

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Straw for Congress

ADDRESS (number and street) 64711 Apple Ridge Rd

Check if different than previously reported. (ACC)

Goshen IN 46526

2. **FEC IDENTIFICATION NUMBER** C00496299

CITY STATE ZIP CODE STATE DISTRICT

3. IS THIS REPORT NEW (N) OR AMENDED (A)

IN 02

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 [] [] [] in the State of []

(c) 30-Day **POST**-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on [] [] [] in the State of []

5. Covering Period 04 01 2011 through 06 30 2011

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 Mr. Andrew U D Straw

Signature of Treasurer Electronically Filed by Mr. Andrew U D Straw Date 07 15 2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Straw for Congress

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	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)).....	4277.79	4302.13
(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)).....	4277.79	4302.13
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	3933.99	3958.33
(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)).....	3933.99	3958.33
8. Cash on Hand at Close of Reporting Period (from Line 27).....	343.80	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
Straw for Congress

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

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).....	250.00	250.00
(ii) Unitemized.....	723.13	723.13
(iii) TOTAL of contributions from individuals..... ▶	973.13	973.13
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	3304.66	3329.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	4277.79	4302.13
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	4277.79	4302.13

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	3933.99	3958.33
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) ▶	3933.99	3958.33

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	4277.79
25. SUBTOTAL (add Line 23 and Line 24).....	4277.79
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	3933.99
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	343.80

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5 / 56
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 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)
Straw for Congress

A.

Full Name (Last, First, Middle Initial)
Alfred C. Aman, Jr.

Mailing Address 714 S. Fess Ave.

City State Zip Code
Bloomington IN 47401

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

Name of Employer Occupation
Indiana University Law Professor

Receipt For: 2011
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	9	/	2	0	1	1

Transaction ID: SA11AI.4129

Amount of Each Receipt this Period

250.00

250.00

SUBTOTAL of Receipts This Page (optional)	▶	250.00
TOTAL This Period (last page this line number only)	▶	250.00

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

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

FOR LINE NUMBER: PAGE 6 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Straw for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2011
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	1	/	2	0	1	1

Transaction ID: SA11D.4260

Amount of Each Receipt this Period

94.82

In-kind - fuel

54.16

B. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	3	/	2	0	1	1

Transaction ID: SA11D.4262

Amount of Each Receipt this Period

89.16

In-kind - 3rd district dinner

89.16

C. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	3	/	2	0	1	1

Transaction ID: SA11D.4264

Amount of Each Receipt this Period

119.16

In-kind - ads

119.16

SUBTOTAL of Receipts This Page (optional) ►

94.82

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

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SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Straw for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11D.4266

Amount of Each Receipt this Period
56.77

In-kind - fuel

B. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11D.4268

Amount of Each Receipt this Period
18.25

In-kind - food

C. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11D.4270

Amount of Each Receipt this Period
10.00

In-kind - food

SUBTOTAL of Receipts This Page (optional) ► **85.02**

TOTAL 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 8 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Straw for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 210.77

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	7	/	2	0	1	1

Transaction ID: SA11D.4272

Amount of Each Receipt this Period
6.59

In-kind - food

B. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 218.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	7	/	2	0	1	1

Transaction ID: SA11D.4274

Amount of Each Receipt this Period
7.50

In-kind - food -- meeting with students

C. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 241.66

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	0	/	2	0	1	1

Transaction ID: SA11D.4276

Amount of Each Receipt this Period
23.39

In-kind - ads

SUBTOTAL of Receipts This Page (optional) ► **37.48**

TOTAL 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 9 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Straw for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
04 / 10 / 2011

Transaction ID: SA11D.4278

Amount of Each Receipt this Period
49.25

In-kind - fuel

B. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
04 / 13 / 2011

Transaction ID: SA11D.4164

Amount of Each Receipt this Period
49.98

In-kind - USPS

C. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
04 / 13 / 2011

Transaction ID: SA11D.4166

Amount of Each Receipt this Period
20.00

In-kind - food

SUBTOTAL of Receipts This Page (optional) ► **119.23**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Straw for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11D.4280

Amount of Each Receipt this Period
25.70

In-kind - ads

386.59

B. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11D.4168

Amount of Each Receipt this Period
9.26

In-kind - fuel

395.85

C. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11D.4282

Amount of Each Receipt this Period
7.28

In-kind - Internet services

403.13

SUBTOTAL of Receipts This Page (optional) ► **42.24**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Straw for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11D.4170

Amount of Each Receipt this Period
3.80

In-kind - coffee

B. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11D.4172

Amount of Each Receipt this Period
6.95

In-kind - newspaper online research

C. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11D.4284

Amount of Each Receipt this Period
2.65

In-kind - Internet services

SUBTOTAL of Receipts This Page (optional) ► **13.40**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Straw for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 431.87

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	1	/	2	0	1	1

Transaction ID: SA11D.4286

Amount of Each Receipt this Period
15.34

In-kind - Internet services

B. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 439.79

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	3	/	2	0	1	1

Transaction ID: SA11D.4174

Amount of Each Receipt this Period
7.92

In-kind - food

C. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 498.97

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	3	/	2	0	1	1

Transaction ID: SA11D.4176

Amount of Each Receipt this Period
59.18

In-kind - fuel

SUBTOTAL of Receipts This Page (optional) ► **82.44**

TOTAL 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 13 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Straw for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 4 / 2 0 1 1

Transaction ID: SA11D.4288

Amount of Each Receipt this Period
9.97

In-kind - Internet services

B. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11D.4178

Amount of Each Receipt this Period
19.38

In-kind - Indiana government research

C. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11D.4180

Amount of Each Receipt this Period
35.00

In-kind - 3rd district dinner - guest

SUBTOTAL of Receipts This Page (optional) ► **64.35**

TOTAL 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 14 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Straw for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11D.4182

Amount of Each Receipt this Period
25.95

In-kind - advertising

B. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 1 1

Transaction ID: SA11D.4184

Amount of Each Receipt this Period
4.44

In-kind - USPS certified mail FEC filing, campaign creation

C. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 1 1

Transaction ID: SA11D.4186

Amount of Each Receipt this Period
30.00

In-kind - advertising

SUBTOTAL of Receipts This Page (optional) ► **60.39**

TOTAL 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 15 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Straw for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 684.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	4	/	2	0	1	1

Transaction ID: SA11D.4188

Amount of Each Receipt this Period
60.56

In-kind - fuel

B. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 691.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	5	/	2	0	1	1

Transaction ID: SA11D.4190

Amount of Each Receipt this Period
7.13

In-kind - food

C. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 721.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	6	/	2	0	1	1

Transaction ID: SA11D.4192

Amount of Each Receipt this Period
30.00

In-kind - food

SUBTOTAL of Receipts This Page (optional) ► **97.69**

TOTAL 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 16 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Straw for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	7	/	2	0	1	1

Transaction ID: SA11D.4194

Amount of Each Receipt this Period
6.18

In-kind - vehicle expense

727.58

B. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	7	/	2	0	1	1

Transaction ID: SA11D.4196

Amount of Each Receipt this Period
5.01

In-kind - vehicle expense

732.59

C. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	7	/	2	0	1	1

Transaction ID: SA11D.4198

Amount of Each Receipt this Period
50.00

In-kind - Kosciusko JJ Dinner

782.59

SUBTOTAL of Receipts This Page (optional) ► **61.19**

TOTAL 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 17 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Straw for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 8 / 2 0 1 1

Transaction ID: SA11D.4200

Amount of Each Receipt this Period
37.49

In-kind - fuel

B. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 9 / 2 0 1 1

Transaction ID: SA11D.4202

Amount of Each Receipt this Period
5.32

In-kind - ads

C. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 0 / 2 0 1 1

Transaction ID: SA11D.4204

Amount of Each Receipt this Period
18.30

In-kind - USPS

SUBTOTAL of Receipts This Page (optional) ► **61.11**

TOTAL 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 18 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Straw for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
05 / 11 / 2011

Transaction ID: SA11D.4206

Amount of Each Receipt this Period
13.00

In-kind - SB Tribune sub-
scription

856.70

B. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
05 / 12 / 2011

Transaction ID: SA11D.4208

Amount of Each Receipt this Period
60.98

In-kind - fuel

917.68

C. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
05 / 12 / 2011

Transaction ID: SA11D.4210

Amount of Each Receipt this Period
9.68

In-kind - food

927.36

SUBTOTAL of Receipts This Page (optional) ► **83.66**

TOTAL 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 19 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Straw for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 931.91

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	5	/	2	0	1	1

Transaction ID: SA11D.4212

Amount of Each Receipt this Period
4.55

In-kind - food

B. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 934.99

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	6	/	2	0	1	1

Transaction ID: SA11D.4214

Amount of Each Receipt this Period
3.08

In-kind - food

C. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 970.99

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	7	/	2	0	1	1

Transaction ID: SA11D.4216

Amount of Each Receipt this Period
36.00

In-kind - ads

SUBTOTAL of Receipts This Page (optional) ► **43.63**

TOTAL 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 20 / 56

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Straw for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 980.98

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 7 / 2 0 1 1

Transaction ID: SA11D.4290

Amount of Each Receipt this Period

9.99

In-kind - fax services

B.

Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1016.98

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: SA11D.4218

Amount of Each Receipt this Period

36.00

In-kind - ads

C.

Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1026.95

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 4 / 2 0 1 1

Transaction ID: SA11D.4292

Amount of Each Receipt this Period

9.97

In-kind - Internet services

SUBTOTAL of Receipts This Page (optional)

55.96

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Straw for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1208.95

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	0	/	2	0	1	1

Transaction ID: SA11D.4220

Amount of Each Receipt this Period
182.00

In-kind - fuel and vehicle equipment

B. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1394.45

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	1	/	2	0	1	1

Transaction ID: SA11D.4222

Amount of Each Receipt this Period
185.50

In-kind - legal research materials

C. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1400.35

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	8	/	2	0	1	1

Transaction ID: SA11D.4224

Amount of Each Receipt this Period
5.90

In-kind - food

SUBTOTAL of Receipts This Page (optional) ► **373.40**

TOTAL 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 22 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Straw for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1446.65

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	8	/	2	0	1	1

Transaction ID: SA11D.4294

Amount of Each Receipt this Period
46.30

In-kind - fuel

B. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1490.73

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	1	1

Transaction ID: SA11D.4226

Amount of Each Receipt this Period
44.08

In-kind - fuel

C. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1497.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	1	/	2	0	1	1

Transaction ID: SA11D.4228

Amount of Each Receipt this Period
7.02

In-kind - food

SUBTOTAL of Receipts This Page (optional) ► **97.40**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Straw for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1508.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	1	/	2	0	1	1

Transaction ID: SA11D.4230
 Amount of Each Receipt this Period
 10.67
 In-kind - food

B. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1515.44

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	2	/	2	0	1	1

Transaction ID: SA11D.4232
 Amount of Each Receipt this Period
 7.02
 In-kind - food

C. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1524.36

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	3	/	2	0	1	1

Transaction ID: SA11D.4234
 Amount of Each Receipt this Period
 8.92
 In-kind - food

SUBTOTAL of Receipts This Page (optional) ► **26.61**

TOTAL 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 24 / 56

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Straw for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1988.51

Date of Receipt

M M / D D / Y Y Y Y
06 / 13 / 2011

Transaction ID: SA11D.4236

Amount of Each Receipt this Period

464.15

In-kind - lodgings

B.

Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1997.02

Date of Receipt

M M / D D / Y Y Y Y
06 / 13 / 2011

Transaction ID: SA11D.4238

Amount of Each Receipt this Period

8.51

In-kind - toiletries

C.

Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2000.02

Date of Receipt

M M / D D / Y Y Y Y
06 / 13 / 2011

Transaction ID: SA11D.4240

Amount of Each Receipt this Period

3.00

In-kind - parking

SUBTOTAL of Receipts This Page (optional)

475.66

TOTAL 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 25 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Straw for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2012.29

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	4	/	2	0	1	1

Transaction ID: SA11D.4242

Amount of Each Receipt this Period
12.27

In-kind - food

B. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2060.22

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	6	/	2	0	1	1

Transaction ID: SA11D.4244

Amount of Each Receipt this Period
47.93

In-kind - fuel

C. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2075.22

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	6	/	2	0	1	1

Transaction ID: SA11D.4246

Amount of Each Receipt this Period
15.00

In-kind - Democratic club dues

SUBTOTAL of Receipts This Page (optional) ► **75.20**

TOTAL 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 26 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Straw for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 16 / 2011

Transaction ID: SA11D.4248

Amount of Each Receipt this Period
2.50

In-kind - beverage

B. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 17 / 2011

Transaction ID: SA11D.4250

Amount of Each Receipt this Period
426.92

In-kind - telecommunicati-
on services

C. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 17 / 2011

Transaction ID: SA11D.4296

Amount of Each Receipt this Period
9.99

In-kind - fax services

SUBTOTAL of Receipts This Page (optional) ► **439.41**

TOTAL 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 27 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Straw for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2700.38

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	7	/	2	0	1	1

Transaction ID: SA11D.4298

Amount of Each Receipt this Period
185.75

In-kind - printing services

B. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2716.38

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	9	/	2	0	1	1

Transaction ID: SA11D.4252

Amount of Each Receipt this Period
16.00

In-kind - food

C. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2729.38

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	9	/	2	0	1	1

Transaction ID: SA11D.4254

Amount of Each Receipt this Period
13.00

In-kind - food

SUBTOTAL of Receipts This Page (optional) ► **214.75**

TOTAL 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 28 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Straw for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2744.38

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	0	/	2	0	1	1

Transaction ID: SA11D.4256

Amount of Each Receipt this Period
15.00

In-kind - Democratic club dues

B. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2750.98

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	0	/	2	0	1	1

Transaction ID: SA11D.4300

Amount of Each Receipt this Period
6.60

In-kind - Taco Bell food

C. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2950.98

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	0	/	2	0	1	1

Transaction ID: SA11D.4302

Amount of Each Receipt this Period
200.00

In-kind - handicap transportation

SUBTOTAL of Receipts This Page (optional) ► **221.60**

TOTAL 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 29 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Straw for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 3201.09

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	1	/	2	0	1	1

Transaction ID: SA11D.4304

Amount of Each Receipt this Period
250.11

In-kind - printing services

B. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 3206.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	9	/	2	0	1	1

Transaction ID: SA11D.4308

Amount of Each Receipt this Period
5.53

In-kind - food

C. Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Mailing Address 64711 Apple Ridge Rd

City State Zip Code
Goshen IN 46526

FEC ID number of contributing federal political committee. **C** H2IN02196

Name of Employer Self Occupation
Lawyer

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 3250.61

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	9	/	2	0	1	1

Transaction ID: SA11D.4310

Amount of Each Receipt this Period
43.99

In-kind - fuel

SUBTOTAL of Receipts This Page (optional) ► **299.63**

TOTAL 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 30 / 56
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input checked="" type="checkbox"/> 11d
		<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Straw for Congress

A.	Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw		Date of Receipt
	Mailing Address 64711 Apple Ridge Rd		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Goshen	IN	46526
	FEC ID number of contributing federal political committee.		<input type="text" value="C H2IN02196"/>
	Name of Employer Self	Occupation Lawyer	Transaction ID: SA11D.4312
Receipt For: 2012		Amount of Each Receipt this Period	
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text" value="78.39"/>	
<input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	In-kind - computer equipm-ent	
	<input type="text" value="3329.00"/>		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="78.39"/>
TOTAL This Period (last page this line number only)	<input type="text" value="3304.66"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 31 / 56
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 13a	<input type="checkbox"/> 13b
		<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full) Straw for Congress

A.	Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw, Esq.	Date of Receipt M M / D D / Y Y Y Y 06 / 25 / 2011
	Mailing Address 64711 Apple Ridge Rd	Transaction ID: SA13A.4109
	City State Zip Code Goshen IN 46526	Amount of Each Receipt this Period 0.00
	FEC ID number of contributing federal political committee. C H2IN02196	Loan to pay off credit card debt incurred for campaign
	Name of Employer Self Occupation Attorney	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	0.00

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Straw for Congress

A.	Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw	Transaction ID: SB17.4271 Date of Disbursement 04 / 06 / 2011
	Mailing Address 64711 Apple Ridge Rd	Amount of Each Disbursement this Period 10.00
	City Goshen State IN Zip Code 46526	
	Purpose of Disbursement In-kind - food Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw	Transaction ID: SB17.4273 Date of Disbursement 04 / 07 / 2011
	Mailing Address 64711 Apple Ridge Rd	Amount of Each Disbursement this Period 6.59
	City Goshen State IN Zip Code 46526	
	Purpose of Disbursement In-kind - food Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw	Transaction ID: SB17.4275 Date of Disbursement 04 / 07 / 2011
	Mailing Address 64711 Apple Ridge Rd	Amount of Each Disbursement this Period 7.50
	City Goshen State IN Zip Code 46526	
	Purpose of Disbursement In-kind - food -- meeting with students Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

24.09

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Straw for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - ads</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4277</p> <p>Date of Disbursement 04 / 10 / 2011</p> <p>Amount of Each Disbursement this Period 23.39</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - fuel</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4279</p> <p>Date of Disbursement 04 / 10 / 2011</p> <p>Amount of Each Disbursement this Period 49.25</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - USPS</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4165</p> <p>Date of Disbursement 04 / 13 / 2011</p> <p>Amount of Each Disbursement this Period 49.98</p>

SUBTOTAL of Disbursements This Page (optional) ▶

122.62

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Straw for Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - food</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4167</p> <p>Date of Disbursement MM / DD / YYYY 04 / 13 / 2011</p> <p>Amount of Each Disbursement this Period 20.00</p>
<p>B. Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - ads</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4281</p> <p>Date of Disbursement MM / DD / YYYY 04 / 13 / 2011</p> <p>Amount of Each Disbursement this Period 25.70</p>
<p>C. Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - fuel</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4169</p> <p>Date of Disbursement MM / DD / YYYY 04 / 15 / 2011</p> <p>Amount of Each Disbursement this Period 9.26</p>

SUBTOTAL of Disbursements This Page (optional) ▶

54.96

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Straw for Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - Internet services</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4283</p> <p>Date of Disbursement 04 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 7.28</p>
<p>B. Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - coffee</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4171</p> <p>Date of Disbursement 04 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 3.80</p>
<p>C. Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - newspaper online research</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4173</p> <p>Date of Disbursement 04 / 21 / 2011</p> <p>Amount of Each Disbursement this Period 6.95</p>

SUBTOTAL of Disbursements This Page (optional) ▶

18.03

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Straw for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - Internet services</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4285</p> <p>Date of Disbursement 04 / 21 / 2011</p> <p>Amount of Each Disbursement this Period 2.65</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - Internet services</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4287</p> <p>Date of Disbursement 04 / 21 / 2011</p> <p>Amount of Each Disbursement this Period 15.34</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - food</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4175</p> <p>Date of Disbursement 04 / 23 / 2011</p> <p>Amount of Each Disbursement this Period 7.92</p>

SUBTOTAL of Disbursements This Page (optional) ▶

25.91

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Straw for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - fuel</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4177</p> <p>Date of Disbursement 04 / 23 / 2011</p> <p>Amount of Each Disbursement this Period 59.18</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - Internet services</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4289</p> <p>Date of Disbursement 04 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 9.97</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - Indiana government research</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4179</p> <p>Date of Disbursement 04 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 19.38</p>

SUBTOTAL of Disbursements This Page (optional) ▶

88.53

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Straw for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - 3rd district dinner - guest</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4181</p> <p>Date of Disbursement 04 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 35.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - advertising</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4183</p> <p>Date of Disbursement 04 / 28 / 2011</p> <p>Amount of Each Disbursement this Period 25.95</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - USPS certified mail FEC filing, campaign creation</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4185</p> <p>Date of Disbursement 05 / 02 / 2011</p> <p>Amount of Each Disbursement this Period 4.44</p>

SUBTOTAL of Disbursements This Page (optional) ▶

65.39

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Straw for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - advertising</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4187</p> <p>Date of Disbursement 05 / 02 / 2011</p> <p>Amount of Each Disbursement this Period 30.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - fuel</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4189</p> <p>Date of Disbursement 05 / 04 / 2011</p> <p>Amount of Each Disbursement this Period 60.56</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - food</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4191</p> <p>Date of Disbursement 05 / 05 / 2011</p> <p>Amount of Each Disbursement this Period 7.13</p>

SUBTOTAL of Disbursements This Page (optional) ▶

97.69

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
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NAME OF COMMITTEE (In Full)
Straw for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - food</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4193</p> <p>Date of Disbursement 05 / 06 / 2011</p> <p>Amount of Each Disbursement this Period 30.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - vehicle expense</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4195</p> <p>Date of Disbursement 05 / 07 / 2011</p> <p>Amount of Each Disbursement this Period 6.18</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - vehicle expense</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4197</p> <p>Date of Disbursement 05 / 07 / 2011</p> <p>Amount of Each Disbursement this Period 5.01</p>

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41.19

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Straw for Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - Kosciusko JJ Dinner</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4199</p> <p>Date of Disbursement 05 / 07 / 2011</p> <p>Amount of Each Disbursement this Period 50.00</p>
<p>B. Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - fuel</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4201</p> <p>Date of Disbursement 05 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 37.49</p>
<p>C. Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - ads</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4203</p> <p>Date of Disbursement 05 / 09 / 2011</p> <p>Amount of Each Disbursement this Period 5.32</p>

SUBTOTAL of Disbursements This Page (optional) ▶

92.81

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Straw for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - USPS</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4205</p> <p>Date of Disbursement 05 / 10 / 2011</p> <p>Amount of Each Disbursement this Period 18.30</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - SB Tribune subscription</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4207</p> <p>Date of Disbursement 05 / 11 / 2011</p> <p>Amount of Each Disbursement this Period 13.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - fuel</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4209</p> <p>Date of Disbursement 05 / 12 / 2011</p> <p>Amount of Each Disbursement this Period 60.98</p>

SUBTOTAL of Disbursements This Page (optional)	92.28
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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Straw for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - food</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4211</p> <p>Date of Disbursement 05 / 12 / 2011</p> <p>Amount of Each Disbursement this Period 9.68</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - food</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4213</p> <p>Date of Disbursement 05 / 15 / 2011</p> <p>Amount of Each Disbursement this Period 4.55</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - food</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4215</p> <p>Date of Disbursement 05 / 16 / 2011</p> <p>Amount of Each Disbursement this Period 3.08</p>

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17.31

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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Straw for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - ads</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4217</p> <p>Date of Disbursement 05 / 17 / 2011</p> <p>Amount of Each Disbursement this Period 36.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - fax services</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4291</p> <p>Date of Disbursement 05 / 17 / 2011</p> <p>Amount of Each Disbursement this Period 9.99</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - ads</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4219</p> <p>Date of Disbursement 05 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 36.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

81.99

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Straw for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - Internet services</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4293</p> <p>Date of Disbursement 05 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 9.97</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - fuel and vehicle equipment</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4221</p> <p>Date of Disbursement 05 / 30 / 2011</p> <p>Amount of Each Disbursement this Period 182.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - legal research materials</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4223</p> <p>Date of Disbursement 06 / 01 / 2011</p> <p>Amount of Each Disbursement this Period 185.50</p>

SUBTOTAL of Disbursements This Page (optional) ▶

377.47

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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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Straw for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - food</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4225</p> <p>Date of Disbursement 06 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 5.90</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - fuel</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4295</p> <p>Date of Disbursement 06 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 46.30</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - fuel</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4227</p> <p>Date of Disbursement 06 / 10 / 2011</p> <p>Amount of Each Disbursement this Period 44.08</p>

SUBTOTAL of Disbursements This Page (optional) ▶

96.28

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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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Straw for Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - food</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4229</p> <p>Date of Disbursement 06 / 11 / 2011</p> <p>Amount of Each Disbursement this Period 7.02</p>
<p>B. Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - food</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4231</p> <p>Date of Disbursement 06 / 11 / 2011</p> <p>Amount of Each Disbursement this Period 10.67</p>
<p>C. Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - food</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4233</p> <p>Date of Disbursement 06 / 12 / 2011</p> <p>Amount of Each Disbursement this Period 7.02</p>

SUBTOTAL of Disbursements This Page (optional) ▶

24.71

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Straw for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - food</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4235</p> <p>Date of Disbursement 06 / 13 / 2011</p> <p>Amount of Each Disbursement this Period 8.92</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - lodgings</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4237</p> <p>Date of Disbursement 06 / 13 / 2011</p> <p>Amount of Each Disbursement this Period 464.15</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - toiletries</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4239</p> <p>Date of Disbursement 06 / 13 / 2011</p> <p>Amount of Each Disbursement this Period 8.51</p>

SUBTOTAL of Disbursements This Page (optional) ▶

481.58

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Straw for Congress

A.	Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw	Transaction ID: SB17.4241 Date of Disbursement 06 / 13 / 2011
	Mailing Address 64711 Apple Ridge Rd	Amount of Each Disbursement this Period 3.00
	City Goshen State IN Zip Code 46526	
	Purpose of Disbursement In-kind - parking Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw	Transaction ID: SB17.4243 Date of Disbursement 06 / 14 / 2011
	Mailing Address 64711 Apple Ridge Rd	Amount of Each Disbursement this Period 12.27
	City Goshen State IN Zip Code 46526	
	Purpose of Disbursement In-kind - food Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw	Transaction ID: SB17.4245 Date of Disbursement 06 / 16 / 2011
	Mailing Address 64711 Apple Ridge Rd	Amount of Each Disbursement this Period 47.93
	City Goshen State IN Zip Code 46526	
	Purpose of Disbursement In-kind - fuel Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	63.20
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Straw for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - Democratic club dues</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4247</p> <p>Date of Disbursement 06 / 16 / 2011</p> <p>Amount of Each Disbursement this Period 15.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - beverage</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4249</p> <p>Date of Disbursement 06 / 16 / 2011</p> <p>Amount of Each Disbursement this Period 2.50</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - telecommunication services</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4251</p> <p>Date of Disbursement 06 / 17 / 2011</p> <p>Amount of Each Disbursement this Period 426.92</p>

SUBTOTAL of Disbursements This Page (optional) ▶

444.42

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Straw for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Transaction ID: SB17.4297
Date of Disbursement

Mailing Address 64711 Apple Ridge Rd

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	1	1

City State Zip Code
Goshen IN 46526

Amount of Each Disbursement this Period

9.99

Purpose of Disbursement
In-kind - fax services

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IN District: 02

B.

Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Transaction ID: SB17.4299
Date of Disbursement

Mailing Address 64711 Apple Ridge Rd

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	1	1

City State Zip Code
Goshen IN 46526

Amount of Each Disbursement this Period

185.75

Purpose of Disbursement
In-kind - printing services

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IN District: 02

C.

Full Name (Last, First, Middle Initial)
Mr. Andrew U D Straw

Transaction ID: SB17.4253
Date of Disbursement

Mailing Address 64711 Apple Ridge Rd

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	1

City State Zip Code
Goshen IN 46526

Amount of Each Disbursement this Period

16.00

Purpose of Disbursement
In-kind - food

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IN District: 02

SUBTOTAL of Disbursements This Page (optional) ►

211.74

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

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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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Straw for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - food</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4255</p> <p>Date of Disbursement 06 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 13.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - Democratic club dues</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4257</p> <p>Date of Disbursement 06 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 15.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - Taco Bell food</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4301</p> <p>Date of Disbursement 06 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 6.60</p>

SUBTOTAL of Disbursements This Page (optional)	34.60
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Straw for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - handicap transportation</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4303</p> <p>Date of Disbursement 06 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 200.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - printing services</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4305</p> <p>Date of Disbursement 06 / 21 / 2011</p> <p>Amount of Each Disbursement this Period 250.11</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - food</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4309</p> <p>Date of Disbursement 06 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 5.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

455.64

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Straw for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - fuel</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4311</p> <p>Date of Disbursement 06 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 43.99</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement In-kind - computer equipment</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4313</p> <p>Date of Disbursement 06 / 30 / 2011</p> <p>Amount of Each Disbursement this Period 78.39</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Straw for Congress</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement Data Services</p> <p>Candidate Name Straw for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4158</p> <p>Date of Disbursement 06 / 06 / 2011</p> <p>Amount of Each Disbursement this Period 99.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

221.38

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Straw for Congress

<p>A. Full Name (Last, First, Middle Initial) Straw for Congress</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement office equipment</p> <p>Candidate Name Straw for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4159</p> <p>Date of Disbursement 06 / 06 / 2011</p> <p>Amount of Each Disbursement this Period 191.50</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Straw for Congress</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement fuel</p> <p>Candidate Name Straw for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4160</p> <p>Date of Disbursement 06 / 06 / 2011</p> <p>Amount of Each Disbursement this Period 41.56</p> <p>002 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Straw for Congress</p> <p>Mailing Address 64711 Apple Ridge Rd</p> <p>City Goshen State IN Zip Code 46526</p> <p>Purpose of Disbursement food at meeting</p> <p>Candidate Name Straw for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4154</p> <p>Date of Disbursement 06 / 22 / 2011</p> <p>Amount of Each Disbursement this Period 8.74</p> <p>007 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

241.80

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

3475.62

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 56 / 56
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
Straw for Congress

Transaction ID: SC/10.4109

LOAN SOURCE Full Name (Last, First, Middle Initial) Mr. Andrew U D Straw, Esq. - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 64711 Apple Ridge Rd	
City Goshen State IN ZIP Code 46526	

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

TERMS

Date Incurred M M 06 D D 25 Y Y Y Y 2011	Date Due revolving	Interest Rate 27.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
TOTALS This Period (last page in this line only)	<input type="text" value="0.00"/>

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