PAGE 1 / 14

FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		thorized Com	_			Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT		mple: If typin r the lines.	g, type	12FE4M5	
Matt McCall for Co	ongress					1
ADDRESS (number and stre	eet) 678 Rosewood					
Check if differen	t					
than previously reported. (ACC)	Boerne				TX L	78006
2. FEC IDENTIFICATION	ON NUMBER ▼	CITY ▲			STATE A	ZIP CODE A STATE ▼ DISTRICT
C C00543025		3. IS THIS REPORT	NEW (N)	OR	× AMENI	
4. TYPE OF REPOR	T (Choose One)	b) 12-Day PRE -	Election Repo	ort for the:		
(a) Quarterly Report	s:	П	Primary (12P)		General (12G) Runoff (12R)
April 15 Qua	rterly Report (Q1)	- F				
X July 15 Quar	terly Report (Q2)		Convention (120)	Special (1	(28)
October 15 (Quarterly Report (Q3)	Election on	M M /	D D /	Y " Y " Y	in the State of
January 31 N	/ear-End Report (YE) (c) 30-Day POS	-Election Rep	oort for the:		
			General (30G	i)	Runoff (30	OR) Special (30S)
Termination F	Report (TER)	Election on	M M /	D D /	YYYY	in the State of
5. Covering Period	M M M / D D / D O1	y y y y y 2014	through	M M M 06	30	Y Y Y Y Y 2014
I certify that I have exami	ned this Report and to the	he best of my kno	owledge and l	belief it is tru	ie, correct an	d complete.
Type or Print Name of Tre	easurer Brian Matthew N	/IcCall				
Signature of Treasurer	Brian Matthew McCall		[Electronically 1	Filed] D	ate 09	/ D D / Y Y Y Y Y 17 17 2015
NOTE: Submission of false,	erroneous, or incomplete	information may s	ubject the per	son signing t	his Report to t	the penalties of 2 U.S.C. §437g.
Office						FEC FORM 3
Use Only						(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

PAGE 2 / 14

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Matt McCall	for	Congress
-------------	-----	----------

06 30 2014 01 2014 Report Covering the Period: From: To: **COLUMN B COLUMN A Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 100.00 94760.36 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 100.00 94760.36 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 641.20 128719.56 (from Line 17) (b) Total Offsets to Operating 124.20 124.20 Expenditures (from Line 14)..... (c) Net Operating Expenditures 517.00 128595.36 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 1665.29 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 36000.00 Schedule C and/or Schedule D).....

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)

PAGE 3 / 14

Write or Type Committee Name

Mott	MaCall	for	Congress
IVIall	MCCall	101	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)	100.00	80900.00	
	(ii) Unitemized	0.00	13785.00	
	(iii) TOTAL of contributions from individuals	100.00	94685.00	
	(b) Political Party Committees	0.00	0.00	
	(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) The Candidate(e) TOTAL CONTRIBUTIONS		0.00	75.36	
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	100.00	94760.36	
2.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00	
3.	LOANS:	,	,	
	(a) Made or Guaranteed by the Candidate	0.00	36000.00	
	(b) All Other Loans	0.00	0.00	
	(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	36000.00	
4.	OFFSETS TO OPERATING			
	EXPENDITURES (Refunds, Rebates, etc.)	124.20	124.20	
5.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.29	
Э.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	224.20	130884.85	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 14

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	641.20	128719.56
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	500.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	641.20	129219.56
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	2082.29
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	224.20
25.	SUBTOTAL (add Line 23 and Line 24)		2306.49
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	641.20
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		1665.29

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 5 OF Use separate schedule(s) (check only one) 11a 11b 11d 11c

14

for each category of the Detailed Summary Page 12 13a 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) Matt McCall for Congress Full Name (Last, First, Middle Initial) Ed & Jodi Miller Date of Receipt Mailing Address 118 Creekside Terrace 2014 02 City State Zip Code Transaction ID: SA11AI.4994 TX 78006 Boerne FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation Foresight Golf, LLC **Business Owner** Receipt For: 2014 Election Cycle-to-Date Primary X General 1600.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional)..... 100.00 TOTAL This Period (last page this line number only).....

S

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate sch for each category Detailed Summar	y of the	FOR LINE NUMBER: PAGE 6 OF 14 (check only one) X 17
Any information copied from such Reports and Statements ror for commercial purposes, other than using the name and			
NAME OF COMMITTEE (In Full) Matt McCall for Congress			
Full Name (Last, First, Middle Initial) Naughan Braden			Date of Disbursement
Mailing Address 14500 Blanco Rd. Apt. 1012			04 12 2014
City State San Antonio TX	Zip Code 78216		Amount of Each Disbursement this Period
Purpose of Disbursement Finance report preparation fee		001	300.00 Transaction ID : SB17.4996
Candidate Name Matt McCall for Congress		Category/ Type	
Office Sought: House Disbursement Formation			
Full Name (Last, First, Middle Initial)			
Piryx, Inc.			Date of Disbursement
Mailing Address P.O. Box 7061			04 02 2014
City State Fullerton CA	Zip Code 92834		Amount of Each Disbursement this Period
Purpose of Disbursement	92034		5.75
service fee		001	Transaction ID : SB17.4995
Candidate Name Matt McCall for Congress		Category/ Type	
President Other (or: 2014 y X General (specify)		
State: TX District: 21			
Full Name (Last, First, Middle Initial) Vici Media Group			Date of Disbursement
Mailing Address P.O. Box 1234			04 / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City State Z	Zip Code		Amount of Each Disbursement this Period
	78727		7.11.00.11.01.01.01.01.01.01.01.01.01
Purpose of Disbursement Marketing expenses		004	138.02
Candidate Name Matt McCall for Congress		Category/ Type	Transaction ID : SB17.4997
Office Sought: House Disbursement Fo		7.	
State: TX District: 21	- · · · · · · · · · · · · · · · · · · ·		
SUBTOTAL of Disbursements This Page (optional)			443.77

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

S

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS		Use separate so for each categor Detailed Summa	y of the	FOR LINE NUMBER: PAGE 7 OF 14 (check only one) X 17	
Ar	ny information copied from such Reports and Statement for commercial purposes, other than using the name a	s may not be sold or nd address of any pol	used by any itical committ	person for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) Matt McCall for Congress	, ,			
A.	Full Name (Last, First, Middle Initial) Vici Media Group			Date of Disbursement	
	Mailing Address P.O. Box 1234			04 14 2014	
	City State Austin TX	Zip Code 78727	I	Amount of Each Disbursement this Period	
	Purpose of Disbursement Marketing expense Candidate Name		004	Transaction ID : SB17.4998	
	Matt McCall for Congress Office Sought: House Senate Prim President Othe	ary Seneral	Category/ Type		
	State: TX District: 21 Full Name (Last, First, Middle Initial)	r (specify)			
В.	Mailing Address			Date of Disbursement	
	City State	Zip Code	I	Amount of Each Disbursement this Period	
	Purpose of Disbursement Candidate Name				
			Category/ Type		
	Office Sought: House Disbursement Senate President Othe				
_	State: District: Full Name (Last, First, Middle Initial)				
C.				Date of Disbursement	
	Mailing Address			M M / D D / Y Y Y	
	City State	Zip Code		Amount of Each Disbursement this Period	
	Purpose of Disbursement			1 L,	
	Candidate Name		Category/ Type		
	Office Sought: House Disbursement Senate Prim President Othe				
_	State: District:				
s	SUBTOTAL of Disbursements This Page (optional)			197.43	

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

641.20

PAGE

8 OF 14

DANS			Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER: (check only one) X 13a 13b	
AME OF COMMITTEE (In Full) Matt McCall for Congress			Transac	ction ID : SC/10.4128
LOAN SOURCE Full Name (Last, Fire	st, Middle Initial)		[PERSONAL FUNDS]	Election: 2014
Brian Matthew McCall				Primary
Mailing Address 678 Rosewood				General Other (specify) ▼
City	State	ZIP Code)	
Boerne	TX	78006		
Original Amount of Loan 500.00		Payment To D	ate Bala	ance Outstanding at Close of This Period
TERMS		Data Dua	Interest Det	Consumed
Date Incurred M 02 / 26 / Y 2013	M M / D	Date Due	Interest Rate 31/2016 0.00	
02 20 2013		12/3	31/2016	% (apr) Yes No
List All Endorsers or Guarantors (if				
1. Full Name (Last, First, Middle Initi	al)	1	Name of Employer	
Mailing Address		(Occupation	
City Si	tate ZIP Code		Amount Guaranteed Outstanding:	7 7
2. Full Name (Last, First, Middle Initia	l)	1	Name of Employer	
Mailing Address		(Occupation	
City	tate ZIP Code		Amount Guaranteed Outstanding:	9 9
3. Full Name (Last, First, Middle Initia	1)	1	Name of Employer	
Mailing Address		(Occupation	
City Si	tate ZIP Code	(Amount Guaranteed Outstanding:	, , , , , , ,
4. Full Name (Last, First, Middle Initia	1)	1	Name of Employer	
Mailing Address		(Occupation	
City St	tate ZIP Code	(Amount Guaranteed Outstanding:	7
SUBTOTALS This Period This Page (opt				500.00
The raise and hast page in this in				9 9

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

×	13a
	13b

14

OF

(check only one) Detailed Summary Page Transaction ID: SC/10.4129 NAME OF COMMITTEE (In Full) Matt McCall for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Brian Matthew McCall ★ General Mailing Address Other (specify) \blacktriangledown 678 Rosewood City State ZIP Code TX 78006 Boerne Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 03^M ^D 11 2013 12/31/2016 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

X 13a I

14

PAGE 10

LOANS		Detailed Summary Pag	ge (orlook only only)
NAME OF COMMITTEE (In Full) Matt McCall for Congress		Transac	ction ID : SC/10.4449
LOAN SOURCE Full Name (Last, First, Min Brian Matthew McCall	ddle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary X General
Mailing Address 678 Rosewood			Other (specify)
City	State ZIF	Code	
Boerne	TX 78	3006	
Original Amount of Loan	Cumulative Paymer	nt To Date Bala	ance Outstanding at Close of This Period
300.00		0.00	3000.00
Date Incurred Manage 11 Date Incurred Date Incurred Date Incurred	Date M M / D D /	Due Interest Rate 12/31/2016 0.00	
List All Endorsers or Guarantors (if any) t	o Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 9
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7 7 7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	, , , , , , , ,
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9
SUBTOTALS This Period This Page (optional).		·	3000.00
TOTALS This Period (last page in this line only	y)	······	, , , , , , ,
Carry outstanding balance only to LINE 3, Sc	hedule D, for this lin	e. If no Schedule D. carry for	ward to appropriate line of Summarv.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

11

×	13a
	13b

14

(check only one) Detailed Summary Page Transaction ID: SC/10.4436 NAME OF COMMITTEE (In Full) Matt McCall for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Brian Matthew McCall ★ General Mailing Address Other (specify) \blacktriangledown 678 Rosewood City State ZIP Code TX 78006 Boerne Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 20000.00 0.00 20000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 18^D ^M 12^M 2013 12/31/2016 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 20000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

12

X	13a
	13b

14

(check only one) Detailed Summary Page Transaction ID: SC/10.4918 NAME OF COMMITTEE (In Full) Matt McCall for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Brian Matthew McCall General Mailing Address Other (specify) \blacktriangledown 678 Rosewood City State ZIP Code TX 78006 Boerne Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 03^M 03 ž014 12/31/2016 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 1000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

13

×	13a
	13b

14

Detailed Summary Page Transaction ID: SC/10.4919 NAME OF COMMITTEE (In Full) Matt McCall for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Brian Matthew McCall General Mailing Address Other (specify) \blacktriangledown 678 Rosewood City State ZIP Code TX 78006 Boerne Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 03^M 03 ž014 12/31/2016 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 1000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

14

×	13a
	13b

14

Detailed Summary Page Transaction ID: SC/10.5007 NAME OF COMMITTEE (In Full) Matt McCall for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Brian Matthew McCall General Mailing Address Other (specify) \blacktriangledown 678 Rosewood City State ZIP Code TX 78006 Boerne Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 500.00 0.00 500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 03^M 03 ž014 12/31/2016 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 500.00 TOTALS This Period (last page in this line only) 36000.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.