

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

DAVID E VOGT III FOR CONGRESS CAMPAIGN COMMITTEE

ADDRESS (number and street)

PO BOX 238

Check if different than previously reported. (ACC)

BRUNSWICK

MD

21716

2. **FEC IDENTIFICATION NUMBER**

C C00543900

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

MD

06

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 DAVID DAVID E VOGT III FOR CONGRESS

Signature of Treasurer DAVID DAVID E VOGT III FOR CONGRESS

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**DAVID E VOGT III FOR CONGRESS CAMPAIGN COMMITTEE**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	8102.00	8102.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	8102.00	8102.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	4548.66	4548.66
(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)).....	4548.66	4548.66
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	3553.34	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	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

**DAVID E VOGT III FOR CONGRESS CAMPAIGN COMMITTEE**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	6500.00	6500.00
(ii) Unitemized.....	1602.00	1602.00
(iii) TOTAL of contributions from individuals ▶	8102.00	8102.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	8102.00	8102.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	8102.00	8102.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	4548.66	4548.66
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	4548.66	4548.66

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	8102.00
25. SUBTOTAL (add Line 23 and Line 24).....	8102.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	4548.66
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	3553.34

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 11
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DAVID E VOGT III FOR CONGRESS CAMPAIGN COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**ERIK CRUZ**

Mailing Address 37880 SPUR DRIVE

City MURRIETA State CA Zip Code 92563

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

Name of Employer NC PROMOTIONS Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 13 / 2013

**Transaction ID : SA11AI.4124**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 6977 NAVAJO ROAD SUITE 217

City SAN DIEGO State CA Zip Code 92119

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

Name of Employer US NAVY Occupation CIVIL SERVANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 06 / 2013

**Transaction ID : SA11AI.4116**

Amount of Each Receipt this Period  
 300.00

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

Mailing Address 18185 OLD MORRIS HIGHWAY

City OKMULGEE State OK Zip Code 74447

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

Name of Employer UNKNOWN Occupation UNKNOWN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 07 / 2013

**Transaction ID : SA11AI.4120**

Amount of Each Receipt this Period  
 250.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 11
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DAVID E VOGT III FOR CONGRESS CAMPAIGN COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**KEVIN RYAN**

Mailing Address **215 BIRCH AVE**

City **MELBOURNE BEACH** State **FL** Zip Code **32951**

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

Name of Employer **SELF EMPLOYED** Occupation **CONSULTANT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 07 / 2013**

**Transaction ID : SA11AI.4134**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **1201 MOORE SPRING CT**

City **BRUNSWICK** State **MD** Zip Code **21716**

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

Name of Employer **DELL CORPORATION** Occupation **IT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 06 / 2013**

**Transaction ID : SA11AI.4118**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **P. O. BOX 11**

City **DUSHORE** State **PA** Zip Code **18614**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 17 / 2013**

**Transaction ID : SA11AI.4106**

Amount of Each Receipt this Period  
**2600.00**

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

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

**3100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 11			
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15				

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NAME OF COMMITTEE (In Full)  
**DAVID E VOGT III FOR CONGRESS CAMPAIGN COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**FRANK STABRYLA**

Mailing Address **P. O. BOX 11**

City **DUSHORE** State **PA** Zip Code **18614**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
**04 / 17 / 2013**

**Transaction ID : SA11AI.4104**

Amount of Each Receipt this Period  
**2600.00**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

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

**2600.00**

**6500.00**

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 11			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**DAVID E VOGT III FOR CONGRESS CAMPAIGN COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. DPI</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2013
Mailing Address 5716-G INDUSTRY LANE		Amount of Each Disbursement this Period 550.00 <b>Transaction ID : SB17.4169</b>
City FREDERICK	State MD	
Zip Code 21704		Category/ Type 001
Purpose of Disbursement WEB DESIGN		
Candidate Name <b>DAVID DAVID E VOGT III FOR CONGRESS</b>		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MD District: 06	

Full Name (Last, First, Middle Initial) <b>B. DPI</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2013
Mailing Address 5716-G INDUSTRY LANE		Amount of Each Disbursement this Period 550.00 <b>Transaction ID : SB17.4171</b>
City FREDERICK	State MD	
Zip Code 21704		Category/ Type 001
Purpose of Disbursement WEB DESIGN		
Candidate Name <b>DAVID DAVID E VOGT III FOR CONGRESS</b>		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MD District: 06	

Full Name (Last, First, Middle Initial) <b>C. DPI</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2013
Mailing Address 5716-G INDUSTRY LANE		Amount of Each Disbursement this Period 411.81 <b>Transaction ID : SB17.4172</b>
City FREDERICK	State MD	
Zip Code 21704		Category/ Type 006
Purpose of Disbursement PRINTING		
Candidate Name <b>DAVID DAVID E VOGT III FOR CONGRESS</b>		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MD District: 06	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1511.81
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 11
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**DAVID E VOGT III FOR CONGRESS CAMPAIGN COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. ELECTION IMPACT GROUP</b>		Date of Disbursement MM / DD / YYYY 05 / 03 / 2013
Mailing Address 18 31ST ST		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.4163</b>
City GULFPORT State MS Zip Code 39507	Purpose of Disbursement CONSULTING 001 Category/Type	
Candidate Name <b>DAVID DAVID E VOGT III FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

Full Name (Last, First, Middle Initial) <b>B. ELECTION IMPACT GROUP</b>		Date of Disbursement MM / DD / YYYY 06 / 04 / 2013
Mailing Address 18 31ST ST		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB17.4161</b>
City GULFPORT State MS Zip Code 39507	Purpose of Disbursement CONSULTING 001 Category/Type	
Candidate Name <b>DAVID DAVID E VOGT III FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

Full Name (Last, First, Middle Initial) <b>C. GODADDY.COM</b>		Date of Disbursement MM / DD / YYYY 06 / 19 / 2013
Mailing Address 14455 N HAYDEN ROAD SUITE 226		Amount of Each Disbursement this Period 107.76 <b>Transaction ID : SB17.4168</b>
City SCOTTSDALE State AZ Zip Code 85260	Purpose of Disbursement WEB HOSTING 001 Category/Type	
Candidate Name <b>DAVID DAVID E VOGT III FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1357.76
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 11			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**DAVID E VOGT III FOR CONGRESS CAMPAIGN COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. HAROLD OTIS</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2013
Mailing Address 6705 CHRISTMASBERRY CT		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.4181</b>
City MIDDLETOWN State MD Zip Code 21769	Purpose of Disbursement CONSULTING 001 Category/Type	
Candidate Name <b>DAVID DAVID E VOGT III FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2013
Mailing Address		Amount of Each Disbursement this Period 7.55 <b>Transaction ID : SB17.4188</b>
City State Zip Code	Purpose of Disbursement PAYPAL FEES 003 Category/Type	
Candidate Name <b>DAVID DAVID E VOGT III FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2013
Mailing Address		Amount of Each Disbursement this Period 6.10 <b>Transaction ID : SB17.4189</b>
City State Zip Code	Purpose of Disbursement PAYPAL FEES 003 Category/Type	
Candidate Name <b>DAVID DAVID E VOGT III FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1013.65
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 11	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**DAVID E VOGT III FOR CONGRESS CAMPAIGN COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2013
Mailing Address		Amount of Each Disbursement this Period 0.66 <b>Transaction ID : SB17.4190</b>
City	State Zip Code	
Purpose of Disbursement PAYPAL FEES	Category/Type 003	
Candidate Name <b>DAVID DAVID E VOGT III FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>		Date of Disbursement MM / DD / YYYY 06 / 26 / 2013
Mailing Address		Amount of Each Disbursement this Period 0.88 <b>Transaction ID : SB17.4191</b>
City	State Zip Code	
Purpose of Disbursement PAYPAL FEES	Category/Type 003	
Candidate Name <b>DAVID DAVID E VOGT III FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1.54
<b>TOTAL</b> This Period (last page this line number only).....	3884.76