

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

John Howard^3 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))....	1120.00	1120.00
(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)).....	1120.00	1120.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	2518.16	2518.16
(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)).....	2518.16	2518.16
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1091.02	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	2489.16	

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

John Howard^3 for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	500.00	500.00
(ii) Unitemized.....	370.00	370.00
(iii) TOTAL of contributions from individuals ▶	870.00	870.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	250.00	250.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	1120.00	1120.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	2489.16	2489.16
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	2489.16	2489.16
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.02	0.02
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	3609.18	3609.18

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	2518.16	2518.16
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	2518.16	2518.16

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	3609.18
25. SUBTOTAL (add Line 23 and Line 24).....	3609.18
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	2518.16
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1091.02

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

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

FOR LINE NUMBER: PAGE 5 OF 9
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
John Howard^3 for Congress

A. Full Name (Last, First, Middle Initial)
Mr. John Whitman Howard Sr.

Mailing Address 1779 Cedar Lane

City State Zip Code
Vero Beach FL 32963

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 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
 02 / 26 / 2012

Transaction ID : SA11Al.4100

Amount of Each Receipt this Period
500.00

Individual 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

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

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

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

500.00

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 6 OF 9
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
John Howard^3 for Congress

A. Full Name (Last, First, Middle Initial)
Mr. John Whitman Howard III

Mailing Address PO Box 44093

City Eden Prairie State MN Zip Code 55344

FEC ID number of contributing federal political committee. **C H2MN03088**

Name of Employer EVS Occupation Biologist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 24 / 2012

Transaction ID : SA11D.4109

Amount of Each Receipt this Period
250.00

Candidate 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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

250.00

250.00

**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 9
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
John Howard^3 for Congress

A. Full Name (Last, First, Middle Initial)
Mr. John Whitman Howard III

Mailing Address PO Box 44093

City Eden Prairie State MN Zip Code 55344

FEC ID number of contributing federal political committee. **C H2MN03088**

Name of Employer EVS Occupation Biologist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2739.16

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 05 / 2012

Transaction ID : SA13A.4130

Amount of Each Receipt this Period
2489.16

Loan to cover expenses

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

2489.16

2489.16

**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 8 OF 9			
	<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)
John Howard^3 for Congress

Full Name (Last, First, Middle Initial) A. Delta Airlines		Date of Disbursement MM / DD / YYYY 02 / 12 / 2012
Mailing Address P.O. Box 20706		Amount of Each Disbursement this Period 626.80
City Atlanta	State GA	
Zip Code 30320-6001	Purpose of Disbursement Airtravel to FEC conference	Transaction ID : SB17.4165
Candidate Name John Howard^3 for Congress	Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MN District: 03		

Full Name (Last, First, Middle Initial) B. Hilton Miami Downtown		Date of Disbursement MM / DD / YYYY 02 / 21 / 2012
Mailing Address 1601 Biscayne Blvd		Amount of Each Disbursement this Period 483.14
City Miami	State FL	
Zip Code 33132	Purpose of Disbursement Hotel expense for Campaign Conference	Transaction ID : SB17.4163
Candidate Name John Howard^3 for Congress	Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MN District: 03		

Full Name (Last, First, Middle Initial) c. Sylvester Management Corp/FEC Conference		Date of Disbursement MM / DD / YYYY 02 / 08 / 2012
Mailing Address 7522 Irmo Dr # 1		Amount of Each Disbursement this Period 1150.00
City Columbia	State SC	
Zip Code 29212	Purpose of Disbursement FEC training Conference	Transaction ID : SB17.4167
Candidate Name John Howard^3 for Congress	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MN District: 03		

SUBTOTAL of Disbursements This Page (optional).....	2259.94
TOTAL This Period (last page this line number only).....	2259.94

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **John Howard^3 for Congress** Transaction ID : **SC/10.4130**

LOAN SOURCE Full Name (Last, First, Middle Initial) **Mr. John Whitman Howard III** *[PERSONAL FUNDS]* Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
PO Box 44093

City State ZIP Code
Eden Prairie MN 55344

Original Amount of Loan 2489.16	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 2489.16
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TERMS

Date Incurred: M 03 / D 05 / Y 2012 Date Due: M M / D D / Y 7/12/2012 Interest Rate: 0.00 % (apr) Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional).....	▶	2489.16
TOTALS This Period (last page in this line only).....	▶	2489.16

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