

# 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  
**ZUMWALT FOR CONGRESS**

ADDRESS (number and street) 8668 NAVARRE PKWY  
#106  
 Check if different than previously reported. (ACC) NAVARRE FL 32566

2. **FEC IDENTIFICATION NUMBER** ▼ C C00614024 CITY ▲ STATE ▲ ZIP CODE ▲  
STATE ▼ DISTRICT  
3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A) FL 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 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  
04 / 01 / 2016 through 06 / 30 / 2016

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 Michael Millner  
Signature of Treasurer Michael Millner *[Electronically Filed]* Date M M / D D / Y Y Y Y  
07 / 15 / 2016

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

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name  
**ZUMWALT 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))....	109287.00	109287.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	109287.00	109287.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	37444.00	37444.00
(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)).....	37444.00	37444.00
8. Cash on Hand at Close of Reporting Period (from Line 27).....	71843.00	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

**ZUMWALT FOR CONGRESS**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	96561.00	96561.00
(ii) Unitemized.....	12226.00	12226.00
(iii) TOTAL of contributions from individuals ▶	108787.00	108787.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	500.00	500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	109287.00	109287.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	109287.00	109287.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	37444.00	37444.00
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. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	37444.00	37444.00

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	109287.00
25. SUBTOTAL (add Line 23 and Line 24).....	109287.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	37444.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	71843.00

**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 5 OF 45
	<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)  
**ZUMWALT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Arik Arad</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 15 / 2016	
Mailing Address 101 W 55th street Suite 14K		<b>Transaction ID : SA11AI.4292</b>	
City New York	State NY	Zip Code 10019	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Arocon	Occupation Arocon	<input type="checkbox"/> Memo Item Contribution	
Receipt For: 2016 <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) <b>B. Lee Ashlock</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 07 / 2016	
Mailing Address 2049 Venetian way		<b>Transaction ID : SA11AI.4369</b>	
City Winter park	State FL	Zip Code 32789	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00	
Name of Employer none	Occupation none	<input type="checkbox"/> Memo Item Contribution	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		

Full Name (Last, First, Middle Initial) <b>C. Theodore Boinis</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 29 / 2016	
Mailing Address 750 S Ocean Blvd #5S		<b>Transaction ID : SA11AI.4531</b>	
City Boca Raton	State FL	Zip Code 33432	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Retired	Occupation Retired	<input type="checkbox"/> Memo Item Contribution	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4200.00
<b>TOTAL</b> 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: PAGE 6 OF 45  
(check only one)  
 11a 12   
  11b 13a   
  11c 13b   
  11d 14   
  15

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NAME OF COMMITTEE (In Full)  
**ZUMWALT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Barton Bonn**

Mailing Address 1403 Farnam St.  
Ste 306

City Omaha State NE Zip Code 68102

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

Name of Employer Self Employed Occupation Merchant

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

**Transaction ID : SA11AI.4469**

Amount of Each Receipt this Period  
500.00

Memo Item Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Jeromy Boucher**

Mailing Address 8311 Chivalry Rd

City Annandale State VA Zip Code 22003

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

Name of Employer George Washington University Occupation Physician

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 08 / 2016

**Transaction ID : SA11AI.4251**

Amount of Each Receipt this Period  
400.00

Memo Item Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Go Brian**

Mailing Address 1037 Stradshire Drive

City Raliegh State NC Zip Code 27614

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

Name of Employer Wakened Occupation Self-Employees and Doctor

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 04 / 2016

**Transaction ID : SA11AI.4366**

Amount of Each Receipt this Period  
1000.00

Memo Item Contribution

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

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

1900.00

**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 45
	<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)  
**ZUMWALT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**George T. Brown**

Mailing Address 17633 Gunn Hwy

City Odessa State FL Zip Code 33556

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

**Transaction ID : SA11AI.4481**

Amount of Each Receipt this Period  
1000.00

Memo Item Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Jane Brown**

Mailing Address 633 Arbor Road

City Cheltenham State PA Zip Code 19012

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

Name of Employer Cheltenham School District Occupation Administrative Assistant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 28 / 2016

**Transaction ID : SA11AI.4354**

Amount of Each Receipt this Period  
2700.00

Memo Item Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Michael R Brown**

Mailing Address 633 Arbor Rd

City Cheltenham State PA Zip Code 19012

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

Name of Employer retired Occupation retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2016

**Transaction ID : SA11AI.4295**

Amount of Each Receipt this Period  
2700.00

Memo Item Contribution

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

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

6400.00

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

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

FOR LINE NUMBER: PAGE 8 OF 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**ZUMWALT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Michael R Brown**

Mailing Address 633 Arbor Rd

City Cheltenham State PA Zip Code 19012

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

Name of Employer retired Occupation retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 3700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

**Transaction ID : SA11AI.4483**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item Contribution

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

Mailing Address 745 WITMER RD

City YORK State PA Zip Code 17402

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

Name of Employer Byrnes Associates Occupation Business Psychologist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 10 / 2016

**Transaction ID : SA11AI.4259**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Andres Candela**

Mailing Address PO Box 1116

City Gulf Breeze State FL Zip Code 32562

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

Name of Employer Pathology group of NW Florida Occupation Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2016

**Transaction ID : SA11AI.4629**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item 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 9 OF 45
	<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)  
**ZUMWALT FOR CONGRESS**

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

Mailing Address PSC 819 Box 2805

City State Zip Code  
FPO AE NY 09645

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

Name of Employer Occupation  
US Navy Naval Officer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 29 / 2016

**Transaction ID : SA11AI.4413**

Amount of Each Receipt this Period  
500.00

Memo Item Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Jason Crawford**

Mailing Address 8665 Foxtail Loop

City State Zip Code  
Pensacola FL 32526

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

Name of Employer Occupation  
IRIS CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 29 / 2016

**Transaction ID : SA11AI.4411**

Amount of Each Receipt this Period  
250.00

Memo Item Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Leslie Croson**

Mailing Address 14551 Lock Drive

City State Zip Code  
Centerville VA 20120

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

Name of Employer Occupation  
YFT Accountant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 09 / 2016

**Transaction ID : SA11AI.4386**

Amount of Each Receipt this Period  
100.00

Memo Item Contribution

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

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

850.00

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

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

FOR LINE NUMBER: PAGE 10 OF 45  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**ZUMWALT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Matt E. Dannheisser**

Mailing Address 504 N Baylen St.

City Pensacola State FL Zip Code 32501

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

Name of Employer Self Occupation Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

**Transaction ID : SA11AI.4477**

Amount of Each Receipt this Period  
2000.00

Memo Item Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Tamm P. Dannheisser**

Mailing Address 504 N Baylen St.

City Pensacola State FL Zip Code 32501

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

Name of Employer None Occupation None

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

**Transaction ID : SA11AI.4480**

Amount of Each Receipt this Period  
2000.00

Memo Item Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Dan Davidson**

Mailing Address 7 Edgehill Road

City Searcy State AR Zip Code 72143

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

Name of Employer Unity Health Occupation Physician

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2016

**Transaction ID : SA11AI.4360**

Amount of Each Receipt this Period  
1000.00

Memo Item Contribution

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

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

5000.00

**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 45
	<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)  
**ZUMWALT FOR CONGRESS**

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

Mailing Address 19871 La Bete Ct.

City Ashburn State VA Zip Code 20147

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

Name of Employer Marathon TS Occupation VP

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016

**Transaction ID : SA11AI.4642**

Amount of Each Receipt this Period  
 250.00

Memo Item Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Barth DeRosa**

Mailing Address 13839 Lakeside Dr.

City Clarksville State MD Zip Code 21029

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

Name of Employer Dickinson Wright LLP Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016

**Transaction ID : SA11AI.4630**

Amount of Each Receipt this Period  
 2700.00

Memo Item Contribution

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

Mailing Address 1576 thatch palm dr

City Boca raton State FL Zip Code 33432

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

Name of Employer retired Occupation retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 19 / 2016

**Transaction ID : SA11AI.4313**

Amount of Each Receipt this Period  
 500.00

Memo Item Contribution

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

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

**3450.00**

**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 45
	<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)  
**ZUMWALT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Harvey Ernest**

Mailing Address 6420 Woodville Drive

City Falls Church State VA Zip Code 22044-1427

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

Name of Employer RIVERGROUP INCORPORATED Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2016

**Transaction ID : SA11AI.4361**

Amount of Each Receipt this Period  
1000.00

Memo Item Contribution

**B.** Full Name (Last, First, Middle Initial)  
**James Ervin**

Mailing Address 116 Queen St.

City Alexandria State VA Zip Code 22314

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

Name of Employer Ervin Hill Strategy Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

**Transaction ID : SA11AI.4455**

Amount of Each Receipt this Period  
500.00

Memo Item Contribution

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

Mailing Address 225 W Alexander Palm Rd.

City Boca Raton State FL Zip Code 33432

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 29 / 2016

**Transaction ID : SA11AI.4520**

Amount of Each Receipt this Period  
250.00

Memo Item 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 13 OF 45
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**ZUMWALT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Gerardo Galdamez**

Mailing Address 23 Saint Andrews dr.

City Little rock State AR Zip Code 72212

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

Name of Employer Entergy Arkansas Inc Occupation Project Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 19 / 2016

**Transaction ID : SA11AI.4317**

Amount of Each Receipt this Period  
500.00

Memo Item Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Kristi Germinario**

Mailing Address 37965 John Mosby Hwy

City Middleburg State VA Zip Code 20117

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

**Transaction ID : SA11AI.4467**

Amount of Each Receipt this Period  
2700.00

Memo Item Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Kristi Germinario**

Mailing Address 37965 John Mosby Hwy

City Middleburg State VA Zip Code 20117

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

**Transaction ID : SA11AI.4468**

Amount of Each Receipt this Period  
2700.00

Memo Item Contribution

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

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

5900.00

**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 45
	<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)  
**ZUMWALT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>Vito Germinario</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 19 / 2016	
Mailing Address 37965 John Mosby Hwy		<b>Transaction ID : SA11AI.4462</b>	
City Middleburg State VA Zip Code 20117	Amount of Each Receipt this Period _____ 2700.00		
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Memo Item Contribution		
Name of Employer GPR Inc. Occupation President	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Election Cycle-to-Date _____ 2700.00			

Full Name (Last, First, Middle Initial) <b>Vito Germinario</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 19 / 2016	
Mailing Address 37965 John Mosby Hwy		<b>Transaction ID : SA11AI.4463</b>	
City Middleburg State VA Zip Code 20117	Amount of Each Receipt this Period _____ 2700.00		
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Memo Item Contribution		
Name of Employer GPR Inc. Occupation President	Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Election Cycle-to-Date _____ 5400.00			

Full Name (Last, First, Middle Initial) <b>Pete Giambastiani</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 19 / 2016	
Mailing Address 6421 Wainfleet Court		<b>Transaction ID : SA11AI.4374</b>	
City Springfield State VA Zip Code 22152	Amount of Each Receipt this Period _____ 500.00		
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Memo Item Contribution		
Name of Employer US House of Representatives Occupation Congressional Staff	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Election Cycle-to-Date _____ 500.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 5900.00
<b>TOTAL</b> 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 45
	<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)  
**ZUMWALT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Judith Giaquinto**

Mailing Address 132 Thatch Palm Cove

City Boca Raton State FL Zip Code 33432

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 29 / 2016

**Transaction ID : SA11AI.4514**

Amount of Each Receipt this Period  
 250.00

Memo Item Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Karin Gifuni**

Mailing Address 21136 Laguna Drive

City Rehoboth Beach State DE Zip Code 19971

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

Name of Employer retired Occupation retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 07 / 2016

**Transaction ID : SA11AI.4248**

Amount of Each Receipt this Period  
 2700.00

Memo Item Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Karin Gifuni**

Mailing Address 21136 Laguna Drive

City Rehoboth Beach State DE Zip Code 19971

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

Name of Employer retired Occupation retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 07 / 2016

**Transaction ID : SA11AI.4249**

Amount of Each Receipt this Period  
 2700.00

Memo Item Contribution

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

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

**5650.00**

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

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

FOR LINE NUMBER: PAGE 16 OF 45  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**ZUMWALT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**David Godfrey**

Mailing Address 15609 FM 1730

City Lubbock State TX Zip Code 79424

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

Name of Employer retired Occupation retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 20 / 2016**

**Transaction ID : SA11AI.4376**

Amount of Each Receipt this Period  
**500.00**

Memo Item Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Lynn Green**

Mailing Address 15215 Shady Grove Rd.  
Ste 201

City Rockville State MD Zip Code 20850

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 30 / 2016**

**Transaction ID : SA11AI.4602**

Amount of Each Receipt this Period  
**198.00**

Memo Item Partner Attribution

**C.** Full Name (Last, First, Middle Initial)  
**T. P. Harmer**

Mailing Address 8144 Coffee Cup Ct.

City Fairfax Village State VA Zip Code 22039

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

Name of Employer American Defense International Occupation Vice President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 19 / 2016**

**Transaction ID : SA11AI.4457**

Amount of Each Receipt this Period  
**250.00**

Memo Item 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 17 OF 45
	<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)  
**ZUMWALT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Lucas hatzis</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 18 / 2016
Mailing Address 115 c st se		<b>Transaction ID : SA11AI.4372</b>
City Washington	State DC	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Capitol Counsel	Occupation Consultant	<input type="checkbox"/> Memo Item Contribution
Receipt For: 2016 <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>B. Rita Head</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 27 / 2016
Mailing Address 1280 Thatch Palm Dr		<b>Transaction ID : SA11AI.4426</b>
City Boca Raton	State FL	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	<input type="checkbox"/> Memo Item Contribution
Receipt For: 2016 <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>C. Linda L. Heflin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 20 / 2016
Mailing Address 36 Longwood Dr		<b>Transaction ID : SA11AI.4498</b>
City Shalimar	State FL	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 325.00
Name of Employer Retired	Occupation Retired	<input type="checkbox"/> Memo Item Contribution
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 325.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	825.00
<b>TOTAL</b> 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 18 OF 45
	<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)  
**ZUMWALT FOR CONGRESS**

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

Mailing Address 9635 Loblolly Lane

City Roswell State GA Zip Code 30075

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

Name of Employer GTRI Occupation Sys Eng

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 12 / 2016**

**Transaction ID : SA11AI.4277**

Amount of Each Receipt this Period  
**250.00**

Memo Item Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Tony Hughes**

Mailing Address 2733 Creeks Edge Lane

City Navarre State FL Zip Code 32566

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

Name of Employer Beach Community Bank Occupation Banking

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 23 / 2016**

**Transaction ID : SA11AI.4402**

Amount of Each Receipt this Period  
**250.00**

Memo Item Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Richard Johnson**

Mailing Address 1600 Thatch Palm Dr.

City Boca Raton State FL Zip Code 33432

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 29 / 2016**

**Transaction ID : SA11AI.4516**

Amount of Each Receipt this Period  
**500.00**

Memo Item 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: PAGE 19 OF 45  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**ZUMWALT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Howard Kerr**

Mailing Address 132 Huntington Street

City State Zip Code  
Lake Bluff IL 60044

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

Name of Employer Occupation  
retired retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 13 / 2016

**Transaction ID : SA11AI.4285**

Amount of Each Receipt this Period  
500.00

Memo Item Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Sheila Kessinger**

Mailing Address 15215 Shady Grove Rd.  
Ste 201

City State Zip Code  
Rockville MD 20850

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 30 / 2016

**Transaction ID : SA11AI.4596**

Amount of Each Receipt this Period  
198.00

Memo Item Partner Attribution

**C.** Full Name (Last, First, Middle Initial)  
**Mark Kilkeary**

Mailing Address 7873 Hampton Village Pass

City State Zip Code  
Annandale VA 22003

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

Name of Employer Occupation  
George Mason Mortgage Loan Officer

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2016

**Transaction ID : SA11AI.4390**

Amount of Each Receipt this Period  
100.00

Memo Item Contribution

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

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

600.00

**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 45
	<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)  
**ZUMWALT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Francis Lasch Jr.**

Mailing Address 309 Cook St.

City Niceville	State FL	Zip Code 32578
-------------------	-------------	-------------------

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

Name of Employer EXND Diving & Marine Services	Occupation Owner
---	---------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016

**Transaction ID : SA11AI.4633**

Amount of Each Receipt this Period  
1000.00

Memo Item Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Paul Lawless**

Mailing Address 1415 Fan Palm Rd.

City Boca Raton	State FL	Zip Code 33432
--------------------	-------------	-------------------

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

Name of Employer Lawless Edwards & Warren	Occupation Registered Rep
--	------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 29 / 2016

**Transaction ID : SA11AI.4510**

Amount of Each Receipt this Period  
250.00

Memo Item Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Jeremy Leader**

Mailing Address 4605 Dolphin Ln

City Alexandria	State VA	Zip Code 22309
--------------------	-------------	-------------------

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

Name of Employer USAF	Occupation Acquisition
--------------------------	---------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 20 / 2016

**Transaction ID : SA11AI.4319**

Amount of Each Receipt this Period  
2700.00

Memo Item Contribution

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

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

3950.00

**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 45
	<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)  
**ZUMWALT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. John Lehman</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2016	
Mailing Address 110 East 59th St. 27th Floor		<b>Transaction ID : SA11AI.4645</b>	
City State Zip Code New York NY 10022	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2700.00	
Name of Employer Occupation J.F. Lehman & Company President	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item Contribution	
Election Cycle-to-Date 2700.00			

Full Name (Last, First, Middle Initial) <b>B. Teresa Levin</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2016	
Mailing Address PO Box 1231		<b>Transaction ID : SA11AI.4639</b>	
City State Zip Code Pensacola FL 32591	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1500.00	
Name of Employer Occupation Self Real Estate	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item Contribution	
Election Cycle-to-Date 1500.00			

Full Name (Last, First, Middle Initial) <b>C. Lauren Liess</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 28 / 2016	
Mailing Address 6348 Chowning Place		<b>Transaction ID : SA11AI.4353</b>	
City State Zip Code McLean VA 22101	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Occupation Lauren Liess & Co. Interior Designer	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item Contribution	
Election Cycle-to-Date 1000.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5200.00
<b>TOTAL</b> 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 22 OF 45
	<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)  
**ZUMWALT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Monique MacEachin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 28 / 2016	
Mailing Address 1729 Port Place Apt 405		<b>Transaction ID : SA11AI.4357</b>	
City Reston State VA Zip Code 20194	Amount of Each Receipt this Period _____ 300.00		
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Memo Item Contribution		
Name of Employer Navy Federal Credit Union Occupation HR	Election Cycle-to-Date _____ 300.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B. Patrick McClellan</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2016	
Mailing Address PO Box 846		<b>Transaction ID : SA11AI.4643</b>	
City Orange Beach State FL Zip Code 36561	Amount of Each Receipt this Period _____ 500.00		
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Memo Item Contribution		
Name of Employer Flora-Bama Occupation Owner	Election Cycle-to-Date _____ 500.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>C. M. Rebecca Miller</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 19 / 2016	
Mailing Address 3118 Dahlia Way		<b>Transaction ID : SA11AI.4446</b>	
City Naples State FL Zip Code 34105	Amount of Each Receipt this Period _____ 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Memo Item Contribution		
Name of Employer Retired Occupation Retired	Election Cycle-to-Date _____ 1000.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 1800.00
<b>TOTAL</b> 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 23 OF 45
	<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)  
**ZUMWALT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Paul D. Miller</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 19 / 2016	
Mailing Address 3118 Dahlia Way		<b>Transaction ID : SA11AI.4450</b>	
City Naples	State FL	Zip Code 34105	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
		<input type="checkbox"/> Memo Item Contribution	

Full Name (Last, First, Middle Initial) <b>B. Janice Millner</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 29 / 2016	
Mailing Address 3921 Navy Blvd.		<b>Transaction ID : SA11AI.4640</b>	
City Pensacola	State FL	Zip Code 32507	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
		<input type="checkbox"/> Memo Item Contribution	

Full Name (Last, First, Middle Initial) <b>C. Dede Minikes</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 10 / 2016	
Mailing Address 6206 Waterford Blvd #66		<b>Transaction ID : SA11AI.4263</b>	
City Oklahoma City	State OK	Zip Code 73118	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer none	Occupation none		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
		<input type="checkbox"/> Memo Item Contribution	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<b>TOTAL</b> 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 45
	<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)  
**ZUMWALT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Anita Nelson**

Mailing Address 139 Estrella Crossing  
#333

City State Zip Code  
Georgetown TX 78628

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

Name of Employer Occupation  
retired retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 15 / 2016

**Transaction ID : SA11AI.4563**

Amount of Each Receipt this Period  
1000.00

Memo Item Contribution

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

Mailing Address 139 Estrella Crossing  
#333

City State Zip Code  
Georgetown TX 78628

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

Name of Employer Occupation  
retired retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1056.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 22 / 2016

**Transaction ID : SA11AI.4392**

Amount of Each Receipt this Period  
56.00

Memo Item Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Gilbert Nelson**

Mailing Address 10958 Stuart Mill Rd

City State Zip Code  
Oakton VA 22124

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

Name of Employer Occupation  
U.S. Government Federal Employee

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 25 / 2016

**Transaction ID : SA11AI.4345**

Amount of Each Receipt this Period  
250.00

Memo Item Contribution

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

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

1306.00

**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 45
	<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)  
**ZUMWALT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Gregg Nelson**

Mailing Address 12468 Wendell Holmes Rd.

City Herndon State VA Zip Code 20171

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

Name of Employer Navy Federal Credit Union Occupation Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2016

**Transaction ID : SA11AI.4561**

Amount of Each Receipt this Period  
2700.00

Memo Item Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Lisa Nelson**

Mailing Address 12468 Wendell Holmes Rd.

City Herndon State VA Zip Code 20171

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

Name of Employer Navy Federal Credit Union Occupation HR-Payroll

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 07 / 2016

**Transaction ID : SA11AI.4584**

Amount of Each Receipt this Period  
300.00

Memo Item Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Lisa Nelson**

Mailing Address 12468 Wendell Holmes Rd.

City Herndon State VA Zip Code 20171

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

Name of Employer Navy Federal Credit Union Occupation HR-Payroll

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2016

**Transaction ID : SA11AI.4559**

Amount of Each Receipt this Period  
2400.00

Memo Item Contribution

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

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

5400.00

**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 45
	<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)  
**ZUMWALT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Scott J Nelson</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 18 / 2016	
Mailing Address 2738 Highlands Ct		<b>Transaction ID : SA11AI.4300</b>	
City State Zip Code Trophy Club TX 76262	Amount of Each Receipt this Period _____ 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Memo Item Contribution		
Name of Employer Occupation JP Morgan Chase Channel Relations Partner	Election Cycle-to-Date _____ 1000.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B. R Brady Osborne Jr</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 03 / 2016	
Mailing Address 1515 S Federal Hwy Ste 106		<b>Transaction ID : SA11AI.4382</b>	
City State Zip Code Boca Raton FL 33432	Amount of Each Receipt this Period _____ 300.00		
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Memo Item Contribution		
Name of Employer Occupation Osborne & Osborne PA Attorney	Election Cycle-to-Date _____ 300.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>C. R Brady Osborne Jr</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 03 / 2016	
Mailing Address 1515 S Federal Hwy Ste 106		<b>Transaction ID : SA11AI.4383</b>	
City State Zip Code Boca Raton FL 33432	Amount of Each Receipt this Period _____ 200.00		
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Memo Item Contribution		
Name of Employer Occupation Osborne & Osborne PA Attorney	Election Cycle-to-Date _____ 500.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 1500.00
<b>TOTAL</b> 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 27 OF 45
	<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)  
**ZUMWALT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Adam Painter</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 13 / 2016	
Mailing Address 2244 Broken Star Dr		<b>Transaction ID : SA11AI.4281</b>	
City New Braunfels	State TX	Zip Code 78130	Amount of Each Receipt this Period 2700.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contribution	
Name of Employer Self Employed	Occupation Contractor	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Election Cycle-to-Date 2700.00			

Full Name (Last, First, Middle Initial) <b>B. Adam Painter</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 13 / 2016	
Mailing Address 2244 Broken Star Dr		<b>Transaction ID : SA11AI.4282</b>	
City New Braunfels	State TX	Zip Code 78130	Amount of Each Receipt this Period 2700.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contribution	
Name of Employer Self Employed	Occupation Contractor	Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Election Cycle-to-Date 5400.00			

Full Name (Last, First, Middle Initial) <b>C. Jerre Peacock</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 20 / 2016	
Mailing Address 107 S. Baylen St.		<b>Transaction ID : SA11AI.4504</b>	
City Pensacola	State FL	Zip Code 32502	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contribution	
Name of Employer Retired	Occupation Retired	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Election Cycle-to-Date 500.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5900.00
<b>TOTAL</b> 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 28 OF 45
	<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)  
**ZUMWALT FOR CONGRESS**

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

Mailing Address 525 12th St NE

City Washington State DC Zip Code 20002

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

Name of Employer Blank Rome Occupation Principal

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

**Transaction ID : SA11AI.4453**

Amount of Each Receipt this Period  
**250.00**

Memo Item Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Maureen Quinn**

Mailing Address 1356 Thatch Palm Dr.

City Boca Raton State FL Zip Code 33432

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 29 / 2016

**Transaction ID : SA11AI.4524**

Amount of Each Receipt this Period  
**300.00**

Memo Item Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Nancy Pulte Rickard**

Mailing Address 1239 Cocoanut Rd.

City Boca Raton State FL Zip Code 33432

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

Name of Employer Housewife Occupation Housewife

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 29 / 2016

**Transaction ID : SA11AI.4512**

Amount of Each Receipt this Period  
**250.00**

Memo Item Contribution

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

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

**800.00**

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

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

FOR LINE NUMBER: PAGE 29 OF 45  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**ZUMWALT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Cynthia Rickman**

Mailing Address 15215 Shady Grove Rd.  
Ste 201

City State Zip Code  
Rockville MD 20850

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 30 / 2016

**Transaction ID : SA11AI.4600**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 198.00

Memo Item  
 Partner Attribution

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

Mailing Address 15215 Shady Grove Rd.  
Ste 201

City State Zip Code  
Rockville MD 20850

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

Name of Employer Occupation  
W.M. Rickman Construction Co, Owner

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 30 / 2016

**Transaction ID : SA11AI.4600**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 208.00

Memo Item  
 Partner Attribution

**C.** Full Name (Last, First, Middle Initial)  
**BarryLori Ripps**

Mailing Address 4535 Bohemia Place

City State Zip Code  
Pensacola FL 32504

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

Name of Employer Occupation  
self healthcare

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 08 / 2016

**Transaction ID : SA11AI.4385**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item  
 Contribution

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

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

\_\_\_\_\_ 500.00

\_\_\_\_\_

**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 45
	<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)  
**ZUMWALT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Zoe Roa**

Mailing Address 233 Coral Lane

City State Zip Code  
Palm Beach FL 33480

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

Name of Employer none Occupation none

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 24 / 2016

**Transaction ID : SA11AI.4344**

Amount of Each Receipt this Period  
1000.00

Memo Item Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Zoe Roa**

Mailing Address 233 Coral Lane

City State Zip Code  
Palm Beach FL 33480

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

Name of Employer none Occupation none

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 30 / 2016

**Transaction ID : SA11AI.4609**

Amount of Each Receipt this Period  
198.00

Memo Item Partner Attribution

**C.** Full Name (Last, First, Middle Initial)  
**Gene B. Rosenbaum**

Mailing Address PO Box 2100

City State Zip Code  
Pensacola FL 32582

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

Name of Employer Southern Scrap Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

**Transaction ID : SA11AI.4471**

Amount of Each Receipt this Period  
1000.00

Memo Item 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 45
	<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)  
**ZUMWALT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Gene B. Rosenbaum**

Mailing Address **PO Box 2100**

City **Pensacola** State **FL** Zip Code **32582**

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

Name of Employer **Southern Scrap** Occupation **CEO**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 20 / 2016**

**Transaction ID : SA11AI.4509**

Amount of Each Receipt this Period  
**250.00**

Memo Item Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Carver Rudolph**

Mailing Address **420 W Fourth St  
Suite 202 C**

City **Winston-Salem** State **NC** Zip Code **27101**

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

Name of Employer **Self** Occupation **Real Estate**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 03 / 2016**

**Transaction ID : SA11AI.4362**

Amount of Each Receipt this Period  
**250.00**

Memo Item Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Ray Russenberger**

Mailing Address **1 Port Royal Way**

City **Pensacola** State **FL** Zip Code **32502**

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

Name of Employer **Marina Management Corp** Occupation **Business Owner**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2016**

**Transaction ID : SA11AI.4637**

Amount of Each Receipt this Period  
**2500.00**

Memo Item Contribution

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

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

**3000.00**

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

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

FOR LINE NUMBER: PAGE 32 OF 45  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**ZUMWALT FOR CONGRESS**

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

Mailing Address 6907 Crail Drive

City State Zip Code  
Bethesda MD 20817

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

Name of Employer Occupation  
retired retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 10 / 2016

**Transaction ID : SA11AI.4268**

Amount of Each Receipt this Period  
250.00

Memo Item Contribution

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

Mailing Address 6600 N Military Trail Ste C535

City State Zip Code  
Boca Raton FL 33496

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

Name of Employer Occupation  
Office Depot President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 29 / 2016

**Transaction ID : SA11AI.4525**

Amount of Each Receipt this Period  
250.00

Memo Item Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Gerald Sheetz**

Mailing Address 1900 Royal Palm Way

City State Zip Code  
Boca Raton FL 33432

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 29 / 2016

**Transaction ID : SA11AI.4518**

Amount of Each Receipt this Period  
1000.00

Memo Item 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 33 OF 45
	<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)  
**ZUMWALT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Clyde SMITH</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 20 / 2016	
Mailing Address 10401 DEERFOOT DRIVE		<b>Transaction ID : SA11AI.4333</b>	
City great falls	State VA	Zip Code 22066	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Professional Services Management LLC	Occupation owner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
		<input type="checkbox"/> Memo Item Contribution	

Full Name (Last, First, Middle Initial) <b>B. Clay Spencer</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2016	
Mailing Address 1225 First St.		<b>Transaction ID : SA11AI.4428</b>	
City New Orleans	State LA	Zip Code 70130	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Simmons	Occupation Business Owner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
		<input type="checkbox"/> Memo Item Contribution	

Full Name (Last, First, Middle Initial) <b>C. Robert Switzer</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2016	
Mailing Address 92 Highpoint Dr.		<b>Transaction ID : SA11AI.4625</b>	
City Gulf Breeze	State FL	Zip Code 32561	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Lamar Advertising	Occupation VP		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
		<input type="checkbox"/> Memo Item Contribution	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<b>TOTAL</b> 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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 34 OF 45

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NAME OF COMMITTEE (In Full)  
**ZUMWALT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Deborah L. Tarrant**

Mailing Address 1083 Hillsboro Mile

City Hillsboro Beach State FL Zip Code 33062

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 19 / 2016**

**Transaction ID : SA11AI.4486**

Amount of Each Receipt this Period  
**500.00**

Memo Item Contribution

**B.** Full Name (Last, First, Middle Initial)  
**W.M. Rickman Construction Company LLC**

Mailing Address 15215 Shady Grove road Ste 201

City rockville State MD Zip Code 20850

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 30 / 2016**

**Transaction ID : SA11AI.4593**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
 See Partner Attribution below

**C.** Full Name (Last, First, Middle Initial)  
**Russell Wagner**

Mailing Address 13410 Kelvin Ave

City Philadelphia State PA Zip Code 19116

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

Name of Employer Holy Redeemer Health System Occupation CFO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 24 / 2016**

**Transaction ID : SA11AI.4343**

Amount of Each Receipt this Period  
**500.00**

Memo Item 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 35 OF 45
	<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)  
**ZUMWALT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Robert Walton</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 07 / 2016	
Mailing Address 12469 Wendell Holmes Road		<b>Transaction ID : SA11AI.4247</b>	
City Herndon	State VA	Zip Code 20171	Amount of Each Receipt this Period _____ 500.00 <input type="checkbox"/> Memo Item Contribution
FEC ID number of contributing federal political committee.		C _____	
Name of Employer Dorenavant, llc	Occupation IT Consulting		
Receipt For: 2016 <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) <b>B. Jean Werner</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 26 / 2016	
Mailing Address 2609 Soapstone Drive		<b>Transaction ID : SA11AI.4347</b>	
City Reston	State VA	Zip Code 20191	Amount of Each Receipt this Period _____ 300.00 <input type="checkbox"/> Memo Item Contribution
FEC ID number of contributing federal political committee.		C _____	
Name of Employer retired	Occupation retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Letitia White</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 13 / 2016	
Mailing Address 13901 Piscataway Drive 511 C St, NE		<b>Transaction ID : SA11AI.4283</b>	
City Fort Washington	State NC	Zip Code 20744	Amount of Each Receipt this Period _____ 1000.00 <input type="checkbox"/> Memo Item Contribution
FEC ID number of contributing federal political committee.		C _____	
Name of Employer Innovative Federal Strategies	Occupation Government Relations		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 1800.00
<b>TOTAL</b> 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 36 OF 45
	<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)  
**ZUMWALT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Timothy Williams**

Mailing Address 200 S Maya Palm Dr.

City State Zip Code  
Boca Raton FL 33432

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 29 / 2016

**Transaction ID : SA11AI.4522**

Amount of Each Receipt this Period  
500.00

Memo Item Contribution

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

Mailing Address 2581 Bayou Blvd

City State Zip Code  
Pensacola FL 32503

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

Name of Employer Occupation  
Emcare Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 21 / 2016

**Transaction ID : SA11AI.4336**

Amount of Each Receipt this Period  
300.00

Memo Item Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Lin Zhang**

Mailing Address 1631 Calera Creek Heights Dr.

City State Zip Code  
Milpitas CA 95035

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

Name of Employer Occupation  
Bocosoft President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2016

**Transaction ID : SA11AI.4488**

Amount of Each Receipt this Period  
1000.00

Memo Item Contribution

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

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

1800.00

**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 37 OF 45
	<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)  
**ZUMWALT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Ann Zumwalt</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 27 / 2016	
Mailing Address 33 Western Drive		<b>Transaction ID : SA11AI.4406</b>	
City Longmeadow	State MA	Zip Code 01106	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 280.00	
Name of Employer retired	Occupation retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 280.00		
<input type="checkbox"/> Memo Item Contribution			

Full Name (Last, First, Middle Initial) <b>B. Frances Zumwalt</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 11 / 2016	
Mailing Address 1675 Chatsbury St		<b>Transaction ID : SA11AI.4269</b>	
City El Cajon	State CA	Zip Code 92021	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Grossmont Union High School District	Occupation Teacher		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
<input type="checkbox"/> Memo Item Contribution			

Full Name (Last, First, Middle Initial) <b>C. Kurt Zumwalt</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 14 / 2016	
Mailing Address 831 Runner Oak Street		<b>Transaction ID : SA11AI.4288</b>	
City Celebration	State FL	Zip Code 34747	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00	
Name of Employer Clinical Colleagues	Occupation Managing Partner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		
<input type="checkbox"/> Memo Item Contribution			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3480.00
<b>TOTAL</b> This Period (last page this line number only).....	3480.00

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

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

FOR LINE NUMBER: PAGE 38 OF 45  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**ZUMWALT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Kurt Zumwalt**

Mailing Address 831 Runner Oak Street

City Celebration State FL Zip Code 34747

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

Name of Employer Clinical Colleagues Occupation Managing Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 14 / 2016

**Transaction ID : SA11AI.4290**

Amount of Each Receipt this Period  
2700.00

Memo Item Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Mouzetta Zumwalt-Weathers**

Mailing Address 2513 Chelmsford Drive

City Cary State NC Zip Code 27518

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

Name of Employer Celgene Occupation Sales

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 17 / 2016

**Transaction ID : SA11AI.4298**

Amount of Each Receipt this Period  
1000.00

Memo Item Contribution

**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

Memo Item

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

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

3700.00

96561.00

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

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

FOR LINE NUMBER: PAGE 39 OF 45  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**ZUMWALT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MARY BONO COMMITTEE**

Mailing Address 1050 K STREET NW  
SUITE 400

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00332890

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2016

**Transaction ID : SA11C.4425**

Amount of Each Receipt this Period  
500.00

Memo Item Contribution

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

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

500.00

500.00

**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 40 OF 45			
	<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)  
**ZUMWALT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Apple Market</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2016		
Mailing Address 1021 Scenic Hwy			Amount of Each Disbursement this Period 296.60		
City Pensacola	State FL	Zip Code 32503	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Food & Beverage for Fundraiser		Category/ Type 003	Transaction ID : <b>SB17.4580</b>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Delta Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2016		
Mailing Address 1030 Delta Boulevard			Amount of Each Disbursement this Period 517.20		
City Atlanta	State GA	Zip Code 30354	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Commercial Flight		Category/ Type 002	Transaction ID : <b>SB17.4567</b>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Department of State</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2016		
Mailing Address 500 South Bronough St.			Amount of Each Disbursement this Period 10440.00		
City Tallahassee	State FL	Zip Code 32399	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Qualifying Fee		Category/ Type 001	Transaction ID : <b>SB17.4538</b>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11253.80
<b>TOTAL</b> 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 45	
	<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)  
**ZUMWALT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Hamilton Art Agency</b>		Date of Disbursement MM / DD / YYYY 05 / 24 / 2016
Mailing Address 601 North Davis St.		Amount of Each Disbursement this Period 4837.50 <input type="checkbox"/> Memo Item <b>Transaction ID : SB17.4551</b>
City Pensacola	State FL	
Zip Code 32501	Purpose of Disbursement Signs	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Maven Design Company, LLC</b>		Date of Disbursement MM / DD / YYYY 04 / 18 / 2016
Mailing Address 3600 26th St N		Amount of Each Disbursement this Period 1260.00 <input type="checkbox"/> Memo Item <b>Transaction ID : SB17.4564</b>
City Arlington	State VA	
Zip Code 22207	Purpose of Disbursement Website Design	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Spencer Orenstein</b>		Date of Disbursement MM / DD / YYYY 05 / 16 / 2016
Mailing Address 3400 Wimbledon Dr. #12		Amount of Each Disbursement this Period 1250.00 <input type="checkbox"/> Memo Item <b>Transaction ID : SB17.4544</b>
City Pensacola	State FL	
Zip Code 32504	Purpose of Disbursement Support Staff	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7347.50
<b>TOTAL</b> 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 45			
	<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)  
**ZUMWALT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Spencer Orenstein</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2016
Mailing Address 3400 Wimbledon Dr. #12		Amount of Each Disbursement this Period 1250.00
City Pensacola	State FL	
Zip Code 32504	Purpose of Disbursement Support Staff	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	<b>Transaction ID : SB17.4547</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Spencer Orenstein</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2016
Mailing Address 3400 Wimbledon Dr. #12		Amount of Each Disbursement this Period 1250.00
City Pensacola	State FL	
Zip Code 32504	Purpose of Disbursement Support Staff	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	<b>Transaction ID : SB17.4548</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Raise the Money, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2016
Mailing Address PO Box 26466		Amount of Each Disbursement this Period 2973.95
City Little Rock	State AR	
Zip Code 72221	Purpose of Disbursement Credit Card Processing Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 003	<b>Transaction ID : SB17.4610</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5473.95
<b>TOTAL</b> 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 45	
	<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)  
**ZUMWALT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Republican Party of Congressional District #1</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 20 / 2016</b>
Mailing Address 5907 Cedar Tree Dr.		Amount of Each Disbursement this Period <b>750.00</b>
City Milton State FL Zip Code 32570	Purpose of Disbursement Advertising	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type <b>004</b>	<b>Transaction ID : SB17.4536</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Strategic Image Management, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 25 / 2016</b>
Mailing Address PO Box 2065		Amount of Each Disbursement this Period <b>1550.00</b>
City Dunedin State FL Zip Code 34697	Purpose of Disbursement Campaign Data Services	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type <b>001</b>	<b>Transaction ID : SB17.4558</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Strategic Image Management, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 02 / 2016</b>
Mailing Address PO Box 2065		Amount of Each Disbursement this Period <b>2000.00</b>
City Dunedin State FL Zip Code 34697	Purpose of Disbursement Consulting Services	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type <b>001</b>	<b>Transaction ID : SB17.4554</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>4300.00</b>
<b>TOTAL</b> 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 45	
	<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)  
**ZUMWALT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Strategic Image Management, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2016
Mailing Address PO Box 2065		Amount of Each Disbursement this Period 4926.65
City Dunedin State FL Zip Code 34697	Purpose of Disbursement Consulting and social media ads 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item <b>Transaction ID : SB17.4555</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Strategic Image Management, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2016
Mailing Address PO Box 2065		Amount of Each Disbursement this Period 1616.72
City Dunedin State FL Zip Code 34697	Purpose of Disbursement Printing 006 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item <b>Transaction ID : SB17.4556</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Strategic Image Management, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2016
Mailing Address PO Box 2065		Amount of Each Disbursement this Period 2000.00
City Dunedin State FL Zip Code 34697	Purpose of Disbursement Consulting 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item <b>Transaction ID : SB17.4550</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8543.37
<b>TOTAL</b> 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 45	
	<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)  
**ZUMWALT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Strategic Image Management, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 21 / 2016</b>
Mailing Address PO Box 2065		Amount of Each Disbursement this Period <b>161.40</b>
City Dunedin State FL Zip Code 34697	Purpose of Disbursement Business Cards Category/Type <b>006</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item <b>Transaction ID : SB17.4534</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>161.40</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>37080.02</b>