this Period
500.00

Campaign Contribution

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 90
	<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)
David Smith for Congress

A. Full Name (Last, First, Middle Initial)
Mike Galyean

Mailing Address 746 McIntyre Ave.

City Winter Park	State FL	Zip Code 32789
---------------------	-------------	-------------------

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
 12 / 07 / 2013

Transaction ID : SA11AI.7329

Amount of Each Receipt this Period
 _____ 250.00

Campaign Contribution

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

Mailing Address 30931 Fairview Ave

City Tavares	State FL	Zip Code 32778
-----------------	-------------	-------------------

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

Name of Employer FAAC Incorporated	Occupation Director, Business Development
---------------------------------------	--

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 25 / 2013

Transaction ID : SA11AI.7306

Amount of Each Receipt this Period
 _____ 250.00

Campaign Contribution

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

Mailing Address 239 Chestnut Ridge St

City Winter Springs	State FL	Zip Code 32708
------------------------	-------------	-------------------

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

Name of Employer US Army PEO STRI	Occupation Project Manager/Electronics Engineer
--------------------------------------	--

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 23 / 2013

Transaction ID : SA11AI.7295

Amount of Each Receipt this Period
 _____ 500.00

Campaign Contribution

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 17 OF 90
	<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)
David Smith for Congress

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

Mailing Address 107 Boros Lndg

City State Zip Code
New Bern NC 28560

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

Name of Employer Occupation
The Boeing Company Customer Rep

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 24 / 2013

Transaction ID : SA11AI.7302

Amount of Each Receipt this Period
250.00

Campaign Contribution

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

Mailing Address 19054 Coton Farm Ct

City State Zip Code
Leesburg VA 20176

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

Name of Employer Occupation
Self Employed Cobra Pilot

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 24 / 2013

Transaction ID : SA11AI.7378

Amount of Each Receipt this Period
250.00

Campaign Contribution

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

Mailing Address 2518 Stanford Ct

City State Zip Code
Carrollton TX 75006

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

Name of Employer Occupation
Freese & Nichols Inc. Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 19 / 2013

Transaction ID : SA11AI.7271

Amount of Each Receipt this Period
2600.00

Campaign Contribution

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

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

3100.00

**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 90
	<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)
David Smith for Congress

A. Full Name (Last, First, Middle Initial)
Renata Hutak

Mailing Address 219 South Royal St

City	State	Zip Code
Alexandria	VA	22314

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
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.7410

Amount of Each Receipt this Period
 250.00
 Campaign Contribution

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

Mailing Address 1478 Towhee Run

City	State	Zip Code
Oviedo	FL	32765

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

Name of Employer	Occupation
Raydon Corporation	Defense Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 18 / 2013

Transaction ID : SA11AI.7261

Amount of Each Receipt this Period
 250.00
 Campaign Contribution

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

Mailing Address 1768 Carillon Park Drive

City	State	Zip Code
Oviedo	FL	32765

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

Name of Employer	Occupation
SimSTAFF	Business Development

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.7411

Amount of Each Receipt this Period
 250.00
 Campaign Contribution

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 90
	<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)
David Smith for Congress

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

Mailing Address **PO Box 1216**

City **Locust Grove** State **VA** Zip Code **22508**

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

Name of Employer **Self Employed** Occupation **Defense Contracting**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
12 / 10 / 2013

Transaction ID : SA11AI.7337

Amount of Each Receipt this Period
1000.00

Campaign Contribution

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

Mailing Address **1188 Gulfstar Dr**

City **Winter Springs** State **FL** Zip Code **32708**

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

Name of Employer **Wegmann USA** Occupation **Director of Training & Simulation**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
11 / 19 / 2013

Transaction ID : SA11AI.7272

Amount of Each Receipt this Period
2600.00

Campaign Contribution

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

Mailing Address **201 Arrowhead Ct**

City **Winter Springs** State **FL** Zip Code **32708**

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

Name of Employer **CAE USA** Occupation **Program Director**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
11 / 19 / 2013

Transaction ID : SA11AI.7273

Amount of Each Receipt this Period
500.00

Campaign Contribution

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 20 OF 90
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Stuart Knoll		Date of Receipt M M / D D / Y Y Y Y 12 / 27 / 2013	
Mailing Address 201 Arrowhead Ct		Transaction ID : SA11AI.7386	
City Winter Springs	State FL	Zip Code 32708	Amount of Each Receipt this Period Campaign Contribution 400.00
FEC ID number of contributing federal political committee. C			
Name of Employer CAE USA	Occupation Program Director		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 900.00		

Full Name (Last, First, Middle Initial) B. Len Kravitz		Date of Receipt M M / D D / Y Y Y Y 12 / 09 / 2013	
Mailing Address 11922 Kipper Drive		Transaction ID : SA11AI.7332	
City Orlando	State FL	Zip Code 32827	Amount of Each Receipt this Period Campaign Contribution 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer LRK Associates, Inc.	Occupation President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) C. Barbara Leach		Date of Receipt M M / D D / Y Y Y Y 11 / 14 / 2013	
Mailing Address 124-A East Colonial Dr		Transaction ID : SA11AI.7242	
City Orlando	State FL	Zip Code 32801	Amount of Each Receipt this Period Campaign Contribution 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Barbara Leach Law	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	900.00

**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 90
	<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)
David Smith for Congress

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

Mailing Address 860 Manchester Ave

City: Oviedo State: FL Zip Code: 32765

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

Name of Employer: GL United LLC Occupation: President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 12 / 01 / 2013

Transaction ID : SA11AI.7321

Amount of Each Receipt this Period: 500.00

Campaign Contribution

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

Mailing Address 401 Grey Lag Ln

City: Swansboro State: NC Zip Code: 28584

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

Name of Employer: Serco, NA Occupation: Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 12 / 10 / 2013

Transaction ID : SA11AI.7338

Amount of Each Receipt this Period: 250.00

Campaign Contribution

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

Mailing Address 14815 E 24th St N

City: Wichita State: KS Zip Code: 67228

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

Name of Employer: Bombardier Aerospace Occupation: Experimental Test Pilot

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 11 / 21 / 2013

Transaction ID : SA11AI.7283

Amount of Each Receipt this Period: 250.00

Campaign Contribution

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 22 OF 90
	<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)
David Smith for Congress

A. Full Name (Last, First, Middle Initial)
Sean Mattingly

Mailing Address 407 Madison Manor Ct

City Herndon State VA Zip Code 20170

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

Name of Employer Serco Occupation Manager

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.7251

Amount of Each Receipt this Period
 Campaign Contribution 2600.00

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

Mailing Address 1324 Bancroft Dr

City Longwood State FL Zip Code 32779

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

Name of Employer Self-Employed Occupation Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 19 / 2013

Transaction ID : SA11AI.7274

Amount of Each Receipt this Period
 Campaign Contribution 2600.00

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

Mailing Address 1507 Poppy Dr

City Haslet State TX Zip Code 76052

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

Name of Employer Bell Helicopter Occupation H-1 Program Director

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.7252

Amount of Each Receipt this Period
 Campaign Contribution 500.00

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

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

5700.00

**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 90
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) Christine Michaels		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 14 / 2013
Mailing Address 3390 Kent Dr		Transaction ID : SA11AI.7243
City Melbourne	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Melbourne Regional Chamber of Commerce	Occupation President, Chamber of Commerce	Campaign Contribution
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Richard Milam		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 14 / 2013
Mailing Address 3396 Sterling Ridge Court		Transaction ID : SA11AI.7244
City Longwood	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer EnableSoft	Occupation CEO	Campaign Contribution
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) Alex Miller		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 09 / 2013
Mailing Address 101 Hyannis Court		Transaction ID : SA11AI.7333
City Jacksonville	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer USMC	Occupation Pilot	Campaign Contribution
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	3350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 90
	<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)
David Smith for Congress

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

Mailing Address 2631 Trey more Dr

City Orlando State FL Zip Code 32936

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

Name of Employer QinetiQ Training and Simulation Occupation VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 28 / 2013

Transaction ID : SA11AI.7316

Amount of Each Receipt this Period
 Campaign Contribution 500.00

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

Mailing Address 1000 Darden Center Drive

City Orlando State FL Zip Code 32837

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

Name of Employer Darden Restaurants Occupation Project Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.7413

Amount of Each Receipt this Period
 Campaign Contribution 500.00

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

Mailing Address 1325 Stellar Drive

City Oviedo State FL Zip Code 32765

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

Name of Employer Swim Time Pool Services, LLC Occupation Small Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.7284

Amount of Each Receipt this Period
 Campaign Contribution 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 25 OF 90
	<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)
David Smith for Congress

A. Full Name (Last, First, Middle Initial)
Joel Owens

Mailing Address 541 Winding Creek Place

City State Zip Code
Longwood FL 32779

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

Name of Employer Occupation
Camber Defense

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 29 / 2013

Transaction ID : SA11AI.7394

Amount of Each Receipt this Period
250.00

Campaign Contribution

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

Mailing Address 204 Soldiers Creek Place

City State Zip Code
Longwood FL 32750

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

Name of Employer Occupation
Saab Training Director of Business Development

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 14 / 2013

Transaction ID : SA11AI.7245

Amount of Each Receipt this Period
1000.00

Campaign Contribution

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

Mailing Address PO Box 1255

City State Zip Code
Mary Esther FL 32569

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

Name of Employer Occupation
Boeing Program Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 30 / 2013

Transaction ID : SA11AI.7317

Amount of Each Receipt this Period
500.00

Campaign Contribution

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 90
	<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)
David Smith for Congress

A. Full Name (Last, First, Middle Initial)
Dean Putnam

Mailing Address 272 Gentle Breeze Circle

City Fredericksburg State VA Zip Code 22406

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

Name of Employer QinetiQ-NA Occupation Defense Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 24 / 2013

Transaction ID : SA11AI.7303

Amount of Each Receipt this Period
 Campaign Contribution 500.00

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

Mailing Address 8321 Emerald Cir

City N. Richland Hills State TX Zip Code 76180

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

Name of Employer Bell Helicopter Occupation Flight Safety

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 14 / 2013

Transaction ID : SA11AI.7352

Amount of Each Receipt this Period
 Campaign Contribution 500.00

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

Mailing Address 34540 Valley Hill Ln

City Eustis State FL Zip Code 32736

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

Name of Employer 930 Consulting Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 06 / 2013

Transaction ID : SA11AI.7328

Amount of Each Receipt this Period
 Campaign Contribution 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 27 OF 90
	<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)
David Smith for Congress

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

Mailing Address 532 Baybend Lane

City Orlando State FL Zip Code 32828

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

Name of Employer Self Employed 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 / 23 / 2013

Transaction ID : SA11AI.7296

Amount of Each Receipt this Period
 Campaign Contribution 500.00

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

Mailing Address 2709 Hazel Grove Lane

City Oviedo State FL Zip Code 32766

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

Name of Employer Innovative Reasoning, LLC Occupation Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 25 / 2013

Transaction ID : SA11AI.7308

Amount of Each Receipt this Period
 Campaign Contribution 250.00

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

Mailing Address 2709 Hazel Grove Lane

City Oviedo State FL Zip Code 32766

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

Name of Employer Innovative Reasoning, LLC Occupation Business Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 25 / 2013

Transaction ID : SA11AI.7309

Amount of Each Receipt this Period
 Campaign Contribution 250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 90
	<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)
David Smith for Congress

A. Full Name (Last, First, Middle Initial)
Susan & Mike Rocco

Mailing Address 6401 Colonial Village Loop

City Manassas State VA Zip Code 20112

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

Name of Employer IMSFF Occupation Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 27 / 2013

Transaction ID : SA11AI.7312

Amount of Each Receipt this Period
 Campaign Contribution 1000.00

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

Mailing Address 42408 Fawn Meadow Pl

City Chantilly State VA Zip Code 20152

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

Name of Employer Serco, Inc Occupation Defense Industry

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.7347

Amount of Each Receipt this Period
 Campaign Contribution 250.00

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

Mailing Address 4309 Comet Ct

City Oviedo State FL Zip Code 32765

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

Name of Employer AITC Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.7416

Amount of Each Receipt this Period
 Campaign Contribution 500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 90
	<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)
David Smith for Congress

A. Full Name (Last, First, Middle Initial)
Bob Sartor

Mailing Address P.O. Box 160652

City San Antonio State TX Zip Code 78280

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

Name of Employer Self Employed Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : SA11AI.7236

Amount of Each Receipt this Period
 250.00

Campaign Contribution

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

Mailing Address 1670 Beasley Drive

City Deland State FL Zip Code 32720

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

Name of Employer Self-Employed Occupation Small Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 14 / 2013

Transaction ID : SA11AI.7246

Amount of Each Receipt this Period
 250.00

Campaign Contribution

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

Mailing Address 6106 Union Springs Lane

City Clifton State VA Zip Code 20124

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

Name of Employer Northrop Grumman Corporation Occupation Business Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.7417

Amount of Each Receipt this Period
 250.00

Campaign Contribution

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 90
	<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)
David Smith for Congress

A. Full Name (Last, First, Middle Initial)
Bev Seay

Mailing Address 709 Balmoral Road

City Winter Park State FL Zip Code 32789

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

Name of Employer CAE Global IES Occupation VP of Global Integrated Enterprise Sol

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 14 / 2013

Transaction ID : SA11AI.7247

Amount of Each Receipt this Period
 1500.00

Campaign Contribution

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

Mailing Address 643 Gaelic Ct

City Apopka State FL Zip Code 32712

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

Name of Employer Rogers Benefits Group Occupation Sales Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 19 / 2013

Transaction ID : SA11AI.7276

Amount of Each Receipt this Period
 250.00

Campaign Contribution

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

Mailing Address 643 Gaelic Ct

City Apopka State FL Zip Code 32712

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

Name of Employer Rogers Benefits Group Occupation Sales Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.7418

Amount of Each Receipt this Period
 250.00

Campaign Contribution

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 90
	<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)
David Smith for Congress

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

Mailing Address 6207 Jumano Lane

City Austin State TX Zip Code 78749

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

Name of Employer Falcon Containers Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 19 / 2013

Transaction ID : SA11AI.7277

Amount of Each Receipt this Period
 Campaign Contribution 1100.00

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

Mailing Address 1002 Skyline Pl

City San Marcos State CA Zip Code 92078

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

Name of Employer Pacific Tax & Financial Group Inc Occupation Tax preparer & Financial Planner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 22 / 2013

Transaction ID : SA11AI.7293

Amount of Each Receipt this Period
 Campaign Contribution 500.00

C. Full Name (Last, First, Middle Initial)
DAVID A SMITH

Mailing Address PO BOX 195128

City WINTER SPRINGS State FL Zip Code 32719

FEC ID number of contributing federal political committee. **C** H4FL07061

Name of Employer Serco, Inc. Occupation Director of Business Development

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.7235

Amount of Each Receipt this Period
 Campaign Contribution 500.00

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

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

2100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 90
	<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)
David Smith for Congress

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

Mailing Address 12831 Plymouth Circle

City Anchorage State AK Zip Code 99516

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

Name of Employer The Tatitlek Corporation Occupation Sr VP Administration

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.7400

Amount of Each Receipt this Period
 Campaign Contribution 250.00

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

Mailing Address 2332 Stepping Stone CT

City Orlando State FL Zip Code 32837

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

Name of Employer N/A Occupation Student

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.7237

Amount of Each Receipt this Period
 Campaign Contribution 500.00

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

Mailing Address 2332 Stepping Stone CT

City Orlando State FL Zip Code 32837

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

Name of Employer N/A Occupation Student

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 : SA11AI.7388

Amount of Each Receipt this Period
 Campaign Contribution 250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 90
	<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)
David Smith for Congress

A. Full Name (Last, First, Middle Initial)
Kevin Tucker

Mailing Address 17660 SW Kramien Road

City State Zip Code
Newberg OR 97132

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

Name of Employer Occupation
FLIR Systems, Inc. General Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 31 / 2013

Transaction ID : SA11AI.7419

Amount of Each Receipt this Period
1000.00

Campaign Contribution

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

Mailing Address 1154 Howell Creek Dr

City State Zip Code
Winter Springs FL 32708

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

Name of Employer Occupation
Innovative Reasoning Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 22 / 2013

Transaction ID : SA11AI.7294

Amount of Each Receipt this Period
500.00

Campaign Contribution

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

Mailing Address 920 Country Charm Circle

City State Zip Code
Oviedo FL 32765

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

Name of Employer Occupation
Saab Training and Simulation Business Development Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 27 / 2013

Transaction ID : SA11AI.7313

Amount of Each Receipt this Period
250.00

Campaign Contribution

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 90
	<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)
David Smith for Congress

A. Full Name (Last, First, Middle Initial)
DeLloyd Voorhees

Mailing Address 5408 Fawn Lake Court

City Sanford State FL Zip Code 32771

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

Name of Employer GDIT Occupation Business Development

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11A1.7421

Amount of Each Receipt this Period
 Campaign Contribution 250.00

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

Mailing Address 1200 Hillcrest St #300

City Orlando State FL Zip Code 32803

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

Name of Employer Walker Insurance 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
 12 / 24 / 2013

Transaction ID : SA11A1.7381

Amount of Each Receipt this Period
 Campaign Contribution 250.00

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

Mailing Address 3610 Ocean Beach Blvd 201A

City Cocoa Beach State FL Zip Code 32931

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

Name of Employer Leidos Occupation Business Development

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11A1.7423

Amount of Each Receipt this Period
 Campaign Contribution 250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 90
	<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)
David Smith for Congress

A. Full Name (Last, First, Middle Initial)
Constance Wilson

Mailing Address 3010 A W. Grovewood Ct

City Tampa State FL Zip Code 33629

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

Name of Employer Hillsborough Cty School system 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
 12 / 15 / 2013

Transaction ID : SA11AI.7356

Amount of Each Receipt this Period
 Campaign Contribution 500.00

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

Mailing Address 1421 Dauphin Lane

City Orlando State FL Zip Code 32803

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

Name of Employer Innovative Reasoning Occupation Operations

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.7287

Amount of Each Receipt this Period
 Campaign Contribution 500.00

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

Mailing Address 2805 Winding Trail Dr

City Valrico State FL Zip Code 33596

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

Name of Employer FedSys, Inc. Occupation Director of Operations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 01 / 2013

Transaction ID : SA11AI.7322

Amount of Each Receipt this Period
 Campaign Contribution 500.00

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

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

1500.00

56050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 90
	<input type="checkbox"/> 11a 12 <input checked="" 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)
David Smith for Congress

A. Full Name (Last, First, Middle Initial)
DAVID A SMITH

Mailing Address **PO BOX 195128**

City **WINTER SPRINGS** State **FL** Zip Code **32719**

FEC ID number of contributing federal political committee. **C H4FL07061**

Name of Employer **Serco, Inc.** Occupation **Director of Business Development**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 / /
11 / 19 / 2013

Transaction ID : SA13A.7599

Amount of Each Receipt this Period
 100.00

Open campaign depository acct

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
 / /

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
 / /

Amount of Each Receipt this Period

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

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

100.00

100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 90		
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Nancy Bocskor		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address 3323 N Washington Blvd		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.7424
City Arlington	State VA	
Zip Code 22201	Purpose of Disbursement Consulting	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. Nancy Bocskor		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2013
Mailing Address 3323 N Washington Blvd		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.7425
City Arlington	State VA	
Zip Code 22201	Purpose of Disbursement Consulting	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. Jacqueline Dheere		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address PO Box 781		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.7426
City Loxahatchee	State FL	
Zip Code 33470	Purpose of Disbursement Consulting	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).....	7000.00
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 38 OF 90		
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Jacqueline Dheere		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address PO Box 781		Amount of Each Disbursement this Period 120.68 Transaction ID : SB17.7427
City Loxahatchee	State FL	
Zip Code 33470	Purpose of Disbursement Expense reimbursement	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. Thomas Martin Kiernan		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2013
Mailing Address 245 NW Lincoln Cir N		Amount of Each Disbursement this Period 282.96 Transaction ID : SB17.7428
City Saint Petersburg	State FL	
Zip Code 33702	Purpose of Disbursement Travel	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. Thomas Martin Kiernan		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2013
Mailing Address 245 NW Lincoln Cir N		Amount of Each Disbursement this Period 833.33 Transaction ID : SB17.7429
City Saint Petersburg	State FL	
Zip Code 33702	Purpose of Disbursement Treasurer Services	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).....	1236.97
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 90		
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Thomas Martin Kiernan		Date of Disbursement M M / D D / Y Y Y Y 12 / 25 / 2013
Mailing Address 245 NW Lincoln Cir N		Amount of Each Disbursement this Period 12 34 56 78 90 39.50
City Saint Petersburg	State FL	
Zip Code 33702	Purpose of Disbursement Reimburse for Bocskor FedEx	Transaction ID : SB17.7430
Candidate Name	Category/Type	
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. Thomas Martin Kiernan		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2013
Mailing Address 245 NW Lincoln Cir N		Amount of Each Disbursement this Period 12 34 56 78 90 833.33
City Saint Petersburg	State FL	
Zip Code 33702	Purpose of Disbursement Treasurer Services	Transaction ID : SB17.7431
Candidate Name	Category/Type	
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. Mad Bull Graphics		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 18981 49th St N		Amount of Each Disbursement this Period 12 34 56 78 90 250.00
City Loxahatchee	State FL	
Zip Code 33470	Purpose of Disbursement Postard design and layout	Transaction ID : SB17.7557
Candidate Name	Category/Type	
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).....	1122.83
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 90	
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Mad Bull Graphics		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2013
Mailing Address 18981 49th St N		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.7565
City Loxahatchee	State FL	
Zip Code 33470	Purpose of Disbursement Postard design and layout	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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 149.50 Transaction ID : SB17.7446
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75 Transaction ID : SB17.7447
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	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).....	455.25
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 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7449
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.88
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7450
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 1.44
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7451
Candidate Name	Category/Type	
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).....	18.70
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 42 OF 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7452
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7453
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 28.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7454
Candidate Name	Category/Type	
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).....	48.88
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 43 OF 90		
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38 Transaction ID : SB17.7455
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75 Transaction ID : SB17.7456
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38 Transaction ID : SB17.7457
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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).....	34.51
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 44 OF 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.88
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7458
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7459
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.88
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7460
Candidate Name	Category/Type	
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).....	11.51
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 45 OF 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 57.50
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	Transaction ID : SB17.7461
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	Transaction ID : SB17.7462
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 28.75
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	Transaction ID : SB17.7463
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).....	92.00
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 46 OF 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 4.72
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7464
Candidate Name	Category/ Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7465
Candidate Name	Category/ Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7466
Candidate Name	Category/ Type	
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).....	16.22
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 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 63.25
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7467
Candidate Name	Category/ Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 149.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7468
Candidate Name	Category/ Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7469
Candidate Name	Category/ Type	
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).....	227.13
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 90		
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 28.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7470
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7471
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7473
Candidate Name	Category/Type	
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).....	57.51
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 49 OF 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 11.50 Transaction ID : SB17.7474
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 1.44 Transaction ID : SB17.7475
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75 Transaction ID : SB17.7476
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	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).....	18.69
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 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7477
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7478
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 28.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7479
Candidate Name	Category/Type	
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).....	48.88
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 51 OF 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 28.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7480
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 28.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7481
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.88
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7482
Candidate Name	Category/Type	
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).....	60.38
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 52 OF 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 28.75 Transaction ID : SB17.7483
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 28.75 Transaction ID : SB17.7484
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 28.75 Transaction ID : SB17.7485
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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).....	86.25
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 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7486
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 28.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7487
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 28.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7488
Candidate Name	Category/Type	
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).....	71.88
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 54 OF 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 17.25
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7489
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 28.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7490
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 1.44
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7491
Candidate Name	Category/Type	
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).....	47.44
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 55 OF 90		
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 28.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7492
Candidate Name	Category/ Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 11.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7493
Candidate Name	Category/ Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 11.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7494
Candidate Name	Category/ Type	
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).....	51.75
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 56 OF 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38 Transaction ID : SB17.7495
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38 Transaction ID : SB17.7496
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 20.13 Transaction ID : SB17.7497
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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).....	48.89
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 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013		
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 14.38		
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17.7498		
Purpose of Disbursement Processing fee		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. Piryx			Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2013		
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 14.38		
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17.7499		
Purpose of Disbursement Processing fee		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. Piryx			Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2013		
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 14.38		
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17.7500		
Purpose of Disbursement Processing fee		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).....	43.14
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 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 86.26 Transaction ID : SB17.7501
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38 Transaction ID : SB17.7502
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38 Transaction ID : SB17.7503
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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).....	86.26
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75 Transaction ID : SB17.7504
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75 Transaction ID : SB17.7505
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 28.75 Transaction ID : SB17.7506
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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).....	40.25
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 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7507
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 28.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7508
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 28.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7509
Candidate Name	Category/Type	
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).....	63.25
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 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7510
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 17.25
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7511
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 11.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7512
Candidate Name	Category/Type	
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).....	34.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 90		
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7513
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7514
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7515
Candidate Name	Category/Type	
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).....	34.51
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 63 OF 90		
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7516
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7517
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7518
Candidate Name	Category/Type	
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).....	25.88
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 64 OF 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 1.44 Transaction ID : SB17.7519
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75 Transaction ID : SB17.7520
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75 Transaction ID : SB17.7521
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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).....	12.94
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 90		
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.88
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7522
Candidate Name	Category/ Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7523
Candidate Name	Category/ Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7524
Candidate Name	Category/ Type	
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).....	23.01
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 66 OF 90		
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 66.13 Transaction ID : SB17.7525
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 57.50 Transaction ID : SB17.7526
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75 Transaction ID : SB17.7528
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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).....	66.13
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 67 OF 90		
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 1.44 Transaction ID : SB17.7529
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 1.44 Transaction ID : SB17.7530
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 1.44 Transaction ID : SB17.7531
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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).....	4.32
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 68 OF 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7532
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.88
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7533
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.88
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7534
Candidate Name	Category/Type	
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).....	20.14
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 69 OF 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 28.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7535
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7536
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7537
Candidate Name	Category/Type	
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).....	40.25
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 70 OF 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7538
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 28.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7539
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 57.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7540
Candidate Name	Category/Type	
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).....	92.00
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 71 OF 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7541
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7542
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.88
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7543
Candidate Name	Category/Type	
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).....	23.01
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 72 OF 90		
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75 Transaction ID : SB17.7544
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75 Transaction ID : SB17.7545
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75 Transaction ID : SB17.7546
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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).....	17.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 90
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.88
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7547
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 28.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7548
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 11.44
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7549
Candidate Name	Category/Type	
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).....	43.07
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 90		
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7550
Candidate Name	Category/ Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 11.44
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7551
Candidate Name	Category/ Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 11.44
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7552
Candidate Name	Category/ Type	
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).....	28.63
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 90		
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75 Transaction ID : SB17.7553
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 11.44 Transaction ID : SB17.7554
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 11.44 Transaction ID : SB17.7555
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	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).....	28.63
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.88
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7556
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7558
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 11.44
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7560
Candidate Name	Category/Type	
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).....	28.70
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 77 OF 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.88
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7561
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7562
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 11.44
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7563
Candidate Name	Category/Type	
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).....	28.70
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 78 OF 90		
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.88 Transaction ID : SB17.7564
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75 Transaction ID : SB17.7566
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 1.44 Transaction ID : SB17.7567
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	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).....	10.07
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7568
Candidate Name	Category/ Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 11.44
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7569
Candidate Name	Category/ Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7570
Candidate Name	Category/ Type	
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).....	31.57
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 90		
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38 Transaction ID : SB17.7571
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38 Transaction ID : SB17.7572
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75 Transaction ID : SB17.7573
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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).....	34.51
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 81 OF 90			
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7574
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7575
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7576
Candidate Name	Category/Type	
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).....	34.51
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 82 OF 90		
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7577
Candidate Name	Category/ Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7578
Candidate Name	Category/ Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 28.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7579
Candidate Name	Category/ Type	
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).....	48.88
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 83 OF 90		
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.88
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7580
Candidate Name	Category/ Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.88
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7581
Candidate Name	Category/ Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7582
Candidate Name	Category/ Type	
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).....	11.51
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 84 OF 90		
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38 Transaction ID : SB17.7583
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 28.75 Transaction ID : SB17.7584
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38 Transaction ID : SB17.7585
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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).....	57.51
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 85 OF 90		
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38 Transaction ID : SB17.7586
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 57.50 Transaction ID : SB17.7587
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75 Transaction ID : SB17.7588
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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).....	77.63
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 90		
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75 Transaction ID : SB17.7589
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 57.50 Transaction ID : SB17.7590
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.88 Transaction ID : SB17.7591
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Processing fee	
Candidate Name	Category/Type	
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).....	66.13
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 90		
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38 Transaction ID : SB17.7592
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.88 Transaction ID : SB17.7593
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38 Transaction ID : SB17.7594
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	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).....	31.64
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 88 OF 90		
	<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)
David Smith for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7595
Candidate Name	Category/ Type	
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 11.44
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Processing fee	Transaction ID : SB17.7596
Candidate Name	Category/ Type	
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.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	17.19
TOTAL This Period (last page this line number only).....	11961.39

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.7599

David Smith for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

DAVID A SMITH

Primary
 General
 Other (specify) ▼

Mailing Address
PO BOX 195128

City State ZIP Code
WINTER SPRINGS FL 32719

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
100.00 0.00 100.00

TERMS

Date Incurred Date Due Interest Rate Secured:
11 / 19 / 2013 11 / 01 / 2014 0.01 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... 100.00
TOTALS This Period (last page in this line only)..... 100.00

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

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
David Smith for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor David Smith for Congress	Nature of Debt (Purpose): Misc candidate-paid campaign expenses
Mailing Address PO Box 195128	
City State Zip Code Winter Springs FL 32719	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.6476	
Amount Incurred This Period 47461.29	Payment This Period 0.00	Outstanding Balance at Close of This Period 47461.29

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	47461.29
2) TOTALS This Period (last page this line number only)	47461.29
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	100.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	47561.29