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FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		Authorized Con		Offic	ce Use Only
NAME OF COMMITTEE (in	TYPE OR PRIN	• –	xample: If typing, typ	De 12FE4M5	
, BRINKLEY FC	R CONGRESS				ı
ADDRESS (number an	d street)	BOARD RD			
▼ Check if dif	ferent				
than previous reported. (A	usly FREDERICK			MD 2170	04
2. FEC IDENTIFIC	CATION NUMBER V	CITY ▲		STATE ▲	ZIP CODE ▲
C C0050701	2	3. IS THIS REPORT	x NEW (N) OF	AMENDED (A)	STATE ▼ DISTRICT MD 06
4. TYPE OF RE	PORT (Choose One)	(b) 10 D	- El .: D . (
(a) Quarterly Re	eports:	(b) 12-Day PRI	E-Election Report for	the:	
April 15	Quarterly Report (Q1)	Ш	Primary (12P)	General (12G)	Runoff (12R)
			Convention (12C)	Special (12S)	
July 15	Quarterly Report (Q2)		M M / D	D / Y Y Y Y	
X Octobe	r 15 Quarterly Report (Q3)	Election or			in the State of
January	31 Year-End Report (YE)	(c) 30-Day PO	ST-Election Report for	or the:	
			General (30G)	Runoff (30R)	Special (30S)
Termina	tion Report (TER)	Election or	M M / D	D / Y Y Y Y	in the State of
5. Covering Period	M M / D 01	2017	through	M M / D D / Y	Y Y Y 2017
I certify that I have e	xamined this Report and to McGinlev. Mi	o the best of my kichael, Andrew, ,	nowledge and belief	it is true, correct and con	mplete.
Type or Print Name of	of Treasurer				
Signature of Treasure	McGinley, Michael, And	drew, ,	[Electronically Filed]	Date 10	04 / Y Y Y Y Y Y Y 2017
NOTE: Submission of	false, erroneous, or incomple	ete information may	subject the person si	igning this Report to the pe	enalties of 52 U.S.C. §30109
Office					
Use Only					FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name BRINKLEY FOR CONGRESS

Report Covering the Period: From: Mon / Don / Y Y Y Y Y Y TO: Mon / Don / Y 2017	/ Y Y Y Y Y 2017	/ D D D		lo:		D D /		From:	Report Covering the Period:
--	------------------	---------	--	-----	--	-------	--	-------	-----------------------------

		COLUMN A This Period	COLUMN B Election Cycle-to-Date
ò.	Net Contributions (other than loans)		
	(a) Total Contributions (other than loans) (from Line 11(e))	0.00	100818.54
	(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))	0.00	100818.54
	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	0.00	94415.34
	(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))	0.00	94415.34
	Cash on Hand at Close of Reporting Period (from Line 27)	6367.34	
	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
0.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	13322.80	

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

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

BRINKLEY FOR CONGRESS

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
11.	CONTRIBUTIONS (other than loans) FROM:				
	(a) Individuals/Persons Other Than				
	Political Committees (i) Itemized (use Schedule A)	0.00	69400.00		
	(ii) Unitemized	0.00	2610.00		
	(iii) TOTAL of contributions from individuals	0.00	72010.00		
	(b) Political Party Committees	0.00	0.00		
	(c) Other Political Committees (such as PACs)	0.00	7000.00		
	(d) The Candidate	0.00	21808.54		
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	100818.54		
2.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00		
3.	LOANS:				
	(a) Made or Guaranteed by the Candidate	0.00	0.00		
	(b) All Other Loans	0.00	0.00		
	(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00		
4.	OFFSETS TO OPERATING				
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00		
5.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.14		
6.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	100818.68		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4/5 **COLUMN A COLUMN B** II. DISBURSEMENTS **Total This Period Election Cycle-to-Date** 0.00 94415.34 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 0.00 by the Candidate..... 0.00 0.00 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 0.00 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs) TOTAL CONTRIBUTION REFUNDS 0.00 0.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 0.00 94415.34 (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 6367.34 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... 0.00 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... 6367.34 25. SUBTOTAL (add Line 23 and Line 24)..... 0.00 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD 6367.34 (subtract Line 26 from Line 25).....

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Ex

CHEDULE D (FEC Form 3)		e separate				
EBTS AND OBLIGATIONS	schedule for eac	` '	FOR LINE NUMBER: (check only one)	R:		
cluding Loans			numbered		(Shook only one)	x 10
AME OF COMMITTEE (In Full)						· ·
BRINKLEY FOR CON	NGRES	S				
A. Full Name (Last, First, Middle Initial) of De	btor or Creditor				ebt (Purpose):	
Scott Strategies inc			Fin	al invoid	ce for campaign costs	
Mailing Address 151 Duke of Gloucester St						
City	State	Zip Code				
Annapolis	MD	21401				
Outstanding Balance Beginning This Period			Tra	ansactio	on ID : SD10.4390	
12594.45						
Amount Incurred This Period	F	Payment This Period	Oı	ıtstandir	ng Balance at Close of	This Period
0.00	L.,	0.0	00	-	125	594.45
B. Full Name (Last, First, Middle Initial) of Deb	otor or Creditor				ebt (Purpose):	
UPTown Press INC			Mai	iling cos	ets	
Mailing Address 501 West 23rd St						
City	State	Zip Code				
Baltimore	MD	21211				
		•				
Outstanding Balance Beginning This Period			Tra	ansactio	on ID : SD10.4391	
Outstanding Balance Beginning This Period 728.35			Tra	ansactio	on ID : SD10.4391	
728.35	F	Payment This Period				· This Period
728.35 Amount Incurred This Period	F	Payment This Period	Οι		ng Balance at Close of	
728.35	F	Payment This Period	Οι		ng Balance at Close of	This Period
728.35 Amount Incurred This Period 0.00		0.0	Ot.	utstandir	ng Balance at Close of	
728.35 Amount Incurred This Period		0.0	Ot.	utstandir	ng Balance at Close of	
728.35 Amount Incurred This Period 0.00		0.0	Ot.	utstandir	ng Balance at Close of	
Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of De	ebtor or Creditor	0.0	Ot.	utstandir	ng Balance at Close of	
728.35 Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of De		0.0	Ot.	utstandir	ng Balance at Close of	
Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of De	ebtor or Creditor	0.0	Ot.	utstandir	ng Balance at Close of	
Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of De Mailing Address City	ebtor or Creditor	0.0	Ot.	utstandir	ng Balance at Close of	
Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of De Mailing Address City Outstanding Balance Beginning This Period	ebtor or Creditor	Zip Code	Ou Natu	itstandir	ebt (Purpose):	728.35
Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of De Mailing Address City	ebtor or Creditor	0.0	Ou Natu	itstandir	ng Balance at Close of	728.35
Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of De Mailing Address City Outstanding Balance Beginning This Period	ebtor or Creditor	Zip Code	Ou Natu	itstandir	ebt (Purpose):	728.35
Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of De Mailing Address City Outstanding Balance Beginning This Period	State	Zip Code Payment This Period	Ou Natu	itstandir	ebt (Purpose):	728.35
Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of De Mailing Address City Outstanding Balance Beginning This Period Amount Incurred This Period	State	Zip Code Payment This Period	Ou Natu	itstandir	ng Balance at Close of Purpose):	728.35 This Period
Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of De Mailing Address City Outstanding Balance Beginning This Period Amount Incurred This Period SUBTOTALS This Period This Page (optional	State State Figure 1. State Figure 2. State State 1. State 2. State 3.	Zip Code Payment This Period	Ou Natu	itstandir	ng Balance at Close of Purpose):	728.35 This Period

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

13322.80