

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
Misiuk for Congress

ADDRESS (number and street) PO Box 181
 Check if different than previously reported. (ACC) Gorham ME 04038

2. **FEC IDENTIFICATION NUMBER** ▼ C C00549329 CITY ▲ STATE ▲ ZIP CODE ▲
3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE ▼ DISTRICT
ME 01

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

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on 06 / 10 / 2014 in the State of ME
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period 04 / 01 / 2014 through 05 / 21 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Tyler Kinney
Signature of Treasurer Tyler Kinney [Electronically Filed] Date 05 / 29 / 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
Misiuk for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	9430.14	13955.28
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	9430.14	13955.28
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	9742.48	12459.64
(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)).....	9742.48	12459.64
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1495.64	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Misiuk 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).....	2200.00	5050.00
(ii) Unitemized.....	2230.14	3905.28
(iii) TOTAL of contributions from individuals ▶	4430.14	8955.28
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	5000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	9430.14	13955.28
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	9430.14	13955.28

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	9742.48	12459.64
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	9742.48	12459.64

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1807.98
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	9430.14
25. SUBTOTAL (add Line 23 and Line 24).....	11238.12
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	9742.48
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1495.64

**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 15
	<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)
Misiuk for Congress

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

Mailing Address **PO Box 254**

City **Warren** State **ME** Zip Code **04864**

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

Name of Employer **N/A** 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 Y Y
04 / 05 / 2014

Transaction ID : SA11AI.4294

Amount of Each Receipt this Period
250.00

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

Mailing Address **71 Carroll St**

City **Portland** State **ME** Zip Code **04102**

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

Name of Employer **N/A** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 28 / 2014

Transaction ID : SA11AI.4334

Amount of Each Receipt this Period
500.00

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

Mailing Address **101 Summit Terrace, APT 5**

City **South Portland** State **ME** Zip Code **04106**

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

Name of Employer **Matheson TRIGAS** Occupation **Spec Gas Technician**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 16 / 2014

Transaction ID : SA11AI.4317

Amount of Each Receipt this Period
150.00

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

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 6 OF 15
	<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)
Misiuk for Congress

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

Mailing Address 101 Summit Terrace, APT 5

City South Portland State ME Zip Code 04106

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

Name of Employer Matheson TRIGAS Occupation Spec Gas Technician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **475.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 13 / 2014

Transaction ID : SA11AI.4351

Amount of Each Receipt this Period
50.00

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

Mailing Address 46 Snow's Head Rd

City Harpswell State ME Zip Code 04079

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

Name of Employer N/A 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
 05 / 06 / 2014

Transaction ID : SA11AI.4350

Amount of Each Receipt this Period
250.00

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

Mailing Address 34 Pembroke St

City Portland State ME Zip Code 04103

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

Name of Employer F.W.Webb Co. Occupation Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 18 / 2014

Transaction ID : SA11AI.4378

Amount of Each Receipt this Period
250.00

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

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

550.00

**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 15
	<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)
Misiuk for Congress

Full Name (Last, First, Middle Initial) A. Stuart Smith		Date of Receipt M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address PO Box 2		Transaction ID : SA11AI.4290
City Edgecomb	State ME	Zip Code 04556
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Self Employed	Occupation Self Employed	
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. Rick Snow		Date of Receipt M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 73 Landing Woods Rd		Transaction ID : SA11AI.4374
City Yarmouth	State ME	Zip Code 04096
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Maine Indoor Karting	Occupation Owner	
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. Amy Volk		Date of Receipt M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address		Transaction ID : SA11AI.4305
City Scarborough	State ME	Zip Code 04074
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer State of Maine	Occupation State Representative	
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).....	750.00
TOTAL This Period (last page this line number only).....	2200.00

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

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NAME OF COMMITTEE (In Full)
Misiuk for Congress

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

Mailing Address PO Box 1355

City Alexandria State VA Zip Code 22313

FEC ID number of contributing federal political committee. **C** C00391797

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 18 / 2014

Transaction ID : SA11C.4441

Amount of Each Receipt this Period
 5000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

5000.00

5000.00

**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 9 OF 15			
	<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)
Misiuk for Congress

Full Name (Last, First, Middle Initial) A. Capitol Solutions LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 19 Holbrook Street #9		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.4413
City Freeport State ME Zip Code 04032	Purpose of Disbursement Consulting Fees Jan- April	
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. Capitol Solutions LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 19 Holbrook Street #9		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4439
City Freeport State ME Zip Code 04032	Purpose of Disbursement Consulting Fees	
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. Creative Imaging Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address PO Box 6540		Amount of Each Disbursement this Period 113.41 Transaction ID : SB17.4403
City Scarborough State ME Zip Code 04074	Purpose of Disbursement Printing Fees	
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).....	1613.41
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 10 OF 15			
	<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)
Misiuk for Congress

Full Name (Last, First, Middle Initial) A. Creative Imaging Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address PO Box 6540		Amount of Each Disbursement this Period 211.00
City Scarborough	State ME	
Zip Code 04074	Purpose of Disbursement Printing Fees	Transaction ID : SB17.4404
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. Creative Imaging Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address PO Box 6540		Amount of Each Disbursement this Period 152.55
City Scarborough	State ME	
Zip Code 04074	Purpose of Disbursement Printing Fees	Transaction ID : SB17.4411
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. Creative Imaging Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address PO Box 6540		Amount of Each Disbursement this Period 128.71
City Scarborough	State ME	
Zip Code 04074	Purpose of Disbursement Printing Fees	Transaction ID : SB17.4417
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).....	492.26
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 11 OF 15			
	<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)
Misiuk for Congress

Full Name (Last, First, Middle Initial) A. Creative Imaging Group		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address PO Box 6540		Amount of Each Disbursement this Period 203.09 Transaction ID : SB17.4419
City Scarborough	State ME	
Zip Code 04074	Purpose of Disbursement Printing Fees	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. Creative Imaging Group		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address PO Box 6540		Amount of Each Disbursement this Period 203.09 Transaction ID : SB17.4426
City Scarborough	State ME	
Zip Code 04074	Purpose of Disbursement Printing Fees	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. Dimillo's		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 25 Long Wharf St		Amount of Each Disbursement this Period 540.21 Transaction ID : SB17.4431
City Portland	State ME	
Zip Code 04101	Purpose of Disbursement Fundraiser	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).....	946.39
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 12 OF 15	
	<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)
Misiuk for Congress

Full Name (Last, First, Middle Initial)
A. Fireside Inn

Mailing Address 570 Main St

City Bangor State ME Zip Code 04401

Purpose of Disbursement Convention Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
04 / 26 / 2014

Amount of Each Disbursement this Period
359.00

Transaction ID : SB17.4415

Category/Type

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

Mailing Address 119 Commercial Street

City Bath State ME Zip Code 04530

Purpose of Disbursement Fundraiser

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
05 / 13 / 2014

Amount of Each Disbursement this Period
488.32

Transaction ID : SB17.4429

Category/Type

Full Name (Last, First, Middle Initial)
C. LT's INC

Mailing Address 37 Danforth St

City Portland State ME Zip Code 04101

Purpose of Disbursement Promo Printing

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
04 / 21 / 2014

Amount of Each Disbursement this Period
259.35

Transaction ID : SB17.4410

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 1106.67

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 15	
	<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)
Misiuk for Congress

Full Name (Last, First, Middle Initial) A. Majority Strategies, INC.		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2014
Mailing Address 135 Professional Dr, Suite 104		Amount of Each Disbursement this Period 350.00 Transaction ID : SB17.4399
City Ponte Verda Beach	State FL	
Zip Code 32082	Purpose of Disbursement Palm card & Ad Design	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. Isaac James Misiuk		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 21 Little River Drive		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.4391
City Gorham	State ME	
Zip Code 04038	Purpose of Disbursement Reimbursement: Travel Expenses	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. River Front BBQ & Grille		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 300 Water St		Amount of Each Disbursement this Period 691.00 Transaction ID : SB17.4405
City Augusta	State ME	
Zip Code 04330	Purpose of Disbursement Fundraiser Fees	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).....	1191.00
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 14 OF 15			
	<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)
Misiuk for Congress

Full Name (Last, First, Middle Initial) A. Ben Trundy		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 21 Fessenden St Apt 1		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4389
City Portland	State ME	
Zip Code 04103	Purpose of Disbursement Consulting Fees	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. Ben Trundy		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 21 Fessenden St Apt 1		Amount of Each Disbursement this Period 750.00 Transaction ID : SB17.4407
City Portland	State ME	
Zip Code 04103	Purpose of Disbursement Consulting Fees	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. Ben Trundy		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 21 Fessenden St Apt 1		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.4408
City Portland	State ME	
Zip Code 04103	Purpose of Disbursement Consulting Fees	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).....	1500.00
TOTAL This Period (last page this line number only).....	

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

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

Full Name (Last, First, Middle Initial) A. Ben Trundy		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 21 Fessenden St Apt 1		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.4416
City Portland	State ME	
Zip Code 04103	Purpose of Disbursement Consulting Fees	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. Ben Trundy		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 21 Fessenden St Apt 1		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.4433
City Portland	State ME	
Zip Code 04103	Purpose of Disbursement Consulting Fees	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.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	8849.73